

Vermont Citizens Advisory Board to the VT Department for Children and Families

FY21-22Annual Report

July 1 2021 - June 30 2022

I. FY21-22 VCAB Meetings

A. Vermont Citizens Advisory Board held four meetings:

- 1. September 1, 2021
- 2. December 1, 2021
- 3. April 6, 2022 (re-scheduled from March 2, 2022)
- 4. June 1, 2022

B. Meeting Location and Times:

VCAB met throughout this year via on-line videoconference, due to COVID restrictions implemented in 2020, and continued due to health safety concerns. VCAB's quarterly meetings were held from 9:00 a.m. to 12 noon; the December Retreat/Planning meeting was 9:00-1:00 p.m.

II. VCAB Operations and Leadership

A. VCAB Co-Chairs and Membership

- 1. VCAB Co-Chairs serve two-year terms, with elections scheduled for each, on alternating years, in March.
 - Co-Chair Sally Borden was re-elected in April 2022 to a two-year term.
 - Co-Chair Dr. James Metz continues his current term, until 2023.
- VCAB membership is staggered so that approximately half of the members are up for reappointment for two-year terms each year in March. *Attached* is a list of members reappointed in March 2022, as well as those whose terms continue until March 2023.
 VCAB bid farewell to long-time member and founding VCAB Co-Chair Dr. Joe Hagan.
- 3. An average of 16.5 empaneled members and 4 guests attended FY21-22 VCAB meetings. Additionally, from two to five DCF staff attended, including the Commissioner and/or Deputy Commissioner, and two staff members from KidSafe Collaborative, providing administrative support.

B. VCAB Process and Operations

- 1. VCAB operates in accordance with the Board by-laws, per the federal Child Abuse Prevention and Treatment Reauthorization Act of 2010, provisions for community advisory panels (§106(c)(4)).
- 2. VCAB is empaneled under the provisions of Vermont law: 33VSA49§17. Annual (re)empanelment was submitted and authorized effective October 1, 2021.
- 3. VCAB administrative and operational support is provided by KidSafe Collaborative, Inc. per a grant from the VT Department for Children and Families.
- 4. Vermont Department for Children and Families Commissioner Sean Brown and/or Deputy Commissioner Aryka Radke participated in all VCAB meetings, along with Operations Director Brenda Gooley and Child Safety Manager Nancy Miller.
- 5. An agenda for each meeting is sent to all members and to the DCF regular participants prior to each meeting. Meeting minutes/notes are taken at each meeting, and sent to all members with the subsequent meeting agenda.
- 6. VCAB's webpage, established in 2018 and maintained on the VT DCF website, provides the public with information about and access to VCAB. https://dcf.vermont.gov/boards-councils/VCAB
- 7. At the December 2021 VCAB Retreat/Planning Meeting, VCAB established three "action plan" committees. These Committees, comprised of VCAB members, will report on their activities at each VCAB meeting:
 - a) Membership Committee, focusing on expanding the diversity of VCAB membership, and looking at membership role overall
 - b) Case Review Committee, focusing how VCAB determines which cases to review and the review process
 - c) Collecting Stories of those with "lived experience" with child maltreatment and the child welfare system (these two committees may combine one).

III. Key Issues and Actions FY21-22

A. IT System

- 1. VCAB received a briefing from Deputy Commissioner Radke on 6/2/21 regarding the urgent need for an updated CCWIS system, and the ways Vermont's current system, including SSMIS and FSDNet databases, is outdated and cumbersome. Further discussion resulted in review of ways the current system may directly negatively impact child safety. VCAB feedback to Commissioner and Deputy Commissioner regarding the importance of youth to have access to their information, and incorporating this into new data system
- Action: Discussion at the September 2021 VCAB meeting resulted in the following:
 VCAB Vote: Motion made and approved to proceed with the VCAB letter, after edits discussed, to VT Agency of Human Services Secretary Smith, cc to Commissioner Brown, strongly advocating for funding for a data system that meets DCF Family Services' IT

needs. Include VCAB's appreciation of the Commissioner for prioritizing DCF-FS IT upgrades and improvements.

