



**Office of Children  
and Family Services**

*Response to the*

**2014 Report and  
Recommendations  
of  
NYS Citizen Review  
Panels  
for Child Protective  
Services**



**Andrew M. Cuomo, Governor**

**Sheila J. Poole, Acting OCFS Commissioner**

**The Office of Children and Family Services' Response:  
New York State's Citizen Review Panels  
2014 Annual Report and Recommendations**

***Introduction***

The New York State Office of Children and Family Services (OCFS) welcomes the opportunity to respond to the 2014 recommendations put forth by the New York State Citizen Review Panels for Child Protective Services for improving child welfare services in New York State. The Citizen Review Panels have offered a thoughtful set of recommendations, and OCFS is appreciative of the opportunities to have attended and participated in Panel meetings. OCFS remains committed to a continued relationship with the Citizen Review Panels and to our shared efforts to improve outcomes for vulnerable children and families.

OCFS remains committed to working with the local departments of social services (LDSSs) and the authorized voluntary agencies to promote the safety, permanency, and well-being of New York's children. OCFS continues to work to improve child welfare practice on the local level by providing training and resources wherever possible. This past year, OCFS has shared a concept paper that outlines OCFS' agenda for improving the well-being of children, youth, and families. Over the next several years, OCFS will look to implement screening and assessment tools that will help better identify the needs of families, provide appropriate interventions to meet those needs, and use data to measure performance in achieving sought outcomes.

**Panel Recommendations**

**Public Health Approach to Child Welfare**

**Reframe child abuse and maltreatment as a public health issue to place policy focus on primary prevention and early intervention, using a collaborative approach.**

OCFS is committed to early intervention and primary prevention strategies to reduce child abuse and maltreatment. Through various partnerships and funding streams, OCFS has supported a number of programs aimed at reducing abuse and maltreatment and providing support to families in need.

Monies from the William B. Hoyt Memorial Children and Family Trust Fund (Trust Fund) and the federal Child Abuse and Prevention and Treatment Act are dedicated to primary prevention. Funds are used to continue to support the New York State Shaken Baby Prevention hospital-based education program now known as Safe Babies New York, which targets outreach to all maternity and birthing hospitals in the state. The purpose is to educate all parents of newborns to the dangers of shaking babies and reduce the incidence of abusive head trauma or Shaken Baby Syndrome (SBS).

Also, Family Resource Centers (FRCs) are supported by the Trust Fund and have services available to any family, with an emphasis on those with children five years of age and younger, with stressors that place them at higher risk of child abuse or maltreatment. In 2014, FRCs continued their efforts to engage families at high risk. Specific populations targeted were low income families, teen parents, families with military ties, families with caregivers or children with special needs, and families exiting the child welfare system.

Since 2012, requests from the LDSSs (including New York City) tripled, with over 50 percent of the local districts requesting publications. In 2014, local districts, health agencies, child care agencies, and community-based programs distributed over 136,000 publications and videos, reaching families in 48 counties.

In July 2014, OCFS joined the Department of Health (DOH)-led Infant Mortality Reduction Collaborative Improvement and Innovation Network (CollIN), an initiative that involves public and private partnerships working toward a shared goal of reducing infant mortality through quality improvement. In New York, the team includes representatives from the Association of Perinatal Networks, community organizations, hospital associations, local departments of health, (including New York City), physicians, public health professionals, and medical examiners, as well as staff from DOH and OCFS.

One of the strategies identified by the New York team to reduce infant mortality is the promotion of safe sleep for infants. These efforts include:

- Educating health care professionals and caregivers to actively endorse and model safe sleep practices; and
- Promoting community strategies that have been successful in reducing sleep related deaths.

The goals of the New York team are to reduce infant sleep related deaths by 10 percent and to reduce disparities in sleep-related deaths between non-Hispanic Black and non-Hispanic whites by 10 percent by July 2016.

In March 2015, OCFS hosted a gathering of state and local service providers to take inventory of the many safe sleep initiatives underway statewide. A resource guide was compiled and an agreement was reached to support a simple and consistent statewide message to promote safe sleep for every infant. Agreement was also reached to pilot and evaluate prevention strategies for effectiveness and provide the results to the CollIN.

