

State of Delaware

# Child Protection Accountability Commission (CPAC)



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## MISSION

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

## **FISCAL YEAR 2016 CPAC ANNUAL REPORT**

*July 1, 2015 - June 30, 2016*



The Honorable Jack Markell, Governor

State of Delaware



C. Malcolm Cochran, IV, Esquire, Chair

Child Protection Accountability Commission

State of Delaware

Child Protection Accountability Commission

c/o Office of the Child Advocate

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# Our Membership—FY16

<p><b>Secretary of the Department of Services for Children, Youth and Their Families</b>  <b>16 Del. C. §912(a)(1)</b>                      The Honorable Jennifer Ranji, Cabinet Secretary                      The Honorable Carla Benson Green, Cabinet Secretary</p>	<p><b>Director of the Division of Family Services</b>  <b>16 Del. C. §912(a)(2)</b>                      Victoria Kelly, Psy.D., Director                      Shirley Roberts, Director</p>
<p><b>Two Representatives from the Attorney General's Office</b>  <b>16 Del. C. §912(a)(3)</b>                      Patricia Dailey Lewis, Esquire, Deputy Attorney General, Director, Family Division                      LaKresha Roberts, Esquire, Deputy Attorney General, Director, Family Division                      Josette Manning, Esquire, Deputy Attorney General, Director, Special Victims Unit</p>	<p><b>Two Members of the Family Court</b>  <b>16 Del. C. §912(a)(4)</b>                      The Honorable Michael K. Newell, Chief Judge                      The Honorable Joelle Hitch, Judge</p>
<p><b>One Member of the House of Representatives</b>  <b>16 Del. C. §912(a)(5)</b>                      The Honorable Melanie George Smith, State Representative</p>	<p><b>One Member of the Senate</b>  <b>16 Del. C. §912(a)(6)</b>                      Senator Margaret Rose Henry</p>
<p><b>Chair of the Child Placement Review Board</b>  <b>16 Del. C. §912(a)(7)</b>                      Carolyn Walker, Chair                      Neal Tash, Chair</p>	<p><b>Secretary of the Department of Education</b>  <b>16 Del. C. §912(a)(8)</b>                      Susan Haberstroh, Education Associate and Policy Advisor</p>
<p><b>Director of the Division of Prevention and Behavioral Health Services</b>  <b>16 Del. C. §912(a)(9)</b>                      Susan Cycyk, M.Ed., Director</p>	<p><b>Chair of the Domestic Violence Coordinating Council</b>  <b>16 Del. C. §912(a)(10)</b>                      Eleanor Torres, Esquire, Executive Director</p>
<p><b>Superintendent of the Delaware State Police</b>  <b>16 Del. C. §912(a)(11)</b>                      Colonel Nathaniel McQueen, Superintendent</p>	<p><b>Chair of the Child Death Review Commission</b>  <b>16 Del. C. §912(a)(12)</b>                      Garrett Colmorgen, M.D., Chair</p>
<p><b>Investigation Coordinator</b>  <b>16 Del. C. §912(a)(13)</b>                      Jennifer Donahue, Esquire</p>	<p><b>One youth or young adult who has experienced foster care in Delaware</b>  <b>16 Del. C. §912(a)(14)</b>                      Nicole Byers Magnusson</p>
<p><b>One Representative from the Public Defender's Office</b>  <b>16 Del. C. §912(a)(15)</b>                      Kathryn Lunger, Esquire, Statewide Director, Family Court Practice Group</p>	<p><b>At-large Member - Medical Community</b>  <b>16 Del. C. §912(a)(16)</b>                      Allan De Jong, M.D., Medical Director, Children at Risk, CARE Program, Alfred I. duPont Hospital for Children</p>
<p><b>At-large Member - Interagency Committee on Adoption</b>  <b>16 Del. C. §912(a)(16)</b>                      Mary Lou Edgar, Member of the Interagency Committee on Adoption</p>	<p><b>At-large Member - Law Enforcement</b>  <b>16 Del. C. §912(a)(16)</b>                      Captain Robert McLucas, New Castle County Police Department</p>
<p><b>At-large Members - Child Protection Community</b>  <b>16 Del. C. §912(a)(16)</b>                      C. Malcolm Cochran, IV, Esquire, CPAC Chair</p>	<p><b>At-large Members - Child Protection Community</b>  <b>16 Del. C. §912(a)(16)</b>                      Randall Williams, Chief Executive Officer, Children's Advocacy Center of Delaware</p>
<p><b>At-large Members - Child Protection Community</b>  <b>16 Del. C. §912(a)(16)</b>                      Janice Mink, Citizen</p>	<p><b>At-large Members - Child Protection Community</b>  <b>16 Del. C. §912(a)(16)</b>                      Ellen Levin, Citizen</p>

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# Executive Summary

In Fiscal Year 2016, 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, normalcy for children experiencing foster care and other statutes; permanency for adolescents; substance exposed infants; 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 Review Commission (CDRC) continued their collaborative statutory affiliation through Fiscal Year 2016, meeting jointly on one occasion during the fiscal year.

CPAC accomplished the following in FY16:

- ◇ Trained over 9,700 educators, healthcare providers and members of the public on their statutory, child abuse mandatory reporting obligations through onsite and online training;
- ◇ Advocated to the Joint Finance Committee to emphasize the urgent need for statutory compliance with DFS case-load standards;
- ◇ Established the Child Abuse Medical Response Committee, which is dedicated to increasing the state's child abuse medical experts and developing a statewide protocol for determining the need for medical evaluations in child abuse cases;
- ◇ Created the Child Abuse and Neglect Steering Committee to provide oversight for the investigation and review of deaths and near deaths of abused and neglected children;
- ◇ Recognized as a national leader on responding to cases of child torture and a Delaware Panel was invited to present an advanced workshop at the Institute on Violence, Abuse and Trauma's (IVAT) *International Training Summit on Preventing, Assessing & Treating Trauma Across the Lifespan*;
- ◇ Developed a strategic plan in collaboration with Casey Family Programs to improve the educational outcomes of children in foster care;
- ◇ Submitted an application for In-Depth Technical Assistance for Substance Exposed Infants (SEI-IDTA) to the National Center on Substance Abuse and Child Welfare;
- ◇ Submitted the CJA Annual Report & Grant Application - Approved by the Administration on Children, Youth and Families on July 8, 2016; and,
- ◇ Celebrated two achievements with long-term CPAC members, Janice Mink and C. Malcolm Cochran, IV, Esquire.