- Action: Letter to VT Agency of Human Services Secretary sent attached.
- 3. <u>Action:</u> VCAB Co-Chair Sally Borden provided testimony at the VT Legislative Joint Child Protection Oversight Committee regarding the need for a new IT system based on the child safety implications of the current antiquated multiple, duplicative systems. *Attached*.

B. Legislation

- 1. A number of legislative issues and updates were discussed, the primary one being legislation to establish a Vermont Office of the Child Youth and Family Advocate (OCYFA).
 - a. Some VCAB members actively promoted, testified and advocated on behalf of H265.
 - b. VCAB did not take an official stance on establishment of the OCYFA. Agreed: create a poll for VCAB members to gauge interest in 1) reiterate request for VCAB to have a role in oversight of the office; 2) making more formal support of establishment, and/or support for office to be placed within state government. Affirmative vote.
 - c. Action: A poll was created and sent to VCAB member regarding the OCYFA.
 - d. <u>Action:</u> VCAB sent a letter to the VT Senate Health and Welfare Committee recommending that, should the Office be established, VCAB have a formal role related to the OCYFA, specifically with the proposed Oversight Commission (attached)
 - e. <u>Action:</u> Email sent to Chair, Senate Health and Welfare Committee regarding VCAB role with the proposed OCYFA, in followup to letter sent previously. *(attached)*

C. Woodside and Juvenile Justice

- VCAB received regular updates from DCF regarding followup to the closure of the Woodside juvenile detention center, temporary placements of juveniles at the Sununu Center in New Hampshire and the proposed new facility – and numerous challenges and delays - in Newbury (Wells River) Vermont.
- 2. VCAB requested information from the Commissioner regarding the lawsuit against the Department and key employees filed on behalf of former juveniles housed at Woodside.
 - a. At the March 2022 VCAB meeting VCAB was made aware of a news report, widely shared in public media, that DCF and some former Woodside employees were facing abuse allegations made by former residents of Woodside in a federal lawsuit.
 - A number of VCAB members expressed concern that while VCAB had received regular updates about concerns at Woodside prior to its closing, and about the process of closing and proposed relocation of a secure facility for juveniles, VCAB had not been informed of this lawsuit and the abuse allegations.

- b. Discussion: VCAB role as empaneled team, pertaining to the information shared regarding the Woodside lawsuit, and more broadly to information sharing by VCAB members and as a Board.
- c. <u>Action</u>: VCAB requested regular updates from the Commissioner regarding any new information that becomes available about the Woodside lawsuit, as well as information about other relevant lawsuits against the department.
- d. <u>Action:</u> Request to DCF that VCAB be provided information regarding the proposed new juvenile facility(ies): what will look different in the new program? What policies have changed so that Woodside is not repeated? This agenda item will be placed on the agenda.
- 3. Concern: a youth incarcerated in adult facility. VCAB reviewed news article, and requested information from and discussion with Deputy Commissioner Radke about this practice.
- 4. Next Steps: VCAB recognizes the need for further clarification of what VCAB's advisory and oversight responsibilities are according to CAPTA, the Child Abuse Prevention and Treatment Act, and in accordance with the VCAB By-Laws. Additionally VCAB seeks to clarify with DCF how and what information will be shared both from DCF to VCAB and the responsibility of VCAB members regarding disclosure of potentially confidential information.

D. Anti-Racism, Justice, Diversity, Equity and Inclusion

1. <u>Action</u>: Created Membership Committee, whose purpose includes to increase diversity of membership on the VCAB. See Committees, below.

a. Membership Committee

- met six times between December and June 30, 2022.
- Developed and administered a survey of current membership to develop baseline information/data regarding member demographics as well as experience related to child maltreatment and/or the child welfare system.
- Created a list and plan for outreach to potential members to increase Board diversity.
- 2. <u>Action</u>: VCAB Agenda: Included updates from DCF Family Services at every meeting regarding the Department's progress with "JEDI" (Justice Equity Diversity Inclusion) work.
- 3. Action: IT system advocacy: included information about the need to collect and analyze accurate information about race, ethnicity, and other demographic information in order for DCF to have accurate baseline data. Current information, including culturally important information about child(ren) and family, may be inaccurate, subjectively determined, and not shared across DCF IT data systems.

