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Office of Child and Family Services
Responses to the Maine Child Death and Serious Injury Review Panel's
Multi-annual Report and Recommendations
2017-2020 Annual Report

The Office of Child and Family Services (OCFS) would like to thank the Maine Child Death and Serious Injury Review Panel for its review of cases to further inform strategies to improve the system of care for children and families in Maine. OCFS is committed to further collaboration on the recommendations outlined in the 2017-2020 Annual Report. This response seeks to provide additional context and information on the recommendations directed toward OCFS. As requested by the Panel, OCFS will provide a written report on actions taken and progress made in relation to specific recommendations made to OCFS by December 31, 2022.

Practice Issues

Recommendation: OCFS should consider working with law enforcement to create a position for an OCFS staff person who could become a certified trainer at the Criminal Justice Academy. This person would provide, along with a law enforcement professional, a class at the Academy on child abuse and neglect.

Response: OCFS has convened a workgroup of representatives from Law Enforcement, the Maine Hospital Association, Northern Light Hospital - Eastern Maine Medical Center, and the Office of the Attorney General to establish joint protocol agreements and increase communication and coordination when there is suspected child abuse or neglect. As part of this collaborative effort, the workgroup is developing strategies, such as cross-disciplinary training that will further educate partners about the other systems. Presently, mandated reporter training is provided to law enforcement trainees through the JPMA online learning portal. This training is also available from OCFS online or in person as it is for every other mandated reporter in the State of Maine. This recommendation will be considered as part of these efforts.

Recommendation: DHHS should continue ongoing review of community treatment reimbursement levels. Attention should be given to creating the availability of consultation from subject matter experts on the issues identified as needing assessment within a family. Finally, staff should be provided with policies as well as a training program to ensure they are aware of the best practices and most current knowledge in the field of child abuse and neglect and the field of Child Protective Services.

Response: The Office of MaineCare Services (OMS), in partnership with Children's Behavioral Health Services (OCFS) and the Office of Behavioral Health (OBH), have undertaken efforts to conduct rate studies to evaluate reimbursement for an array of treatment services. This work is currently in process.

It would be duplicative and an imprudent use of state funds to create the availability of consultation from subject matter experts on issues needing assessment within a family as this service currently exists through a contract for clinical consultation and support services.

Best practices and the most current knowledge in child welfare practice are incorporated into policies and training curriculum for staff as part of the review and revision of all child welfare policies through the Cooperative Agreement with the Cutler Institute, University of Southern Maine. OCFS and Cutler convene workgroups that include subject matter experts, individuals with lived experience, and OCFS staff in order to research best practices in the development of policies and trainings. This work is ongoing.

Recommendation: Given the identified challenges found in the cases reviewed, it is recommended that OCFS develop standards for supervision, including strategies to measure the effectiveness of supervision provided to staff.

Response: OCFS, in partnership with the Cutler Institute are developing a Supervision Framework that includes supervisor competencies, policy and practice guidance, the Supervisory Academy Training, and other tools, including those related to coaching. Evaluation of supervision skills is a component of this structure.

Recommendation: DHHS is in a unique position to provide leadership and funding to create a coordinated, multi-disciplinary team of community providers with specialized expertise in child abuse and neglect to enhance the identification, treatment and prevention of child abuse and neglect and should endeavor to do so.

Response: Through the Citizen Review Panels required under the Child Abuse Prevention and Treatment Act (CAPTA), OCFS is responsible for convening three (3) Panels charged with examining the policies, procedures, and practices of state and local agencies and, where appropriate, specific cases, in order to evaluate the extent to which the state and local child protection system agencies are effectively discharging their child protection responsibilities. The Child Death and Serious Injury Review Panel is one of these entities. The membership of the Panels is comprised of a diverse group of public and private sector individuals with different perspectives and expertise related to child abuse and neglect. OCFS is appreciative of the work of the Panels and the invaluable feedback and recommendations they provide regarding policy and practice at both the agency and system level.

<u>Selection and Implementation of Best Practices</u>

Recommendation: DHHS should consider hiring such an individual with expertise in identifying best practices. This professional should provide research data to managers responsible for developing proposals for programs designed to meet specific needs for specific populations.

Response: Within OCFS, the Family First Program Manager has undertaken the role of researching and identifying best practices utilizing the IV-E Clearinghouse, California Clearinghouse, and other resources to inform current efforts to improve service delivery to families in Maine as well as future program development. This is a new role in the last few years and has significantly benefitted OCFS and the Department. In addition, research is also conducted by the Cutler Institute, USM to inform the development of policies and training curriculum and by contracted clinical consultants specific to individual cases. OCFS publishes an annual report on the Children's Behavioral Health Services system of care that provides data and insight into evidence-based services available throughout the State and ongoing efforts to improve children's behavioral health services.