Past statewide Safe Sleep initiatives in 2014 included the distribution of a "Safe Sleep for Your Baby" video to child welfare staff and community-based programs to reinforce safe sleeping practices for families engaged through preventive or protective services as well as family-serving programs. The simple message of the video conveys the "ABC's of Safe Sleep"—that babies sleep safest ALONE, on their BACKS, and in a CRIB. Additionally, OCFS partnered with a media consultant to promote the "Safe Sleep for your Baby" campaign. Wallboards promoting the "ABC's of Safe Sleep" were placed in laundromats as well as hair and nail salons in fifty locations during November 2014. The following six counties were targeted for this campaign: Onondaga, Clinton, St. Lawrence, Fulton, Warren and Niagara.

In addition, OCFS continues its role as convener and member of the Executive and Steering Committees for the New York State Parenting Education Partnership (NYSPEP) along with the New York State Council on Children and Families, Prevent Child Abuse New York, and the New York State Office of Mental Health. NYSPEP includes direct service providers from communities across the state, other state agency staff, and other organizations that serve families and children.

Healthy Families New York (HFNY), a national Healthy Families America (HFA) accredited program, is an evidence-based prevention program that seeks to improve the health and well-being of children by providing intensive home visiting services to expectant and new parents

living in targeted high risk communities. Participation in the program is voluntary. The goals of the program are to:

- promote positive parenting skills and parent-child interaction;
- prevent child abuse and neglect;
- promote optimal prenatal care and child health and development; and
- increase parents' self-sufficiency.

### **Funding for Preventive Services**

**Keep preventive services funding uncapped and restore the state share to the original 75 percent level.**

**Allow for more flexibility in the use of preventive services funding and allow new application for Community Optional Preventive Services (COPS) programs.**

In the 2015-16 enacted state budget, the appropriation language for preventive services reimbursement remained uncapped at 62 percent state share and 38 percent local share net of federal funding for the current state fiscal year. These funds, in addition to other federal and state support dollars, continue to assist in the reduction in foster care placements, and to keep children safely maintained in their homes.

In addition to preventive funds, monies are available through Public/Private Partnerships (PPP). Currently there are 18 programs funded in eight regions of the state and include an array of programs serving families with children from birth through young adults. Communities are required to invest a 35 percent cash match from a private funding source. The purpose of these programs is to increase services for at-risk families to prevent involvement with the child welfare and juvenile justice systems.

In the first year of operation during state fiscal year 2013-14, a total of 2,980 families received services through the PPP programs. Of this total, more than ten percent of these families had developmental disabilities, mental health or substance abuse issues. There were a total of 9,048 home visits, and 7,904 children and 2,893 adults received services in the first year of operating these programs.

For the first full year of operation of the PPP programs, the following highlights were identified:

- There was an expedited process of enrollment for one of the programs serving infants to children three years old;
- There have been a high number of students, parents, and school staff who were educated about violence and violence prevention in one domestic violence program. Knowledge of this program has spread through word of mouth and students have requested that these prevention presentations take place at their schools;
- Eighty-six percent of participants in a trauma awareness training for schools indicated that the content had a positive impact on teaching practice;
- Close to 90 percent of children completing an evidence-based early childhood home visiting program scored significantly higher on post-assessments and were found ready to learn; and
- Three of the eighteen programs exceeded their performance targets and currently have waiting lists for their services.

There have been challenges that some of these PPP programs have faced, which include the following:

- Engagement of families;
- Transportation;
- Difficulty accessing services;
- Recruitment and retention of staff;
- Engagement of the schools; and
- Lack of reliable childcare for some families.

The 2014-15 enacted state budget included an additional \$3.4 million to continue and expand the PPP programs. A total of nine programs increased their private match and expanded their services in year two of this initiative. And again in the 2015-16 enacted state budget, \$3.4 million is appropriated for PPP programs.