E. VCAB Role, Membership, Meeting and Case Review Process

- 1. **Role of VCAB:** discussions of advisory vs. oversight; role and purpose; strategies for action. Planning Retreat held, December 2021.
- 2. Created Committees: Membership; Case Review; Lived Experience Stories
 - a. **Membership Committee**, see above. Co-chair facilitator: Sally Borden.
 - b. Case Review and Lived Experience Stories Committees (combined): supported VCAB presentation on Safety Science and implementation of Safe Systems Implementation Tool. Communicated with DCF Family Services leadership regarding VCAB case presentations and areas of focus. Co-chair facilitator: James Metz.

F. Additional Key Issues:

- Safety Science and Child Welfare: presentation from the National Partnership for Child Safety at University of Kentucky, Dr. Michael Cull. https://praedfoundation.org/wp-content/uploads/2021/05/2021.01.15_REFERENCE-GUIDE_-SSIT_Final.pdf
- 2. **Family First** Overview of Vermont's planning process and implementation proposal.
- 3. Child Custody, Rates and Placements: University of Vermont study and Legislative Report
- 4. **COVID**: staff return to workplace and policy updates; health and safety issues for children and families, foster care providers, staff.
- 5. **Workforce:** Caseload/Workload and staff shortages; staff safety.

IV. Case Reviews

A. Case involving a young child wherein the judicial determination was contrary to the Department's recommendation, which was based on significant child safety concerns. Discussion of issues regarding role of State's Attorney on CHINS cases, DCF-FSD's lack of legal representation in court, bifurcated system of State's Attorney on CHINS case, Attorney General then handles TPR, role of Probate Court.

Next Steps and Recommendations:

- Education of the judiciary by Dr. Metz and other child abuse experts; consultation with the Defender General's Office; determination if case had history of Special Investigation Unit involvement and exploration of statutory change regarding SIU involvement.
- Explore the system for DCF representation in court, including past and current efforts.
 Contact Co-Chair if interested in working on this.
- VCAB Actions: Vote: VCAB formally thank(s) the DCF-FS Family Services Worker (FSW) involved in this case for their outstanding work. (DCF leadership will convey this to the FSW.)
- B. Case highlights some challenges with the assessment tool used by DCF Family Services, identifying danger, when there are barriers to gathering comprehensive information. Lack of options for obtaining information on a CHINS B family assessment (Chapter 51) case, particularly if the parent does not disclose information or sign releases of information for collateral contacts, however child safety concerns remain.

Next Steps and Recommendations:

- Explore possible alternate ways of gathering information:
- DCF Economic Services Division may have some helpful information if the parents are receiving services.
- Continue to follow-up with persons who originally reported re if they have any more information; encourage continued reporting of child safety concerns.
- Long-term safety: determine if the children are active in any clubs or school activities, as additional protective factors which could possibly create adults the children feel safe disclosing to.
- C. Case: Youth "beyond parental control" also/previously referred to as "Unmanageable" or CHINS C. Challenges and considerations regarding safe reunification see Policy 98 (safe reunification) and Policy 126 (reunification post TPR) and the need for appropriate mental health/behavioral treatment services.

Next steps and recommendations:

- Exploration of specialized support for the child to successfully attend public school.
- Identifying additional specialized services in which some VCAB members may have expertise or knowledge.
- Strengthening the system of care overall, in which VCAB could have an advocacy role.

VCAB Annual Report FY21-22: Attachments

- 1. VCAB Membership List
- 2. VCAB Letter to AHS Secretary Mike Smith regarding need for updated DCF data system
- 3. VCAB Co-Chair Testimony to Senate Health and Welfare Committee re need for updated DCF data system
- 4. VCAB Letter and email to Senate Health and Welfare regarding H.265 proposed Office of Child Youth and Family Advocate

