

Department of Family Services

LOB #114:

CHILD PROTECTIVE SERVICES

Purpose

The purpose of Child Protective Services is to protect children from abuse and neglect and prevent further abuse and neglect from occurring.

Description

Child Protective Services (CPS) staff receives and responds to reports of abused and neglected children and provides services to strengthen families by enhancing parents' capacity to nurture their children in a safe environment. CPS staff is available to the community 24 hours a day, seven days a week to provide crisis intervention services for Fairfax County children and families. Important aspects of the CPS program include:

Hotline

Hotline workers receive reports of alleged abuse and neglect over the phone and in person. Hotline staff requests specific information about the alleged abuse or neglect, assesses the information and determines whether the situation meets the state definition of abuse or neglect. Those that do are screened in and assigned to a CPS intake worker for response. If the information does not meet the designated criteria, the call is screened out.

Calls that are screened out for CPS response are then screened for the criteria of Family In Need of Services (FINS). Calls that meet FINS criteria are sent to the CYF Protection and Preservation Services program for response. Other screened-out calls are referred to other County and community agencies as appropriate.

Hotline staff also responds to numerous calls for general information about DFS, requests for consultations, and calls to workers and other staff members when callers do not have a direct phone number or when callers want to make sure that a message is received.

Intake

CPS specialists are responsible for investigating or assessing allegations of child abuse and neglect and providing short term services to families. Upon assignment workers visit the site where the alleged abuse occurred, interview the alleged victim(s) and perpetrator and other relevant witnesses. During this process workers assess the situation, determine the needs of the family, and initiate appropriate services. When staff determines that children cannot remain safely with their parents or other relatives, staff is authorized to remove children and place them in foster care, and the case is transferred to the Foster Care and Adoption program. When staff determines that families require additional services to ensure children's safety, families are referred either to the Protection and Preservation Services program or the Kinship Care Unit for ongoing case management.

Currently DFS has six CPS intake units, one of which focuses on child sexual abuse allegations and out-of-family investigations, such as day care centers and school employees. The sexual abuse unit is supported by a multi-disciplinary team that includes law enforcement officials, medical professionals, and Community Services Board staff. The unit also has a partnership with SafeSpot, a child advocacy center that provides a child-friendly facility where victims of sexual abuse can be interviewed and receive services.

CPS is responsible for providing after hours responses to reports of child abuse and neglect during non-business hours. CPS provides the same level of response to any valid complaint of abuse or neglect regardless of whether the report is received during or after business hours.

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Benefits

The main benefit of CPS is its ability to protect vulnerable children and prevent further abuse and neglect. Research into Adverse Childhood Experiences (ACEs) has shown that childhood abuse, neglect and exposure to other traumatic stressors can result in a multitude of short-term and long-term health and social problems including substance abuse, depression, suicide attempts, serious medical conditions, unintended pregnancies and increased risk for domestic violence. All of these could potentially require interventions by other County programs. By intervening at the first valid complaint of abuse or neglect, CPS workers are able to prevent recurrence and decrease the need for future costly County services.

Additionally, research has also shown that it is better for children to be cared for by relatives than non-relatives. As such, CPS works with the entire family unit which includes extended family members to create a plan to stabilize the family. Extensive efforts are made to keep children with their parents or other family members. Removing children and placing them in foster care is done only when no other options are available to keep children safe.

Mandates

Child Protective Services are required by sections 106 and 107 of the federal Child Abuse and Prevention Treatment Act (CAPTA) and by Virginia Code §§ 63.2-1500--1530 et seq. which prescribe that each LDSS maintain the ability to receive and respond to reports alleging abuse or neglect of children.

Trends and Challenges

CPS experienced a 13 percent increase in the number of cases in the past year from 2,224 in FY 2014 to 2,506 in FY 2015. At the end of FY 2015, CPS workers were carrying an average of 23 cases each, approximately eight cases above the recommended number of cases per worker. This has resulted in a significant backlog which is taking several coordinated efforts to address:

- Managers are working diligently to reduce the number of vacancies by hiring individuals that are the right fit for this demanding job.
- CPS staff is being held accountable for meeting the timelines associated with family assessments and investigations to decrease the backlog.
- Managers are focusing on providing training to staff, both new and old, to ensure that staff has the skills required to successfully investigate and assess allegations of child abuse/neglect and understand the requirements of their jobs. One effort in progress is development of the Child Welfare Institute to help all CYF staff learn the foundational information for their work.
- CPS is working to improve collaboration and understanding with other programs within CYF, including Protection and Preservation Services (PPS), the Kinship Care Unit, and Foster Care and Adoption programs. Through enhanced collaboration, CPS workers have been able to incorporate PPS workers earlier in the process to begin working with families sooner and create a smooth transition between the intake and ongoing phases of the work.