CPAC's Fiscal Year 2016 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.

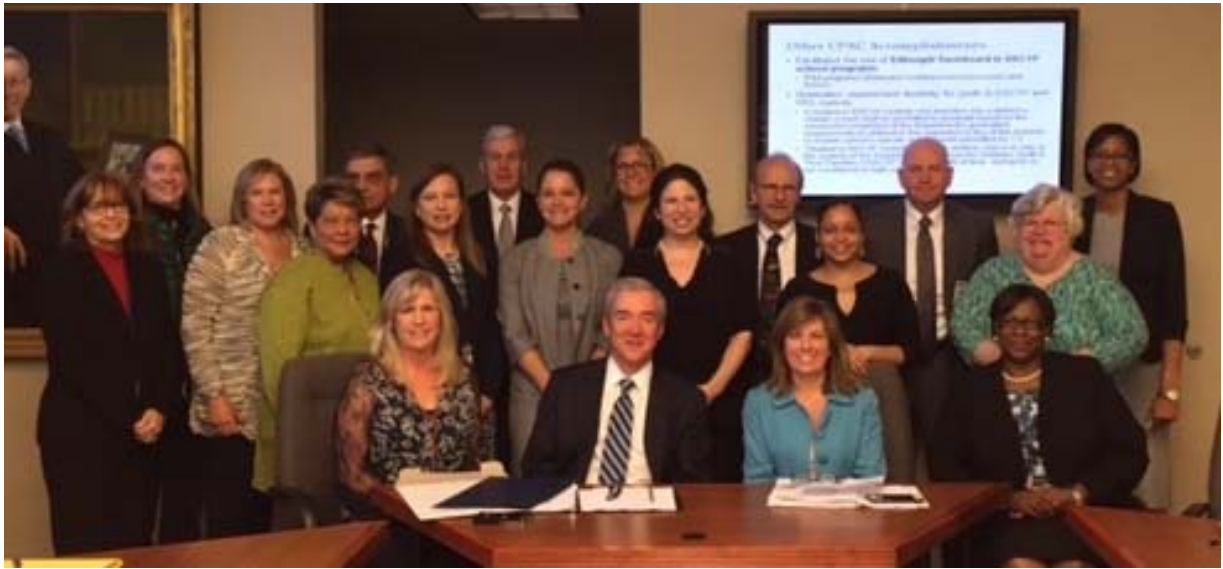


Figure 1. CPAC Commission Members, May 11, 2016

### The statutory duties of CPAC (16 Del. C. § 931(b)):

- (1) 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 protection system of the Division of Family Services, the Division of Prevention and Behavioral Health Services, the Office of the Attorney General, 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 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.
- (5) Review and make recommendations concerning the well-being of Delaware's abused, neglected, and dependent children including issues relating to foster care, adoption, mental health services, victim services, education, rehabilitation, substance abuse, and independent living.

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- (6) Provide the following reports to the Governor:
- An annual summary of the Commission's work and recommendations, including work of the Office of the Child Advocate, with copies thereof sent to the General Assembly.
  - A quarterly written report of the Commission's activities and findings, in the form of minutes, made available also to the General Assembly and the public.
- (7) Investigate and review deaths or near deaths of abused or neglected children.
- (8) Coordinate with the Child Death Review Commission to provide statistics and other necessary information to the Child Death Review Commission related to the Commission's investigation and review of deaths of abused or neglected children.
- (9) Meet annually with the Child Death Review Commission to jointly discuss the public recommendations generated from reviews conducted under § 932 of this title. This meeting shall be open to the public.
- (10) Adopt rules or regulations for the administration of its duties or this subchapter, as it deems necessary.



### *Children & Families First Honors Janice Mink*

On November 17, 2015, Janice Mink, was honored by Children & Families First as the 2015 recipient of the Muriel E. Gilman Family Advocacy Award. The Family Advocacy Award is presented annually to an individual with a strong voice for children and families. In the 1990s, Ms. Mink advocated for the creation of the Office of the Child Advocate (OCA) as well as for legislation allowing for children's voices to be heard in court proceedings. Ms. Mink serves as a CPAC Commissioner and Co-Chair of the Child Abuse and Neglect Panel.

### *C. Malcolm Cochran, IV, Esquire Celebrates 10 Years as CPAC Chair*

C. Malcolm Cochran, IV, Esquire was recognized by CPAC Commissioners on May 11, 2016 for his 10 years of service as the CPAC Chair. Mr. Cochran was presented with a House of Representatives Tribute by Representative Melanie George Smith, who also serves as a CPAC Commissioner. Several CPAC Commissioners offered remarks about Mr. Cochran's impact on the child welfare community, and Tania Culley, Esquire, Executive Director of CPAC, presented Mr. Cochran with a service award. The Commissioners and staff wish to thank Mr. Cochran for his service and leadership.



### **Children's Justice Act (CJA) Task Force**

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, 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 5 and 19.**

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### **Delaware's Citizen Review Panel (CRP)**

In 2004, CPAC was designated by Delaware's Children's Department, in its state plan under the federal Child Abuse Prevention and Treatment Act (CAPTA), to serve as Delaware's 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. For more detail, please see **Page 20.**

# 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 Department of Services for Children, Youth and Their Families (DSCYF or the 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 FY16, DFS received 20,778 reports of child abuse, neglect or dependency, which was a 9% increase over the prior fiscal year and the largest number of reports ever received in a fiscal year by DFS. DFS screened in 8,951 (43%) of those reports, and substantiated 1,239 (14%) of the screened in 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 crime 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 or mental health screening. Death and near death cases are also referred to CPAC for an investigation and review. In an effort to ensure system wide coordination, all cases involving serious physical injury and death 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 CDRC, the DOJ established the Child Victims Unit. In 2016, that Unit was expanded to handle all felony level, criminal child abuse cases involving the death or serious physical injury of a child, as well as all sexual abuse cases. It was renamed the Special Victims Unit. 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 the children in the legal custody of DSCYF during Fiscal Year 2016. As of June 30, 2016, 718 children were in DSCYF custody, a 7% increase from the prior fiscal year. Approximately, 33% of these children were 4 years of age or younger; 16% were 5 to 8 years of age; 16% were ages 9 to 12; and 34% were 13 to 17 years of age. By county, 58% reside in New Castle County, 23% reside in Kent County, and 19% reside in Sussex County. 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.