Chair and Member Terms: 2 yrs./staggered

| Co-Chairs: | | Title | Org | Email | Joined | Current Term | Alt | Officer Term |
|-------------------|--------------------|---|---|--------------------------|--------------|--------------|-------------------------|--|
| Sally | Borden | Executive Director | KidSafe Collaborative | sallyb@kidsafevt.org | 2009 | 2021-2023 | | 2014-16; 2016-18; 2018- 20; 2020-22; 2022 - 2024 |
| Dr. James | Metz | MD, Child Abuse Pediatrician | ChildSafe Program, UVMChildren's Hospital | james.metz@uvmhealth.org | 2018 | 2020-2022 | | 2020-21; 2021-2023 |
| Members | | Title | Org | | Joined | Current Term | alternates | Officer Term |
| Stephen G. | Berry | Foster/Adoptive Parent; Pastor | First Presbeterian Church | | 1998 | 2022-2024 | | |
| Sally | Borden | Executive Director | KidSafe Collaborative | | 2009 | 2021-2023 | | 2014-16; 2016-18; 2018- 20; 2020-22; 2022 - 2024 |
| Kara | Casey | Director of Economic Empowerment | Vermont Network Against Domestic and Sexual Violence | | Dec. 2020 | 2021-2023 | | |
| Kelly | Dougherty | Deputy Commissioner | Vermont Health Dept. | | 2020 | 2022-2024 | Alt./C.Seivwri ght | |
| Tom | Fontana | LCMHC, LADC, BASICS Program Coordinator | University of Vermont, Center for Health and Wellbeing | | 2016 | 2022-2024 | | |
| Emily | Fredette | Maternal Child Health/Inj Prev. | VT Dept. of Health | | 2021 | 2021-2023 | | |
| Linda E. | Johnson | Executive Director | Prevent Child Abuse Vermont | | 1998 | 2022-2024 | | |
| Patiance | Johnson | Community Member/Lived Experience | | | 2016 | 2022-2024 | | |
| Raenetta | Liberty | RN, SANE-A,P, SANE Coordinator | Forensic Nursing, UVM Medical Center (Alt) | | 2016 | 2021-2023 | alt to Tracey Wagner | |
| Wendy | Loomis | Executive Director | Vermont Children's Alliance | | 2017 | 2021-2023 | | |
| Judge Kathleen | Manley | Superior Court Judge (Retired) | Vermont Judiciary | | Dec. 2019 | 2021-2023 | | |
| Dr. James | Metz | MD, Child Abuse Pediatrician | ChildSafe Program, UVMChildren's Hospital | | 2018 | 2022-2024 | | 2020-21; 2021-2023 |
| Laurel | Omland | MS, NCC, Director Child, Adolescent & Family Unit | Child, Adolescent & Family Unit, VT Dept of Mental Health | | 2018 | 2022-2024 | | |
| Jennifer | Poehlmann | Executive Director | Center for Crime Victim Services | | 2017 | 2021-2023 | | |
| Rep. Ann | Pugh | State Representative | VT Legislature | | June 2021 | 2021-2023 | | |
| Dana | Robson | LICSW, Children's Mental Health Operations Chief | Department of Mental Health | | 2019 | 2021-2023 | alt to Laurel Omland | |
| Erinn | Rolland- Forkey | Foster Parent | | | | 2022-2024 | | |
| Amy | Rose | Policy Associate | Voices for Vermont's Children | | 2018 | 2022-2024 | | |
| Laura | Schaller | GAL | Vermont Judiciary/GAL Program | | 2019 | 2021-2023 | | |
| Cynthia | Seivwright | Division Director | Vermont Health Dept. ADAP | | 2018 | 2022-2024 | | |
| Edward | Soychak | Sgt., Prevention Services Division | South Burlington Police Department | | 2016 | 2022-2024 | | |
| Lt. Michael | Studin | Bureau of Criminal Investigations | Vermont State Police, Vermont Dept. of Public Safety | | Dec. 2020 | 2021-2023 | | |
| Tracey | Wagner | MSN, RN, SANE-P, VT Forensic Nursing Program | Child Safe Program, UVM Children's Hospital | | 2018 | 2022-2024 | alt/R. Liberty | |



Vermont Citizen's Advisory Board to the VT Department for Children and Families

September 29, 2021

Secretary Mike Smith Vermont Agency of Human Services 280 State Drive - Center Building Waterbury, VT 05671-1080

Dear Secretary Smith:

Vermont's Citizens Advisory Board (VCAB) was established by the federal Child Abuse Prevention and Treatment Act of 1988. Since then, VCAB has supported the work of DCF and advocated for systemic improvements. For over a decade, VCAB has acknowledged the ways in which Vermont's antiquated data system interferes with its ability to achieve best practices.