### **The Child Welfare Workforce**

**Identify and implement strategies to recruit and retain caseworkers and to promote nationally accepted workload standards.**

As noted in the 2014 annual report and recommendations, OCFS has provided LDSSs with funds to hire additional caseworkers. In 2014, funds were allocated to nine districts with high caseloads (workers with more than 15 open Child Protective Services (CPS) cases), and in 2015, ten districts will be receiving the funding. It should be noted that OCFS does not have the statutory authority to set caseload standards; Section 20-a of the Social Services Law in fact effectively precludes OCFS from doing so.

### **Child Welfare and Children of Incarcerated Parents**

**Improve outcomes for children of incarcerated parents by facilitating family contacts and raising awareness of the unique needs of this special population.**

OCFS is an active member of the New York Initiative for Children of Incarcerated Parents (NY Initiative). The NY Initiative, coordinated by the Osborne Association, utilizes a statewide partnership approach that engages individuals, public agencies, and community and faith-based organizations to develop policies and practices that support the needs and rights of children and youth whose parents are involved in the criminal justice system and to improve outcomes for them.

OCFS works to support children of incarcerated parents and increase awareness of their needs, through the NY Initiative and other means, by:

- Issuing OCFS policy directive 11-OCFS-ADM-7, Incarcerated Parents and Parents in Residential Substance Abuse Treatment with Children in Foster Care: Termination of Parental Rights and Other Issues, which implements Chapter 113 of the Laws of 2010 to require that social services districts, before filing a petition to terminate parental rights of an incarcerated parent, assess whether the parent maintains a meaningful role in the child's life and whether the termination would be in the child's best interests. In addition, the policy directive requires social services districts to complete the family service plan in

- consultation with the incarcerated parent, and to provide information to incarcerated parents outlining their legal rights and obligations. This policy helps to provide parenting opportunities from the "inside," including facilitating child-parent connections and informing foster parents of resources and supports, such as Kinship Care and KinGAP.
- Actively participating as a non-endorsing steering committee member of the NY Initiative. In this capacity, OCFS takes part in the NY Initiative's quarterly meetings and has worked with the NY Initiative on establishing the following priorities:
    - Child sensitive arrest protocols and re-entry practices and programs;
    - Sentencing alternatives to incarceration to keep parents at home, with or near their children whenever safely possible;
    - Child-centered and family-friendly visiting policies;
    - Training of staff at all public institutions and service organizations serving children;
    - Policies and practices that provide access to parents so that children and families can decide on the type and frequency of contact that is best for them; and
    - Peer support programs for children.
  - Presenting (in partnership with the Osborne Association) during the National Resource Center for Permanency and Family Connections' webinar "Working with Incarcerated Parents and their Children to Achieve Positive Outcomes" (2013). During the webinar, OCFS shared current efforts on behalf of New York children of incarcerated parents, lessons learned, and promising practices.
  - Engaging in community awareness activities, including providing a voice to the youth. As part of this awareness effort, OCFS has supported the NY Initiative in:
    - A screening of the film, *Mothers of Bedford*, followed by a panel discussion at John Jay College and University of Albany. The University of Albany presentation also featured a workshop with Sesame Street on the development of their resource "Little Children Big Challenges: Incarceration."
    - The Echoes of Incarceration project presented documentaries filmed by youth with incarcerated parents to audiences at SUNY Albany. The documentaries were also shown at the NY Initiative quarterly partnership meetings and the first meeting of the NY Initiative's Upstate partnership.

### **Family Assessment Response (FAR)**

**Continue to support implementation of FAR throughout New York State, by providing the necessary training, coaching, and flexible funding needed to meet individual family needs.**

**Conduct an evaluation of FAR, incorporating a broader representation of counties utilizing an approach that includes a cost/benefit analysis.**

OCFS continues to support the implementation of Family Assessment Response (FAR) in NYS. The recent focus has been to work with existing FAR districts to offer FAR to more families by allowing a wider variety of allegations and/or increasing FAR-trained staff. While three counties have suspended their FAR practice since the beginning of 2014, OCFS is hopeful that at least one of them will resume providing FAR before the end of 2015.

Training of FAR local child protective staff continues; the list of topics include:

- FAR Process and Practice, and Solution Focused Practice;
- Advanced Supervision;
- Increasing the Voices of Children and Youth;
- Crucial Conversations;
- Substance Abuse and FAR;
- Case Consultation Framework; and
- Using Data to Inform FAR Practice and Family Engagement Strategies with Families.