# Committees

CPAC accomplished many of its FY16 goals through the work of its nine Committees, including a Joint Committee with the Child Death Review 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 was led by Patricia Dailey Lewis, Esquire, Director of the Family Division at the DOJ, until she retired at the end of calendar year 2015. LaKresha Roberts, Esquire is the Committee's current Chair. The membership includes representatives from the following agencies: Alfred I. duPont Hospital for Children, CAC, CDRC, Delaware Disabilities Council, DOJ, DFS, Domestic Violence Coordinating Council, OCA and Office of the Investigation Coordinator.

During the fiscal year, the Abuse Intervention Committee provided oversight of the activities funded by CPAC through federal CJA grant funds. These activities included: the Training Coordinator position; the Delaware Panel Presentation at the IVAT's *International Training Summit on Preventing, Assessing & Treating Trauma Across the Lifespan*; the mandatory reporting training programs; the *Delaware Multidisciplinary Child Abuse Investigative Team Training*; the online training system, surveys, training software and videography services; and the CJA Grantee Meeting.

In addition, the Commission received quarterly progress updates on the additional activities identified under the CJA grant's purview but carried out by CPAC through one of its other Committees. The activities for the 12-month grant period were as follows: development of best practice guidelines for the investigation of child abuse cases involving sexual abuse, serious physical injury or death; creation of the *Delaware Multidisciplinary Team Guidelines for the Child Abuse Medical Response*; review of child abuse and neglect death and near death cases; response to substance-exposed infants and medically fragile children; and use of the CPAC Data Dashboards to inform system improvements in child welfare. The planning and execution of these activities is further delineated in this report under the associated CPAC Committee.

Furthermore, the progress on all of the aforementioned activities was included in the 2016 CJA Annual Progress Report and Grant Application, which was submitted to the Administration on Children, Youth and Families on May 31, 2016 and approved on July 8, 2016. The report is available at the following link: [http://courts.delaware.gov/childadvocate/cpac/cja\\_taskforce.aspx](http://courts.delaware.gov/childadvocate/cpac/cja_taskforce.aspx).

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.

# Committees

## The Child Abuse and Neglect Steering Committee

**Charge:** To supervise the confidential investigation and retrospective review of deaths and near deaths of abused or neglected children pursuant to 16 Del. C. §§ 932-935.

**Membership:** The Committee is led by Garrett Colmorgen, M.D., Chair of the Child Death Review Commission. The membership includes representatives from the following agencies: Alfred I. duPont Hospital for Children, CPAC, CDRC, CAC, Delaware State Police (DSP), DOJ, DSCYF, Family Court and OCA.

During FY16, CPAC was vested with state statutory authority to investigate and review deaths or near deaths of abused or neglected children. This responsibility was transferred from CDRC to CPAC on September 10, 2015. Then, at its meeting of October 14, 2015, CPAC ratified the Child Abuse and Neglect (CAN) Steering Committee and CAN Panel. In addition, CPAC authorized the CAN Panel to conduct the confidential investigations and retrospective reviews on behalf of CPAC and charged the CAN Steering Committee with providing oversight of these duties. As such, all activities of the CAN Steering Committee and CAN Panel are statutorily confidential. However, the statute allows for the Commission to release system-wide recommendations arising from an investigation and review to the Governor, General Assembly and public.

The CAN Steering Committee met quarterly to review and approve the work of the CAN Panel. Between September 2015 and April 2016, the CAN Panel conducted retrospective reviews on 51 cases - 18 deaths and 33 near deaths. The result was 307 findings across six system areas. As a result of these findings, the CAN Steering Committee made several system-wide recommendations to the Governor, which are available at the following link: [http://courts.delaware.gov/childadvocate/cpac/cpac\\_reports.aspx](http://courts.delaware.gov/childadvocate/cpac/cpac_reports.aspx). The recommendations are also summarized below.

First, the Committee found that opportunities for improvement exist in the law enforcement and multidisciplinary team (MDT) response for criminally investigating child abuse cases, particularly around compliance with the Memorandum of Understanding (MOU) between DSCYF, the CAC, DOJ and Delaware Police Departments; medical exams; scene investigations; doll re-enactments; interviews; and documentation. In addition to charging the CPAC Training Committee with addressing the issues in the new MOU, the Committee tasked the Department of Justice and law enforcement representatives on CPAC with immediately responding to the ongoing statewide problem and presenting an interim solution at the May 2016 CPAC meeting prior to the implementation of a new MOU in 2017. The law enforcement representatives concluded that interim training would be provided.

Second, the Committee identified opportunities for improvement in the medical response to child abuse and neglect cases, specifically with helping medical professionals to recognize the signs of suspected child abuse, to consult with hospital forensic teams, to seek alternative transportation for abused children from the PCP to the hospital, to make home visiting program referrals for at-risk newborns and to utilize a plan of safe care for the discharge of substance exposed infants. It was recommended by the Committee that these findings be incorporated into the bi-annual medical professionals training and shared in area hospital meetings. As for the multidisciplinary response on substance exposed infants, CPAC and the Child Death Review Commission will continue their work in the Joint Committee on Substance Exposed and Medically Fragile Infants, and CPAC will continue to champion the passage of a state law, implementing federal law for reporting substance exposed infants and developing a multidisciplinary plan of safe care.

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Next, the Committee made multiple findings that demonstrate a continual struggle by DFS with the proper use and development of safety plans, appropriate use of risk assessments, and responses to cases that involve unresolved risks, such as domestic violence and substance use. In response to the findings, the Committee requested a presentation from the DSCYF Cabinet Secretary and the DFS Director at the May 2016 CPAC meeting as to the internal steps being taken to address these findings. In May 2016, the Honorable Carla Benson-Green highlighted the actions taken by DFS to make system improvements, committed to continuous staff development around these issues, and will continue to keep CPAC apprised of the agency's efforts.



Lastly, the Committee identified several findings that relate to the ongoing violation of DFS statutory caseload standards and the lack of statutorily mandated resources for DFS. As a result, in April 2016, CPAC wrote a letter to the Joint Finance Committee providing data and emphasizing the urgent need for statutory compliance with caseload standards. The Joint Finance Committee promptly and appropriately requested financial detail on resources needed to statutorily comply with 29 Del. C. § 9015. DFS responded that 27 new positions were needed to comply statutorily with its volume of reports to exceed 20,000 this fiscal year, and the Joint Finance Committee authorized the reallocation of these positions to DFS. A significant reduction in the DFS investigation caseloads is anticipated for the next fiscal year.