The Availability and Use of Empirically Supported Assessment and Treatment Standards

Recommendation: Consideration should be given to the development of an expert consultation service being made available to Department OCFS staff. This consultation service could also be housed within the State Forensic Service.

It is recommended that a work group be formed that includes at minimum the State Forensic Service, the Office of the Attorney General, Child Protection Division, the Administrative Office of the Courts, and OCFS. Funding must be made available to allow the State Forensic Service to identify and contract with an expert in the provision of these evaluations to participate in this workgroup.

This workgroup would report to the Commissioner of DHHS, the Attorney General, the Chief Judge of the District Court and the Ombudsman, providing written recommendations for structure, funding, recruitment, training and support of expert evaluators. The entities receiving those recommendations would jointly prepare any funding requests and proposed legislation necessary to put the plan in place. Once funding and an organizational structure are in place, recruitment and training should begin as soon as is practicable.

Response: OCFS continues to work in collaboration with other stakeholders, including the State Forensic Service, Office of the Attorney General, and the Maine Judicial Branch, to explore strategies to increase expert consultation services given the lack of Court Ordered Diagnostic and Evaluation Services that exist in Maine. This work will need to continue, and we are committed to being a partner in it, in order to build a sufficient cadre of evaluators statewide who have the experience and expertise to conduct these evaluations.

Recommendation: OCFS and the Office of Behavioral Health Services should develop and implement joint, multidisciplinary, empirically supported trainings for key community-

based professionals and child welfare staff. Participants should include, but not be limited to, school-based professionals, law enforcement, Public Health Nurses, visitation supervisors, social workers, psychologists, therapists, and addictions professionals. A process of fidelity monitoring should also be considered. Additionally, a plan to provide adequate reimbursement for these interventions should be developed.

Training materials should be identified or developed using the highest standards of outcome data available. The training materials should be based on the assessment of and interventions specific to child safety.

Resources identified in the section above, The Selection and Implementation of Best Practices, would be useful in identifying appropriate research studies, assessment, and treatment approaches to be included in such training.

Finally, this training should be ongoing, for the benefit of both the professionals who would have already been trained and for new professionals entering the field.

Response: OCFS has convened a workgroup with the Office of Behavioral Health (OBH) to support effective coordination between child welfare staff and adult behavioral and mental health providers and address any barriers. Initial efforts include the development of a guidance document that will be disseminated to behavioral and mental health providers working with families involved with the child welfare agency. Part of this work will include engaging community partners to identify additional strategies to strengthen these partnerships in support of families. Consideration will be given to extending these efforts beyond treatment providers to include other key community-based professionals. OCFS agrees that these training opportunities should be provided to staff and others on an ongoing basis.

Over the past year, as part of the Family First Prevention Services Plan, OCFS staff have been trained by providers regarding the array of services that exist in the State of Maine for families. In addition, OCFS has convened a State Agency Partnership for Prevention (SAPP) to identify primary, secondary, and tertiary prevention programs, as well as gaps in availability and access to these services, for example in rural areas of the state. OCFS is also working with Chapin Hall, an independent policy research center at the University of Chicago, to map services and understand these gaps at a greater depth to inform future program development.

<u>Children Traumatized or Retraumatized During Court-Ordered Visitation</u>

Recommendation: It is recommended that as a part of developing a reunification/ visitation plan for a child, the potential harm that may be done to the child as the plan moves forward be documented as well as the efforts to be taken to minimize that harm.

The Panel recommends that caseworkers contact their AAG to discuss the facts of a case if there is concern that visitation may be harmful to a child after a PPO is filed.

As a part of identifying subject matter experts, discussed in the previous section, the Department should identify and develop subject matter experts who can, and would be willing to testify as to why visitation may be harmful to a particular child.

As the case progresses, subject matter experts who are willing to testify as to what accommodations would be required to ensure that children are not further traumatized during visitation should also be identified and/or developed.

Response: Family Visitation services are court-ordered as a core component of a Rehabilitation and Reunification Plan when children have been removed from the care and custody of their parents and are required through 22 M.R.S.A. §4034(5) and §4034(6) which orders the Department to schedule visitation with the child's parents and siblings within 7 days of the issuance of the Preliminary Protection Order unless there are compelling reasons not to schedule such visitation. This requirement is also contained in 22 M.R.S.A. §4041(1-A)(C)(2), which requires the development of a visitation plan. Caseworkers consult with the Office of the Attorney General, and treatment providers in circumstances in which there are concerns about children participating in visitation with their parents in order to assess and minimize any potential harm.