CPS workers also have seen an increase in the severity and complexity of cases. For example, nearly half of all valid referrals in FY 2015 were designated a Priority 1; this means that CPS Intake workers must make their first contact with the alleged victim within 24 hours. Priority levels are determined by Hotline staff based on a standardized decision making model and reflect the severity of the complaint.

Another area of complexity is language barriers. In FY 2015, more than 25 percent of all cases involved a family that spoke a language other than English – a total of 13 unique languages. CPS workers use in-person and remote translators to communicate with family members who do not speak English; however this makes the assessment or investigation process more cumbersome and time consuming. One way that CPS is addressing this issue is by recruiting bilingual staff, particularly Spanish-speakers.

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Finally, it has become harder to acquire services for families due to limited funding and increased demand. For example, County mental health and substance abuse treatment services target the priority populations of the most seriously ill. Adults and children who do not meet eligibility criteria must seek treatment in the community. It is often very difficult to find effective community-based providers, especially ones that take Medicaid. This gap in services is having an impact on families' ability to achieve their goals.

To help families be successful, CPS staff draws upon strong clinical skills and informal networks to connect the families to the supports they need. Staff uses Family Partnership Meetings to engage families and communities in decision-making partnerships. CPS staff participated in 280 Family Partnership Meetings in FY 2015. Through these professionally-facilitated meetings, CPS staff, family members and other service providers are able to come together to identify the right course of action and services necessary for a positive outcome.

Resources

Category	FY 2014 Actual	FY 2015 Actual	FY 2016 Adopted
LOB #114: Child Protective Services			
FUNDING			
<u>Expenditures:</u>			
Compensation	\$4,202,625	\$4,291,143	\$4,528,706
Operating Expenses	544,106	461,234	519,898
Total Expenditures	\$4,746,731	\$4,752,377	\$5,048,604
General Fund Revenue	\$2,362,244	\$2,321,675	\$2,077,685
Net Cost/(Savings) to General Fund	\$2,384,487	\$2,430,702	\$2,970,919
POSITIONS			
Authorized Positions/Full-Time Equivalents (FTEs)			
<u>Positions:</u>			
Regular	66 / 66	66 / 66	66 / 66
Total Positions	66 / 66	66 / 66	66 / 66

Metrics

Metric Indicator	FY 2013 Actual	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate	FY 2017 Estimate
Number of calls received by the Hotline	18,596	17,173	16,079	16,500	16,500
Number of child abuse complaints accepted	2,350	2,224	2,506	2,400	2,400
Cost per child abuse complaints	\$2,643	\$2,822	\$2,525	\$2,978	\$2,978
Percent of child abuse complaints where contact occurs within the appropriate response time	95%	95%	93%	95%	95%
Percent of children involved in a CPS assessment or investigation that did not have prior contact with CPS during the last year	NA	NA	78%	82%	85%

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Summary of Key Performance Measures

The Child Protective Services LOB had \$5,048,604 in expenditures for FY 2015, offset by \$2,077,685 in revenue for a net cost to the County of \$2,970,919. These funds support 66 FTEs.

Hotline staff received 16,079 calls in FY 2015, a 6 percent decline from FY 2104. During this same period, the number of child abuse complaints accepted increased 13 percent; staff investigated or assessed 2,506 complaints in FY 2015.

The key outcome for CPS is to reduce recidivism; this is a new measure in FY 2015. Seventy eight percent of all children who were investigated or assessed in FY 2015 had not had prior contact with CPS in the previous 12 months. This will serve as a baseline for future years.

Discussion of Metrics

Hotline Calls

The number of calls received by the Hotline has decreased in recent years and may be influenced by many factors in the community outside of the department's purview. Calls include reports of child abuse or neglect that are either screened in for CPS response or screened out, as well as other types of calls such as general information and attempts to reach staff when callers do not have staff's direct phone numbers.

Number of Child Abuse Complaints Accepted

There was a 13 percent increase from FY 2014 to FY 2015 in the number of complaints accepted by the Hotline and assigned to CPS staff for response.

Contact Within Priority Response Time

The higher number of cases handled by CPS staff this year impacted staff's ability to meet the timeliness metric. The percent of reports responded to within the state required response priority time fell slightly from 95 percent in FY 2014 to 92 percent in FY 2015. To address this issue the CPS program and CYF leadership is recruiting qualified workers to fill several vacancies within the program and is working diligently to provide training for all CPS workers through the Virginia Department of Social Services, the Child Welfare Institute and other avenues. These trainings will help workers better understand the requirements of their jobs and better perform their job duties.

Recidivism

CYF has created a new metric for measuring recidivism among CPS cases. This new metric reports the percent of children associated with a valid referral of child abuse or neglect that did not have valid referral for 12 months prior to the current referral. For FY 2015, 78 percent of children associated with a valid referral had not had a prior valid referral within the preceding 12 months. This measure will serve as a baseline for future years.