In September 2016, CPAC and CDRC will convene a retreat to discuss the findings and recommendations resulting from the reviews of child death and near death cases due to abuse and neglect since the responsibility was transferred to CPAC. A new action plan will be developed to address the priority areas for the upcoming year. The Commissions will also receive an update on the 18 prioritized system recommendations stemming from the January 2015 retreat. Since approval and implementation of the Action Plan in May 2015, the Commissions have made significant progress with its priority areas for FY16. This progress is highlighted below.

## *Law Enforcement and Multidisciplinary Team Response*

The CPAC Training Committee continues to revise the MOU to create best practice protocols for investigating and prosecuting child abuse cases. The revised MOU will feature 6 different multidisciplinary response protocols for physical injury, serious physical injury, death, sexual abuse, neglect and juvenile trafficking. The themes that will be addressed in the MOU include: cross reporting to the MDT, joint responses, forensic interviews, crime scene investigations, medical exams and transportation of victims. The revised MOU will be presented to CPAC in February 2017. In addition, advanced training recommendations for the MDT have been forwarded to the CPAC Training Committee, and many of the topics will be offered at the 2017 Protecting Delaware's Children Conference. The Joint Committee on Child Torture developed a checklist on the common elements of child torture, which was approved by CPAC.

## *Medical Response to Child Abuse and Neglect*

CDRC sent letters to the Board of Medical Licensure and Discipline, the Board of Nursing, and the Medical Society of Delaware inquiring whether revisions to statute were necessary for the education requirement for medical professionals. However, the responses recommended modifying the training curriculum only. The CPAC Training Committee will partner with a physician to update the training for the next re-licensure period, January 2017.

# Committees



## *Safety Plans / Risk Assessment / Use of History / Unresolved Risk*

The CAN Panel received training on the DFS Structured Decision Making® System in February 2015. In addition, DFS implemented a process to flag cases at the Report Line based on history and specific risk factors. As a result, cases transferred to investigation may require a critical framework or higher level of supervision by DFS. Additional updates were made to the DFS Family and Child Tracking System to make it easier for workers to access the chronological history of the case, as well as to the collateral contacts policy and procedure, which was improved to be responsive to the unique needs of the family, to be relevant to the allegations, and to inform the decision-making process.

In July 2015, legislation was passed for DFS to compel an uncooperative parent or guardian to complete a drug or alcohol evaluation, mental health evaluation or a developmental screening for their child, and DOJ provided training for DFS supervisors on these statutory changes. Additionally, DFS staff received training from

Delaware's Child Abuse Medical Expert on medical examination findings and lessons learned from cases reviewed by the CAN Panel. Lastly, the DFS representative on the CAN Panel regularly shares the panel's findings with DFS investigation and treatment supervisors.

## *The Child Abuse Medical Response Committee*

**Charge:** The Committee is charged with recommending statewide protocols and policies to CPAC pertaining to the medical response to suspected victims of sexual and physical child abuse, and at a minimum the recommendations shall include: 1.) 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, who meet national standards and who are engaged in on-going quality improvement activities to remain current in the field. 2.) Statewide, cross-discipline, child abuse medical evaluation screening and referral protocols and policies which: a.) provide for the timely assessment of all suspected child abuse victims to determine the need for a medical evaluation, b.) provide education, tools and guidelines to help multi-disciplinary team members understand why, where and how to refer children and their caregivers to specially trained medical professionals for timely and appropriate medical care.

**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 Randall E. Williams, Chief Executive Officer at the CAC. The membership includes representatives from the following agencies: CPAC, Delaware Police Chief's Council, DSP, DOJ, DSCYF, Family Court, New Castle County Police Department, OCA, Office of the Investigation Coordinator and Wilmington Police Department.

The Child Abuse Medical Response Committee was created by CPAC in July 2014 in response to concerns that the number of medical evaluations in non-acute child abuse cases had significantly dropped. At the same time, the Commission

# Committees

concluded that there was an exigent need to increase the number of child abuse medical experts in the state. For years, Dr. De Jong has served as the state's only child abuse medical expert. Thus, the Committee was charged with recommending both a methodology to increase the state's resources and a statewide protocol for determining the need for medical evaluations in child abuse cases. The Committee convened its first meeting in September 2015 and met on six occasions. During this period, the Committee developed the draft *Delaware Multidisciplinary Team Guidelines for Child Abuse Medical Response*, which delineates the statewide network of medical providers, identifies the Designated MDT Medical Services Providers (or child abuse medical experts), and sets forth 4 medical response matrices for assisting MDT members with identifying and initiating the appropriate medical response in cases of child sexual abuse, serious physical abuse, physical abuse and neglect. While the Committee has addressed part of its charge, the group was challenged with the resource issue. Nemours recently applied for a grant through the Victims of Crime Act (VOCA) to request funding for the statewide network of medical professionals, but did not receive an award. Nevertheless, Nemours hired Dr. Stephanie Deutch, who is completing her fellowship in Child Abuse Pediatrics at the Children's Hospital of Philadelphia. She begins her training and mentoring with Dr. De Jong at Alfred I. duPont Hospital for Children in August 2016. The Committee plans to submit the guidelines to CPAC for final approval in August 2016, and once approved, the guidelines will be forwarded to the CPAC Training Committee for inclusion in the MOU and best practice protocols.

## The Child Torture Committee

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

**Membership:** The Committee is led by co-chairs Judge Joelle Hitch from Family Court and Sergeant Reginald Laster, Supervisor of Family Services Unit at New Castle County Police Department. The membership includes representatives from the following agencies: Alfred I. duPont Hospital for Children, Beebe Healthcare, CAC, CDRC, DSP, DOJ, DFS, Family Court, New Castle County Police Department, OCA, Office of the Investigation Coordinator and Wilmington Police Department.

The Child Torture Committee met three times during the fiscal year to finalize its checklist, *Common Elements of Child Torture*. The checklist was approved by CPAC in February 2016, and similar to the guidelines, the checklist will be included in the MOU with the best practice protocols being developed by the CPAC Training Committee. Because Delaware sought out training opportunities, consulted with experts, and intervened early in cases of child torture, our child welfare



Figure 2. Delaware Panel at the IVAT International Training Summit, March 29, 2016

# Committees

system was recognized as a national leader and a panel was invited to present an advanced workshop. The Delaware panel, which included representatives from the Beau Biden Foundation, CAC, DFS, DOJ, Family Court, OCA, New Castle County Police Department and the medical community, had the extraordinary opportunity to present to an international audience its collaborative response in two cases, which put an end to years of torture and chronic abuse suffered by the children. The panel also shared the policy changes initiated by CPAC in response to these cases to help first responders recognize the elements of child torture. After concluding its work, CPAC voted to dissolve the Child Torture Committee in May 2016, and the training obligations were reassigned to the CPAC Training Committee.