DCF's data system was launched in the early 1980s, prior to the launch of the world wide web. Vermont has been asking our DCF Family Services staff to use 11 separate systems and 30+ Excel spreadsheets to support their work and reporting requirements. We know that this practice is time intensive, increases the likelihood of human error, and is cumbersome. We also know that the lack of a comprehensive data system that communicates across silos disadvantages us and the children, youth, and caregivers in our child welfare system. We are currently unable to speak confidently about trends in outcomes for the system that is responsible for the well-being of some of Vermont's most vulnerable children and youth.

Deputy Commissioner Radke was asked to provide a status update during the June, 2021 VCAB meeting. In that update, she reported:

"In May of 2016, the federal government issued revised data systems requirements to state child welfare systems that wanted to update their current data systems. In response, 45 out of 50 states in the nation have now declared they have implemented or are now planning implementation of a new system, known as the Comprehensive Child Welfare Information System (CCWIS). Vermont is not among them, and FSD's need for a new database system, and the consequences of not having one are looming large."

During our September VCAB meeting, Commissioner Brown shared the wonderful news that there are plans to begin the first module of the data system update. As a group, we want to express our gratitude for this investment. That said, this is a first step which only begins to meet the IT needs of the Department.

VCAB strongly encourages the administration to prioritize a comprehensive data system for DCF. This should include an incremental update of the full data system, which will allow us to

take advantage of the matching federal dollars, and will set us up for the implementation of the Families First Prevention Services Act.

VCAB respectfully requests:

- Commitment to using the \$2 million dollars set aside for the first module of the data system in the carry forward section of the FY22 budget.
- Including the next module of the data system in the FY23 budget.
- Community input on ways in which a system can be developed to increase stakeholder communication and benefit current practice.

VCAB deeply appreciates your attention to this issue and looks forward to partnering with you on this project.

On behalf for the Vermont Citizens Advisory Board, per a vote taken on September 1, 2021,

James Metz James Metz, MD, Co-Chair

Sally Borden M.Ed., Co-Chair

Cc: Sean Brown, Commissioner

Aryka Radke, Deputy Commissioner

Vermont Legislative Child Protection Oversight Committee, Sen. Ginny Lyons Chair

Sally Borden
Executive Director, KidSafe Collaborative
Co-Chair, Vermont Citizens Advisory Board to DCF
Joint Legislative Child Protection Oversight Committee
November 19, 2021

Good morning Senator Lyons and members of the Committee. For the record, my name is Sally Borden, I am the Executive Director of KidSafe Collaborative, and am here today in my capacity as Co-Chair of the Vermont Citizens Advisory Board to the Department for Children and Families. I've served on VCAB since 2009, and as Co-Chair since 2014.

I've been asked to speak regarding the letter we sent to you from VCAB, a copy of a letter submitted to Agency of Human Services Secretary Mike Smith, regarding our concerns about the inadequacy of DCF's IT systems and our recommendations. I welcome the opportunity to further address this – not because I'm an IT expert which I'm certainly not, or because I'm particularly passionate about IT systems, or but because I'm passionate about child protection and children's care and well-being – as I know you are.

We have heard and known for years that the DCF Family Services IT systems are inadequate. Some of us have been around long enough to recall when then-SRS intakes were filed on paper face-sheets. When a report was accepted for investigation, the information was entered into a computer system, and...I believe we are still using that same DOS-based SSMIS computer system today. We keep adding on new "fixes", but they are cumbersome, clunky, and totally inadequate.

I know you are well aware of two recent reports that highlighted the need for improved information systems: The UVM Report on "Drivers of Custody Rates in Vermont" issued in September, and the CHINS Case Processing Study prepared with the Court Administrator's Office by the National Center for State Courts, and that you've recently heard directly from the UVM study authors. So I won't reiterate the details of their findings, but I hope what I present further underscores the need, and the recommendations to address this issue.

The very first finding in the UVM Report states "data systems that support field personnel's decision making are inadequate." So what does that mean? In a nutshell, Family Services Workers aren't able to get information they need in order to make critical decisions in a timely fashion. Decisions that can affect the safety of a child. Decisions that have profound ramifications for families.