Butler Institute staff conducted more than 20 coaching visits since the beginning of 2014, working with local districts on any practice, supervision, or administrative challenge that they may be facing. Additionally, OCFS, Butler Institute, and local district FAR staff teamed up to conduct three Quality Assurance case reviews to provide feedback on the quality of casework practice.

In 2014, OCFS' first Child Protective Services (CPS) symposium, "Child Protective Services: One Destination, Two Pathways," was held with more than 150 attendees who included caseworkers, supervisors, and administrators from both Investigative and FAR teams within FAR-participating counties. The goal was to help bridge the divide that sometimes exists between teams and begin to better work toward the common goal of protecting children and strengthening families. This symposium coincided with the finalization of FAR regulations in October 2014.

Another support for caseworkers that was implemented in 2014 was the inclusion of FAR support in the CONNECTIONS system. This provides caseworkers with the ability to accurately capture their assessments of safety and risk, document any action steps the family has agreed upon, and select a case closure reason, all of which can be aggregated to better evaluate FAR outcomes (e.g., what service linkages are being made, the areas of strengths and needs in the family, safety decisions).

Key findings from a recent evaluation of reports tracked to FAR as compared to those cases that were legislatively eligible for FAR, but were handled by an investigation, showed fewer subsequent child abuse/neglect reports, fewer subsequent indicated child abuse/neglect reports, and fewer foster care entries within 12 months of the target report. OCFS is actively engaged in designing and implementing evaluation and continuous quality improvement strategies using all available data to evaluate the implementation and effectiveness of FAR and to improve the FAR programs on the individual district and statewide levels.

### **Racial Equity**

**Continue to address and seek to eliminate racial and ethnic disproportionality and disparities by expanding OCFS's work to additional counties through the use of data informed and data-driven strategies.**

**Recruit more racially and ethnically diverse and bi-lingual staff to child welfare.**

**Require continuous staff development and education advancing cultural competence and responsiveness in child welfare.**

### Disproportionate Minority Representation (DMR)

Children of color, specifically African-American and Native American children, are disproportionately represented in the child welfare system, as compared to their numbers in the general population. Research indicates that the reason children of color are overrepresented in the child welfare system is because of disparities in the likelihood of coming into contact with the system and disparities in the likelihood of ending involvement with the system. Research also informs us that this disproportionality is directly attributable to the fact that children of color are more likely to be admitted to foster care and often times less likely to leave the system. To address and resolve disparities, the contributing social, economic, and organizational factors that result in this overrepresentation must be evaluated. The OCFS Disproportionate Minority Representation (DMR) work, coupled with the Race Equity and Cultural Competence (RECC) program, is designed to examine these factors to help OCFS and LDSSs develop interventions, programs, and policy changes that will mitigate disparities in the system.

### Practice Initiative

The goal of the DMR and RECC work is to help child welfare explore the mechanisms behind the underlying disparities that lead to disproportionality. This work, currently centered in 12 counties (Albany, Dutchess, Erie, Genesee, Monroe, Nassau, Onondaga, Orange, Rockland, Schenectady, Suffolk and Westchester) that have been identified as having the greatest disparity rates, calls for identifying disparity at key decision points: reporting, disposition, and ultimately placement in out-of-home care. This ongoing examination requires work on a number of fronts, namely:

- Extensive data analysis around each point of contact with the child welfare system to identify impacted communities and promote work being done through a cultural and race equity lens;
- Training and technical assistance to the LDSS from OCFS;
- Support learning exchanges and peer networking to facilitate shared learning between counties;
- Engagement of community stakeholders, (i.e., schools, hospitals, the judiciary, probation, etc.); and
- Exploring the impact of FAR upon reducing disparate outcomes for families of color.