## 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 Family Services Program Support Supervisor. The membership includes representatives from the following agencies: CPAC, DFS, Family Court, OCA and Office of the Investigation Coordinator.

During FY16, 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 3 and 4, the statutory caseload standard is 11 for investigation workers, and 18 for treatment workers:

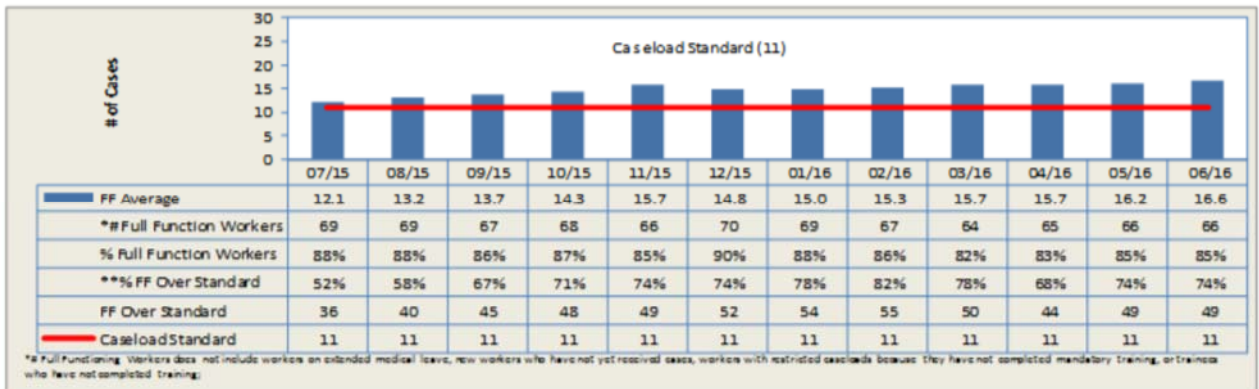


Figure 3. Statewide DFS Investigation Caseloads

# Committees

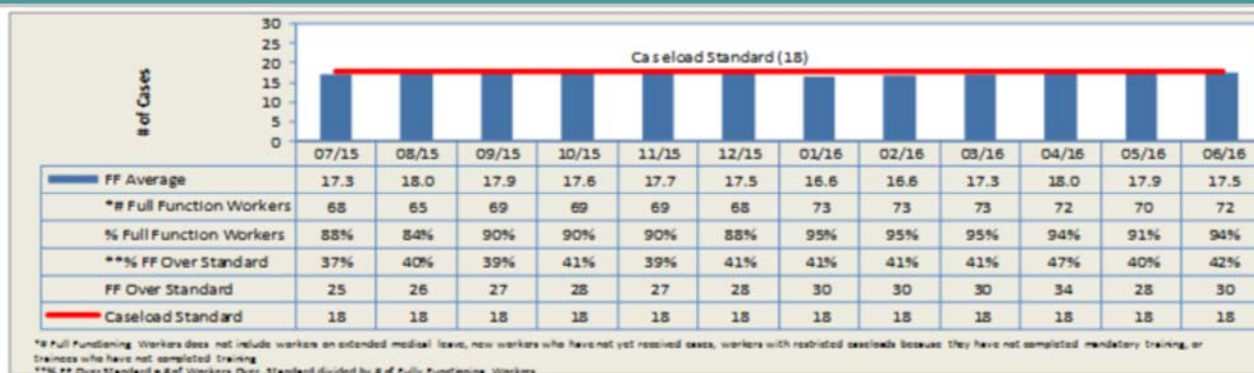


Figure 4. Statewide DFS Treatment Caseloads

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 Office of the Investigation Coordinator, which 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 5, over the period April-June 2016, the Investigation Coordinator initiated tracking on 6 extra-familial cases and 78 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 Child Abuse and Neglect Panel, which is responsible for reviewing deaths and near deaths of children who are victims of abuse or neglect; and the DOJ Special Victims’ Unit, which is responsible for prosecuting child death and near death cases and all sexual abuse cases.

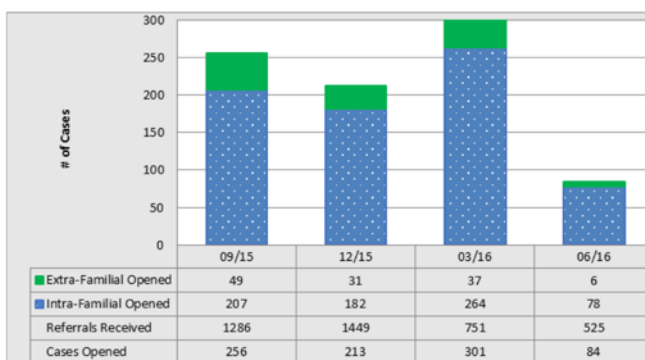


Figure 5. Investigation Coordinator Cases Opened During Quarter

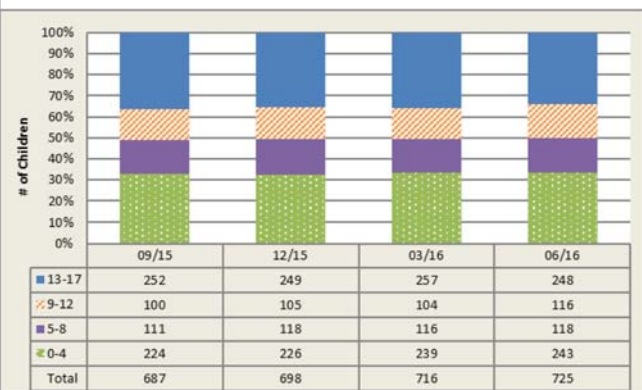


Figure 6. Ages of Children in DSCYF Custody at End of Quarter

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 6, the number of children in foster care in Delaware has been increasing gradually. Further, as of the end of the fourth quarter of FY16, youth ages 13-17, represent most of the children in custody at 34%, which is a 7% decrease from the same period in the prior year. The next highest percentage of children in custody is the 0-4 age range at 33%.