FSD Workers have to access and navigate multiple systems on multiple computer screens – a veritable alphabet soup of SSMIS, FSDNet, D.O.C. and Court records, etc. not to mention various spreadsheets and documents; they have to enter and re-enter duplicative information. Time consuming, and there's room for human error. They could miss information that is relevant and maybe terribly important.

When a new case is opened the Family Services Worker has to complete a form – similar to the information that is on the Intake that is completed by the Centralized Intake Unit when they take the initial report; then they fill in a paper form and give it to an administrative staff member where it is entered into SSMIS. This is important because that information populates the child protection registry, and is also the basis, as I understand it, for drawing down funds. The redundancy of information is staggering, and the fact that there aren't *more* errors or missing information is amazing.

AND more importantly, our systems don't track the information needed to do quality social work with families. Our databases don't have fields for: what does the child or family need? What service referrals did you make? Did the family access those services?

This information is often recorded in case notes, which of course makes sense. A Family Services Worker meets with a family, maybe goes over the Structured Decision Making tools, identifies concerns such as domestic violence, substance use disorder, etc., and refers the family to appropriate services. And then they write up their case notes. Excellent social work.

Two weeks later they go back to meet with the children and family again, they pull up the case on their FSDNet dashboard, but none of that is in the information they're looking at on their screen. It's in their casenotes – which by the way can't simply be scanned and uploaded, they need to be filled out separately and entered into the system. And the Structured Decision Making Tool isn't embedded into FSDNet, that's in another system, on a different screen that the worker needs to log into separately.

As you may know, in my role at KidSafe Collaborative, I coordinate the CHARM team, Children and Recovering Mothers, which is a multi-disciplinary team working to coordinate services to support pregnant and post-partum women with a history of opioid use disorder, and their infants. We meet with medical personnel, substance abuse treatment providers, DCF Family Services, WIC, Reach Up, Lund and others, and share information so everyone on the team can best support these infants and families in very challenging situations. What I see – what I saw at our meeting just yesterday - is an excellent, dedicated DCF Family Services supervisor, who often says "wait a minute, I have to go to another screen to get that information."

Was this pregnant mom referred to residential treatment? Did she go? Did she do her intake at Lund? Because she is a very experienced supervisor, she's adept at quickly scanning the worker's case notes. If the information is there. Yes, the patient was referred to Serenity House. No note about whether she made it there or not. Oh wait, further down there's a discharge date, so she did get there. But then there's a note about court – so she goes to a different database for that information.

A child welfare database – which is what is needed - would have fields to track client needs, referrals made, services accessed, and most importantly, outcomes. How else are we – you, VCAB, DCF - going to know whether what we're doing is effective?

If you want a DCF report on how many pregnant women with a substance use disorder, who have open DCF cases, were referred to inpatient treatment, or how many are on Medication Assisted Treatment, there's no way to extract that information. So no way to do any evidence based planning, or to strategically deploy resources to best meet the needs.

You may recall that the only data we have about the number of parents with open DCF cases with substance use disorders, or more specifically with opioid use disorder, is gathered once a year as point-in-time information, via a hand count derived from asking Family Services Workers to count up their cases. This, in the middle of an opioid crisis, is absurd.

One more point about this is that critical safety information can be buried in case notes – maybe there was a note about a restraining order, or an identified safety risk to a Family Services Worker, and they should only do a home visit with law enforcement. Then that worker is out or maybe moved on from Family Services, the case wasn't flagged and then another worker picks up the case, and didn't see that note, buried in a case note, from months ago...

And actually, one more example: in a similar vein, a priority for VCAB and for the Family Services Division – and I'd venture to say for all of us - is to address racial inequities in our child welfare system and to focus on improving Diversity, Equity and Inclusion efforts. Deputy Commissioner Radke has made this a priority, for which we at VCAB most certainly commend her.

In our VCAB Statement on Anti-Racism, approved last March, we committed to the following actions: "We will call upon DCF to start by doing the following: examine their policies and practices in the context of racial bias; collect and analyze data that informs us about racial disparities;..."

What we have learned is that the latter is virtually impossible to obtain. DCF's systems track the data required by the federal government, but frankly it is inadequate and not

always readily accessible in a useful way. We do have race and ethnicity information which is gathered on the initial intake report, as accurately as the reporter has at the time of the report. This information is maintained in SSMIS, so we *can* get that much.