It is recommended that consideration be given to resurrecting professional, clinically driven visitation services that are focused on the needs of the child and include ongoing assessment of parental capacity and progress through the demonstration of increased capacity to meet the needs of their children and ensure their safety.

Ideally, DHHS would establish evidence-based clinical family visitation services in all regions of the state. Using evidence-based models, families would follow a transition plan that would either increase or decrease their level of supervision during visits depending on their progress developing the necessary skills and making progress on their reunification plan. Ideally, reunification efforts in all regions of the state will ultimately follow an evidence-based model.

Response: OCFS provides an array of contracted family visitation services that include supervised visits and check-in visits. In collaboration with the Penquis Community Action Program, OCFS piloted a Family Visit Coaching model over the past several years and the service has demonstrated positive results. Given this, the Governor has included a statewide expansion of the Family Visit Coaching Model in her recent budget proposal. If supported by the Legislature, OCFS will implement this service statewide.

OCFS is also working with Fair Shake Visitation Services to increase the availability of visitation services through a contract for monitored visit services. In this model, visit rooms are equipped with cameras and visits are monitored continuously by staff. Visits can be observed by the caseworker, GAL, parents' attorneys, and the AAG through a secure live stream.

Through the implementation of these additional visitation services, OCFS offers families a continuum of visitation support in which the level of supervision can be increased or decreased based on the parents' progress in addressing child safety concerns and developing skills to safely parent their children.

Domestic Violence in Intervention Services

Recommendation: Regarding families avoiding child welfare investigation and intervention, it is recommended that OCFS establish a process for ongoing meetings that would include Child Welfare staff, an Assistant Attorney General from the Child Protection Division, and a representative of the Maine Coalition to End Domestic Violence. Meetings would focus on problem solving the most difficult situations where suspected or adjudicated violent or abusive offenders are effectively blocking assessment of and services to their families.

Response: Through the Rural Child Welfare Grant, the Maine Coalition to End Domestic Violence (MCEDV), has co-located Domestic Violence Advocates in the child welfare district offices. These staff are a resource to caseworkers and supervisors, as well as survivors in cases involving domestic violence and abuse. OCFS supports the recommendation to include staff from MCEDV in case consultations related to situations in which offenders may be blocking child welfare intervention efforts. Through the cooperative agreement, OCFS is working the Cutler Institute to review and revise all child welfare policies, including the Domestic Violence and Child Abuse and Neglect policy. Workgroup members include staff from MCEDV and the Domestic Violence Resource Centers. This work will include updating best practices, researching evidence-based treatment, and consultation with providers of certified domestic violence intervention programs. It will be important for this process to be incorporated into that policy.

High Profile Child Fatalities: Internal Sentinel Event Reviews Carried Out by OCFS

Recommendation:
It is critical to ensure that:

- **There is a thorough and unbiased consideration of the facts of the case.**
- **The review includes the development and implementation of steps designed to improve processes that can better support frontline staff in preventing similar tragedies in the future.**
- **There is a balance of accountability and support for staff who provide complex services and are coping with tragic outcomes, which can be compounded by the process of public scrutiny and blaming that often follows these incidents.**

The Panel would like to applaud the staff of OCFS for the manner in which they undertook and completed these reviews.

OCFS has, within the past few years, updated their internal sentinel event review processes in line with documented best practices in the field. The resulting reviews were thorough, balanced, fair and useful in improving internal processes.

The Findings and Recommendations arising out of these reviews were designed to create meaningful, measurable, positive change, and provide accountability, as well as preserve a work environment that adequately supports, trains and supervises the staff whose job it is to carry out the responsibilities of the Department to protect the children in its care, as well as those who remain with their families.

The Panel applauds OCFS on the expertise, commitment, and professionalism that formed the basis of these reviews.

Response: OCFS appreciates the recognition of efforts to conduct comprehensive internal reviews in which practice strengths and challenges are identified, as well as opportunities for improvement. To further improve this process, OCFS is implementing the Safety Science Model in Maine which is intended to establish a culture of safety by improving Maine's critical incident review system. The model engages agency leadership, frontline staff, and other key stakeholders utilizing safety science principles to support the advancement of safety and system change.

A Note on Follow-up to the Panel's Recommendations

Given the importance of meaningful progress in this area, the Panel respectfully requests that DHHS, the Administrative Office of the Court, the Attorney General's Office, Maine Coalition to End Domestic Violence and the Maine Criminal Justice Academy provide the Panel with written reports on actions taken and progress made in relation to these recommendations by December 31, 2022.

Response: OCFS agrees to provide a written report on actions taken and progress made in relation to specific recommendations made to OCFS by December 31, 2022.