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In August 2015, the Family Court authorized the use of federal Court Improvement Program (CIP) funding to hire a contractual employee to support the collection and assessment of data by CPAC. The Data Analyst is housed at the OCA, and supports the work of CPAC and CIP. Specifically, the Data Analyst is responsible for performing the following activities: staffing the Data Utilization Committee; planning and conducting varied statistical studies on relevant issues that impact child well-being outcomes; working with stakeholders to collect already existing data related to child welfare measures; analyzing, interpreting and identifying child welfare data trends; and ensuring that the data received and presented by CPAC is in a format that is useful in the development of informed, and evidence based, policy. To further this goal, the Data Analyst has been transitioning the dashboards to an online platform to create interactive dashboards, which will feature data over a longer period. This online format will be unveiled on the OCA website in the next fiscal year.

## The Education Committee

**Charge:** 1. To implement the MOU between the DSCYF and the Department of Education (DOE), its school districts, and its charter schools, which focuses on the movement of children in foster care in and out of schools and the sharing of information. In addition, a training curriculum around the MOU should be developed and available to all new persons as they come into the system; 2. To improve collaboration overall between the child welfare system and education, and ensure that it is available on an ongoing basis, including in a web-based format; and 3. To look at educational outcomes for children in foster care and explore ways to improve those outcomes.

**Membership:** The Committee is chaired by Susan Haberstroh, Education Associate and Policy Advisor at DOE. Its membership includes representatives from the following agencies: Appoquinimink School District, Brandywine School District, CPAC, DOE, DSCYF, DFS, DPBHS, Family Court, the Governor's Advisory Council for Exceptional Children, OCA, the Parent Information Center of Delaware, the University of Delaware Positive Behavior Support Program and Woodbridge School District.

In FY16, the Education Committee met quarterly to accomplish the goals of its four workgroups: MOU, Collaboration, Data, and Every Student Succeeds Act (ESSA). Following the enactment of ESSA in December 2015, the Committee not only established a new workgroup, but determined that revisions were needed to the MOU between DSCYF and DOE to comply with the changes stemming from the federal legislation. However, until the recommendations are forwarded from the ESSA Workgroup, the Committee agreed that the MOU revisions will be on hold. The ESSA Workgroup plans to begin meeting in September 2016.

At the same time, the Collaboration Workgroup continued to meet to propose revisions to 14 Del C. § 4123, which currently requires that full time teachers receive one hour of training in the detection and reporting of child abuse. The proposed legislation will require that all employees receive the training. Therefore, contractors, part time teachers, substitutes and other individuals who work with children will fall under this requirement. The group is also working on legislation to appoint education decision makers for youth in foster care who do not have an involved parent to help make education decisions.

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



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reviewed the aggregate data for the 2014-2015 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. To further track educational outcomes, the Workgroup is finalizing the *Education Court Report*, which will provide a two-page educational summary of court-engaged youth to Family Court.

At the request of CPAC, in May 2016, Susan Haberstroh and Eliza Hirst, Esq. gave a presentation to the Commission on the many variables affecting educational success, which highlighted the disparity between children in DSCYF custody and their peers. Dr. Steven Godowsky, Secretary of the Department of Education, also presented on public education in Delaware. He discussed the early learning programs, K-12 student success, world language immersion, college-level coursework, college access, career and technical education, effective educators, and school supports.

In January 2016, CPAC was fortunate to become the recipient of a Casey Family Programs grant to improve educational outcomes for youth in foster care, which transitioned from the Family Court and is now administered by OCA. CPAC approved a strategic plan in March 2016, which identifies two goals: to implement school programs and strategies that address the emotional and social needs of foster youth and create an optimal learning environment for at-risk youth, and to improve interagency cooperation and coordination of services to maximize student services and school stability for children in foster care. The Education Demonstration Project conducted its first statewide training in 2014 and expanded into a six school district collaborative in 2015. Between January and June 2016 when the grant transitioned to CPAC/OCA, the Education Demonstration Project trained over 200 educators on trauma and the impact on learning, and how the Compassionate Schools Model can improve connections between educators and students who have experienced trauma, foster care, or toxic stress. Through these trainings, educators learn how trauma impacts brain development, the importance of relationships with students, and strategies to foster safe learning environments. The Casey Education Demonstration Project also developed a Compassionate Schools Learning Collaborative, which is comprised of more than 10 schools and school districts with a focus on improving education outcomes and connections for at-risk students, including students experiencing foster care. The Learning Collaborative has also developed partnerships with the University of Delaware/Department of Education DE-Positive Behavior Supports (PBS) Project and Children and Families First to administer trainings and evidence-based strategies to help educators understand how to work with at-risk students. Most notably, in April 2016, Eliza Hirst, Teri Lawler (CPAC Education Consultant), Aileen Fink (DSCYF), and Maggie Boone (an advocate for youth who have experienced foster care), with support from Casey Family Programs, presented to members of Congress on the impact of trauma on learning, the education outcomes for youth in Delaware's foster care system, the Compassionate Schools Model, and the importance of connections to improve educational success for youth in foster care and those who have experienced trauma.

As far as the second goal of the Education Demonstration Project, an interdisciplinary group convened to improve information sharing for youth in foster care. The interdisciplinary team includes Family Court, OCA, DSCYF and Nemours. The purpose of this group is to promote foster care clinic screenings and ensure that information regarding

# Committees

youth who enter foster care is shared with the medical team, DSCYF, and schools so that youth may receive the most appropriate accommodations and services to meet their needs. This interdisciplinary group will continue to meet to work out policies and protocols so that such information can be shared with all relevant agencies working with youth in foster care.

Lastly, 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, 2014 and 2015.

Among the more significant findings:

- ◇ Students in DSCYF custody received special education services at a higher rate than non-DSCYF students. As shown in Figure 7, for the 2015 school year, 45% of students in DSCYF custody for all grades received special education services as compared to 14% of non-DSCYF students.
- ◇ 16% of students in DSCYF custody for all grades had at least one discipline incident, as compared to 5% of non-DSCYF students in the 2015 school year. In addition, students in DSCYF custody averaged 1 more suspension (whether in school, or out of school) than non-DSCYF students.
- ◇ In the 2015 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 12%, while the rate for non-DSCYF students only increased by 1%. Despite increases, the graduation rate is still lower for students in DSCYF custody at 77% in comparison with the rate for non-DSCYF students (95%).
- ◇ Disparities were found in the proficiency testing for Math and English/Language Arts for the 2015 school year. For example, 24% of non-DSCYF high school students were proficient in math, while only 4% of high school students in DSCYF custody were proficient in math. For English/Language Arts, middle school students generally were less proficient. However, students in DSCYF custody were 23% less proficient than peers.