But then more specific or accurate race and ethnicity information may be obtained later, as the Family Services Worker gets to know the family, and finds out that perhaps they are a racially mixed family or they identify differently than the initial report stated. This information would have to then be updated on SSMIS, but is more often just in a case note.

And to measure outcomes? Well Structured Decision Making, asks how a family's race/ethnicity/culture impacts child safety, so that is helpful – but remember that is a different data system and screen altogether, so relevant/updated information needs to be reentered into SSMIS. SDM offers the opportunity for the worker to plan for appropriate family and community supports to help guide safety planning: maybe a referral to a community organization, reaching out to a community elder, intervention regarding corporal punishment, etc. -- which are then recorded in case notes, and not able to be tracked.

Can we find out how many families are served where the parents' primary language is, say, Mai Mai? Maybe if it was obtained and recorded on the initial intake. Were they able to access linguistically and culturally appropriate support services? Was the family able to get the support they needed? Did we fairly and equitably treat this family? How can we assess whether DCF is doing a good job or making progress if we can't get this information?

We need to be able to know whether our DCF Family Services staff is identifying families needs, making referrals, and helping families access the services and supports to keep children and youth safe and hopefully be able to safely parent.

Further, families' ability to have input about their needs is basic to family-centered practice, and a data system that reflects this, and whether those needs are being addressed – which a CWIS system can do - is vital as we move forward.

We'll need this as we embark on the Families First Plan, which I know you're hearing about next. So it's really not optional if we are to meet the goals and be able to draw down the funds to implement a shift to prevention oriented services.

I'll share just one more example because, Senator Sears, of your focus on the juvenile justice system: The YASI screening tool, which is used to assess juvenile offenders' risks, protective factors and needs, is a set of forms not on FSDNet. There is a tab on the FSDNet screen that links to Caseworks, then the worker needs to log in separately to that system. The same for Youthful Offender information – the worker needs to reenter all the information from court into FSDNet, so instead of spending their time

helping that young person get the services they need, they are spending time entering redundant information into two different databases. And then information can't be extracted by fields that would be useful for planning, or for more efficiently deploying the workforce.

So our call to you today is to underscore the need – if we are really committed to improving child protection and how we serve children, youth and families in this state, we need an updated, robust information technology system to specifically meet the needs of child welfare.

I also know that this is not Appropriations Committee! And this isn't a financial ask per se.

But our recommendations are clear, and we ask for your support, your influence, your advocacy within the Legislature to move this forward.

We support the funding – 2M - that has been approved for the first part of an upgraded information system. But that is only the first step. Vermont needs to make a *long-term investment* in a comprehensive CWIS, a Child Welfare information System.

We echo the UVM Report recommendation:

"Investments in a statewide child welfare information system (CWIS) with a userfriendly reporting interface – such as Casebook – is an immediate priority. Such systems can link administrative data with assessment tools that measure and report child safety and well-being (e.g., SDM and CANS).

Child welfare information systems also can: (a) aid intra- and cross-agency coordination, including referrals and service provision; (b) enable more efficient progress monitoring; and (c) facilitate collaboration with outside experts in [Quality Improvement] and data-driven practice."

I appreciate that you are aware, from the reports, that 45 of the 50 states have already invested in upgrading their child welfare information systems. There are a number of systems out there. I and others on VCAB are not the experts on IT systems, but we certainly don't need to reinvent the wheel. There is federal matching money available to do this, and we would be severely remiss to leave that money on the table when the need is so urgent.

In our letter, our second VCAB recommendation was "Including the next module of the data system in the FY23 budget." I daresay that as an advisory board we didn't go far enough – we need to recognize that this is a multi-year effort, requiring a multi-year

commitment. We know that a lot can change administratively and legislatively, so we are advocating for that commitment to be made now.

You know, when you convene next session, you – probably Senator Lyons' Health and Welfare Committee – are likely going to want to get a report on how many children in DCF custody received COVID vaccinations. Or how many were impacted by COVID? Had to move out-of-home placements due to positive COVID tests for themselves or household members?