### Update on OCFS RECC program work for 2014-15

- The OCFS Division of Child Welfare and Community Services (DCWCS) has completed a pilot of a Racial Impact Statement tool and process, made a presentation to the RECC Steering Committee.
- DCWCS has completed an initial draft of an OCFS/Casey Family Programs Race Equity/DMR efforts white paper. The draft paper is currently under review within RECC.
- National expert Khatib Waheed presented Race Equity Learning Exchange sessions for DCWCS home office managers and staff throughout 2014 and early 2015.
- DCWCS staff worked with University of Albany School of Social Welfare to convene conference calls with deans and administrators of curriculum at various schools of social welfare regarding infusion of race equity and disparity work in graduate school curriculums. Staff presented at a full day training symposium with social work field



instructors regarding supervising students with a RECC focus for University of Albany School of Social Welfare.

### **Home Visiting Programs**

**Restore funding for Healthy Families NY (HFNY) to \$26.8 million, an increase of \$3.5 million.**

**Provide \$5 million in funding to sustain the Nurse Family Partnership (NFP program), for an increase of \$3 million.**

The 2015-16 enacted state budget provided for \$23.3 million for HFNY programs. The funds will allow OCFS to continue funding 36 HFNY programs in 26 upstate communities in addition to communities in the five boroughs of New York City. Each of the communities is identified as high need based on factors including infant mortality, teen birth, and low birth weight rates. OCFS is proud of the work that has been accomplished through HFNY. In 2015, OCFS celebrates the 20<sup>th</sup> Anniversary of this program in New York State.

On an annual basis, HFNY serves approximately 6,500 families and assesses and refers another 4,000 or more, while delivering more than 176,000 home visits. HFNY is accredited by the national Healthy Families America, which has been reviewed by the U.S. Department of Health and Human Services and deemed to be one of the first of the 16 evidence-based home visiting service delivery models.

OCFS collaborated with the NYS Department of Health (DOH) and was successful in receiving the federal Maternal, Infant and Early Childhood Home Visiting Program grant. This grant enabled OCFS to expand HFNY in three programs in the Bronx, one program in Brooklyn, and one program in Erie County. OCFS and DOH continue to work closely to coordinate data collection efforts to evaluate the effectiveness of these funds and to work towards a universal statewide system of home visiting.

While the oversight of Nurse Family Partnership is maintained at DOH, OCFS is aware that it is using federal funds from the Maternal, Infant and Early Childhood Home Visiting Program grant for programs throughout New York City, and in Monroe, Onondaga and Nassau counties. HFNY programs work collaboratively with Nurse Family Partnership programs wherever they share the same target locations.

### **Kinship Caregiver Services and KinGAP**

**Restore funding for Kinship Caregiver Services and the Kinship Navigator Program to \$3 million.**

**Fund Kinship Guardianship Assistance Program (KinGAP) as an uncapped permanency option outside of the Foster Care Block Grant, with no reduction to the Foster Care Block Grant.**

The 2015-16 enacted state budget provided funding for Kinship Care Programs at \$1.34 million. This is an increase of \$1 million from the prior state fiscal year of 2014-15. Additionally, the

state budget provided \$220,500 in funding for the Kinship Navigator Program, which is the same as the prior fiscal year.

In 2015, a Kinship Care Programs request for proposals (RFP) was issued with the following goals:

- Promote a broader access to kinship services;
- Establish a cohesive model for OCFS kinship programs using evidence-based practices; emerging practices, and promising practices in the field of Kinship Care; and
- Provide funding to high need regions of the state by assessing relevant data.

The kinship model consists of two components: 1) Provide direct case management services to kinship families; and 2) Provide supportive services for kinship families, including information, referral, and advocacy to community resources as well as parent training and education focused on building family protective factors and support groups.

The planned outcomes for the recipients of the awarded funds include:

- Promote a safe, permanent and nurturing environment for children in kinship care;
- Provide needed support and information to kinship families and linkages to community services/resources;
- Provide culturally competent specialized services to children and families exposed to trauma, as well as to underserved populations; and
- Educate potential kinship families on the permanency option of KinGAP and adoption.

Contracts resulting from the RFP are expected to begin September 1, 2015.

### ***Conclusion***

In conclusion, OCFS remains highly committed to promoting the safety, permanency and well-being of the children and families in the child welfare system in New York State. Thank you for the opportunity to respond to the Citizen Review Panel recommendations, and we look forward to our ongoing dialogue to make continuous improvements in New York State's child welfare system.