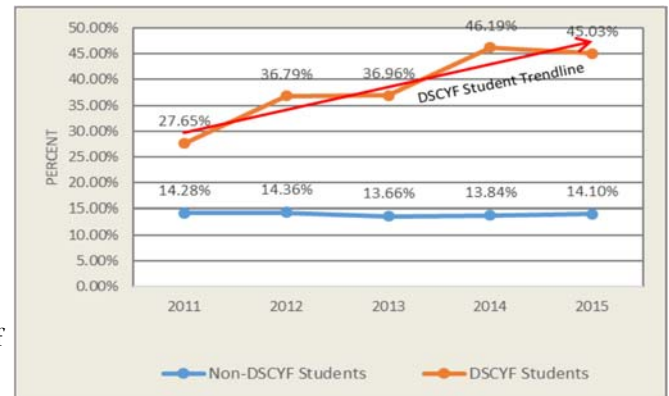


Figure 7. Five Year Comparison of Special Education Rates for Children in DSCYF Custody, For All Grades

## 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 Tania Culley, Esquire, Child Advocate. The membership includes representatives from the following agencies: DOJ, DFS, DSCYF, Family Court, the Delaware House of Representatives and OCA.

# Committees

In FY16, Senator Patricia Blevins and Representative Melanie George Smith introduced four CPAC bills – SB216, SB247, HB248 and HB319. Senate Bill 216 originated in the CPAC Permanency for Adolescents Committee and made several procedural changes to how Extended Jurisdiction cases are handled in Family Court. Senate Bill 247 also originated in the Permanency for Adolescents Committee. It codified federal law requiring normalcy for children experiencing foster care. House Bill 248 relocated the Office of the Investigation Coordinator from the Children’s Department to the Office of the Child Advocate. All three of these bills passed and were signed into law. The last CPAC bill was House Bill 319 pertaining to Substance Exposed Infants and originated in that Joint Committee. That bill was not successful due to the fiscal note attached; however, CPAC will be seeking re-introduction next legislative session.

In addition to championing bills proposed by CPAC and its committees, the Legislative Committee also met on several occasions to review legislation introduced that fell within its statutory purview. During the course of the last legislative session, the Committee reviewed and took positions on countless other bills. It also presented its position to the Commission for consideration at its Annual legislative meeting in May 2016.

## *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, 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, Shirley Roberts, Director of DFS, and Judge Peter B. Jones from Family Court. The membership includes representatives from the following agencies: CFF, CPRB, CASA, 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. Another Planned Permanent Living Arrangement (APPLA), Permanency Options and the Extended Jurisdiction Workgroups met during the fiscal year. APPLA and Extended Jurisdiction were dissolved in February 2016 after completing their charges. During FY16, the Committee and its workgroups monitored a variety of statistics including youth with a permanency plan of APPLA, dual status youth and youth participating in extended jurisdiction. The Committee also monitored progress on the implementation of provisions of PL113-183, the federal Preventing Sex Trafficking and Strengthening Families Act. The Committee proposed legislation to implement normalcy for children in foster care as set forth in the federal act, as well as legislation for procedural changes to the Extended Jurisdiction statute. The Committee also received updates on the progress of the last YAC mural. Finally, through the Permanency Options workgroup, continued training was offered on Permanency Plans for children in foster care, incorporating the elimination of APPLA as a plan for children less than 16 years old. The workgroup also created a fact sheet on permanency options together with financial supports available. Finally, the group completed several permanency tasks recommended by the APPLA workgroup. The group plans to conclude its work in FY17.

# Committees

## 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, Brandywine Counseling & Community Services, CDRC, Child Development Watch, Children & Families First, Christiana Care Health Services, Connections, CASA, DHSS, DOJ, DFS, Division of Public Health, March of Dimes, Nanticoke Health Services and OCA.

The Joint Committee on Substance-Exposed Infants/Medically Fragile Children met four times during the fiscal year to review and implement the recommendations from the May 2015 Action Plan. In doing so, the Committee identified present concerns with the cross-system response to substance exposed infants that were promptly addressed, such as universal screening of all pregnant women at the time of delivery at birthing hospitals and the implementation of DFS substance abuse liaison referrals. The Committee has also worked with system partners to identify concerns that will need long term attention, such as the drafting of state legislation and the implementation of plans of safe care. Ultimately, the Committee acknowledged that the best intervention to protect substance exposed infants and to provide treatment and services to their families consists of a multidisciplinary team effort. To this end, an application for In-Depth Technical Assistance for Substance Exposed Infants (SEI-IDTA) was electronically submitted to the National Center on Substance Abuse and Child Welfare (NCSACW). Six other states have taken advantage of this program through the NCSACW and have seen significant policy and practice changes across systems. Upon acceptance of the application, the technical assistance is scheduled to begin in September 2016.

## 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 or neglect.

**Membership:** The Committee is chaired by Rosalie Morales, OCA Family Services Program Support Supervisor. The membership includes representatives from the following agencies: A Better Chance for Our Children, CAC, CDRC, CASA, DSP, DOJ, DVCC, Family Court, OCA, Office of the Investigation Coordinator and Prevent Child Abuse Delaware (PCAD).

# Committees



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 main-

tains 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 or DOJ. Police officers are obligated to complete the training as a requirement of initial employment per 11 Del. C. § 8404(a), and every Deputy Attorney General in the Criminal and Family Divisions is required to complete the training every three years per 29 Del. C. § 2511(a)(3).

Since July 2015, DSYCF and OCA staff have provided onsite training to 576 professionals using the mandatory reporting training for general audiences, titled *How to Identify and Report Child Abuse and Neglect in Delaware*. Additionally, 429 participants completed the online training and survey through OCA's online training system located at:

<http://ocade.server.tracorp.com>.

Per the requirement of 14 Del. C. § 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: 2015-2016 School Training*, to 1,695 professionals. Additionally, approximately 6,741 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. The next round of license renewals for physicians will occur in January 2017. Other healthcare

## Committees

providers are required to take the training as part of their license renewal process. As such, 290 professionals completed the online training and survey through OCA's online training system.

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. The ChildFirst/MDT Workgroup collaborated with the Gundersen National Child Protection Training Center (GNCPTC) to develop the three-day curriculum for the ChildFirst® 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*. The training was held on October 26-28, 2015, and the program included the core components of the ChildFirst® program with the exception of the forensic interview protocol. It featured 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. Forty-one professionals from DFS, DOJ, Delaware Police Departments and OCA were trained.