How can we respond effectively to this crisis we're in, when we don't know and can't get that information? Perhaps there is Covid-related funding that could be made available as we cope with this ongoing crisis that continues to impact families – and also to destabilize our workforce which certainly impacts DCF Family Services' ability to meet the acute needs of kids and families.

We need to have a commitment now, and we have an opportunity now, to commit to purchasing a CWIS system that fully meets our needs.

So I'll leave it at that, respectfully requesting your support, and happy to answer any questions – or defer to the experts here from DCF!



Vermont Citizens Advisory Board to the Department for Children and Families

March 28, 2022

Dear Senator Lyons and Members of the Senate Health and Welfare Committee,

We are writing to you regarding H.265 - An act relating to the Office of the Child, Youth, and Family Advocate. On behalf of the Vermont Citizens Advisory Board to the Department for Children and Families (VCAB), we would like to request that VCAB have a formal role related to the OCYFA, specifically with the proposed Oversight Commission.

VCAB, founded in 2004, fulfills the federal mandate for our child welfare system to have a citizens review board. It is established to examine policies, practices and procedures of the state's child protection agency and, where appropriate, review specific cases to evaluate the extent to which the agency is discharging its responsibilities.

While we understand the concern that specific agencies and organizations not be designated in law to serve on the Oversight Commission, no other entity in Vermont has this federally mandated role and responsibility. For that reason we believe that a formal role for VCAB be included in this legislation.

We will be discussing H.265 in more depth at our upcoming VCAB meeting on April 6th. We would appreciate the opportunity to offer additional input to your Committee should there be additional recommendations from VCAB following our meeting.

We have been impressed with the range of testimony you have heard as you consider this important piece of legislation, and we appreciate your consideration of this recommendation.

Sincerely,

Sally Borden, M.Ed.

VCAB Co-Chair

Sallyb@kidsafevt.org

James Metz

James Metz, MD VCAB Co-Chair

james.metz@uvmhealth.org

VCAB - Email Communication re Ofc Child Advocate H265 Senate Health and Welfare

On Apr 11, 2022, at 4:40 PM, Sally Borden < sallyb@kidsafevt.org> wrote:

Greetings, Senator Lyons and Senate Health and Welfare Committee, I just saw that H265 is scheduled on your agenda for tomorrow, so I wanted to share additional information from the **Vermont Citizens Advisory Board** with you as I'd previously mentioned.

At our meeting of the Vermont Citizens Advisory Board last week on April 6th, we discussed the proposed OCYFA. In a subsequent poll of the membership, a significant majority of respondents answered "yes" to these three questions:

- 1) VCAB should continue to advocate for a formal role for VCAB related to the proposed Office of the Child Youth and Family Advocate.
- 2) VCAB should advocate for the approval of the establishment of an Office of the Child Youth and Family Advocate (currently H.265)
- 3) VCAB should advocate for the OCYFA to be an independent entity within state government appointed by the Governor (e.g similar to the VT Commission on Women), as supported by Voices for Vermont's Children

Note: another option for this questions was: "No: the office should be housed by an outside agency (e.g. Legal Aid, as supported by the Department for Children and Families)"; only one responded answered favorably to this.

I appreciate you sharing this information with the Committee, as well as the letter we previously sent, and would be happy to provide it in a more formal form if you wish and also to join via Zoom if needed.

With warm regards, -Sally

Sally Borden, M.Ed., Executive Director KidSafe Collaborative preferred pronouns: she/her 7 Kilburn St., Suite 209, Burlington VT 05401 802.863.9626 x100

<u>sallyb@kidsafevt.org</u> <u>www.kidsafevt.org</u> and find us on <u>fb</u> KidSafe Collaborative: working *together* to end child abuse

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From: Virginia Lyons < VLyons@leg.state.vt.us>

Sent: Tuesday, April 12, 2022 12:12 AM **To:** Sally Borden < sallyb@kidsafevt.org>

Cc: Aaron DeNamur < ADeNamur@leg.state.vt.us >; Metz, James B. < james.metz@uvmhealth.org >

Subject: Re: Additional re H265 from VCAB

Sally-

This is very helpful. Thank you. We will post this to our webpage for S265.

Best-

Ginny Senator Ginny Lyons Chair, Health and Welfare Committee