The third workgroup under the Training Committee is responsible for planning and organizing the Protecting Delaware's Children Conference. The biennial conference, which is geared towards law enforcement officers, prosecutors, DFS case workers and other professionals who regularly respond to allegations of child abuse and neglect in Delaware, is scheduled for April 25-26, 2017. A Save the Date was recently disseminated to MDT partners.

As mentioned previously, CAN Best Practices, the fourth workgroup under the Training Committee, is responsible for revising the MOU to incorporate the best practice protocols. During FY16, the Workgroup reviewed the draft Physical Injury and Serious Physical Injury Protocols. The Child Death, Sexual Abuse, Neglect and Juvenile Trafficking Protocols will be presented to the workgroup in the next fiscal year. The revised MOU will be forwarded to CPAC for approval in February 2017, and training on the MOU will be provided at the Protecting Delaware's Children Conference.

The Training Committee's last workgroup, Cross-Education, continues to develop online trainings for the purpose of providing cross education on the roles and responsibilities of individual agencies and programs. Various programs have been identified for FY17, and once completed, will be made available on OCA's online training system.

In April 2016, CPAC partnered with multiple agencies to develop the annual campaign for Child Abuse Prevention Month. As a result of a generous donation from the Levin Family Foundation, OCA contracted with WJBR to host a digital marketing campaign through Facebook, mobile ads and desktop ads. Public service announcements from the Attorney General, Child Advocate, DSCYF Cabinet Secretary and Governor were also featured, and three images were donated from a local graphic artist. The campaign helped to raise awareness about Delaware's statutory, child abuse mandatory reporting obligations and the availability of the "Stop Child Abuse" License Plate.



Figure 8. Image Donated by Graphic Artist, Scott Coleman

# 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 Fiscal Year 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 Fiscal Year 2016**

- ◇ 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 *Multidisciplinary Child Abuse Investigative Team Training*; and, provided technical support to users of OCA's online training system.
- ◇ Over 9,700 educators, healthcare providers and members of the public were trained on their mandatory reporting obligations.
- ◇ Child Torture Committee finalized its checklist, *Common Elements of Child Torture*.
- ◇ Training Committee continues to revise the MOU to create best practice protocols for investigating and prosecuting child abuse cases.
- ◇ Child Abuse Medical Response Committee created the *Delaware Multidisciplinary Team Guidelines for the Child Abuse Medical Response*.
- ◇ CAN Panel, with oversight from the CAN Steering Committee, conducted retrospective reviews on 51 child abuse and neglect death and near death cases.
- ◇ Joint Committee on Substance-Exposed Infants/Medically Fragile Children submitted an application for In-Depth Technical Assistance for Substance Exposed Infants to the National Center on Substance Abuse and Child Welfare.

### **Reports**

The CJA Annual Progress Report & Grant Application is available at: [http://courts.delaware.gov/childadvocate/cpac/cja\\_taskforce.aspx](http://courts.delaware.gov/childadvocate/cpac/cja_taskforce.aspx)

# 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, CDRC served as Delaware's CRP. Then, in 2004, CPAC was designated as the CRP. DSCYF's 2016 Annual Progress and Services Report, which designates CPAC as the CRP, is available at: [http://kids.delaware.gov/pdfs\\_archive/fs/fs-cfsp-apsr-2016.pdf](http://kids.delaware.gov/pdfs_archive/fs/fs-cfsp-apsr-2016.pdf)

### 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.

### CPAC's CRP Accomplishments in Fiscal Year 2016

- ◇ DFS convened an annual stakeholder meeting to review the Child and Family Services Plan progress, review performance data and gather stakeholder input for the coming year's strategic planning. The meeting was held April 6, 2015; 67 stakeholders were invited and 47 representatives of the child welfare community service agencies attended, including foster care, family support, shelter services and adoption. Key stakeholders included the Court Improvement Program and OCA. OCA was also a stakeholder interviewed during the 2015 Child and Family Services Review and participated in the November 2015 federal debriefing and subsequent Program Improvement Plan workgroups drafting corrective actions for areas needing improvement.
- ◇ The CAN Panel was transferred from CDRC to CPAC in September 2015. Between September 2015 and April 2016, the CAN Panel, with oversight by the CAN Steering Committee, conducted retrospective reviews on 51 child abuse and neglect death and near death cases - 18 deaths and 33 near deaths. The result was 307 findings across six system areas. As a result of these findings, the CAN Steering Committee made several system-wide recommendations to the Governor.

### Reports

This report serves as the Annual Report for Delaware's Citizen Review Panel.

Findings and recommendations stemming from the review of child abuse and neglect death and near death cases are available at the following link: [http://courts.delaware.gov/childadvocate/cpac/cpac\\_reports.aspx](http://courts.delaware.gov/childadvocate/cpac/cpac_reports.aspx). The State responds to these reviews through its participation in an annual meeting between CPAC and CDRC, which discusses the findings and recommendations resulting from the reviews of child abuse and neglect death and near death cases. As such, the State contributes to the action plan developed to address the priority areas for the upcoming year.



# Opportunities for the Future

In Fiscal Year 2016, CPAC accomplished much as both a federally mandated CRP and CJA State Task Force. As the CRP, the CAN Steering Committee provided oversight for the CAN Panel reviews and made several system-wide recommendations to the Governor. In addition, CPAC monitored the 18 recommendations from the May 2015 Action Plan and received progress updates at its quarterly meetings.

In its State Task Force role, CPAC submitted its CJA Annual Progress Report and Grant Application to the Administration on Children, Youth and Families in May 2016. The report provided an update on the priorities established in the prior year's 2015-2017 Three Year Assessment Report. 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 FY17. 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 planning the 2017 Protecting Delaware's Children Conference and the work of the CAN Best Practices Workgroup. The Training Committee will also be charged with including the *Delaware Multidisciplinary Team Guidelines for Child Abuse Medical Response* in the MOU upon approval from CPAC.

FY17 may bring In-Depth Technical Assistance for Substance Exposed Infants from the National Center on Substance Abuse and Child Welfare. The Joint Committee on Substance-Exposed Infants/Medically Fragile Children expects to receive feedback about its application.

The remaining CPAC Committees have identified future goals of their own. In Fiscal Year 2017, the Data Utilization Committee plans to unveil online data dashboards to present the system-wide child welfare trends over a longer time period. Meanwhile, the Education Committee will continue to make progress with its strategic plan 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 CDRC by meeting annually to monitor and 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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16 Del. C. § 912(b)

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