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# CHAPTER 1

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## Background

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The Department of Family Services (DFS), Wyoming's child protective services (CPS) agency, responds to reports of child abuse or neglect (CA/N) that come to field offices around the state. CA/N includes basic, educational and medical neglect; physical abuse; sexual abuse; and child major injuries or fatalities. DFS screens reports, accepts them when they meet statutory criteria for CA/N or rejects them, and responds as guided by rules and policies.

### **CPS in Wyoming is a complex process laden with ambiguity**

***From statute and rules to DFS policy and terminology to family situations, CPS is inherently ambiguous.***

Even though the social goal – protecting children's health, safety, and welfare – is straightforward, the statutes, rules, policies, and practices guiding child protective services are both complex and imprecise. Statute calls for a range of discretion, starting when a supervisor screens a report to determine whether it fits statutory CA/N definitions, and continuing throughout the process to when agency personnel, either acting alone or with the court, determine that DFS involvement with a family should end.

Understanding this context also means accepting a certain level of ambiguity. This is because, within Wyoming CPS, there are terms used in multiple and overlapping ways, three different tracks of CPS intervention that are often difficult to distinguish, a complicated electronic data system that figures prominently in most processes, local protocols that affect how supervisors manage casework in their offices, and of course, the diverse circumstances that make no family's situation the same as any other's.

### **CPS caseworkers operate in a dynamic, pressured, and collaborative environment**

Further, as described in our 1999 report, an effective child protection system does not rely solely on the efforts of DFS. An incident may involve many parties: other state agencies,

professional and non-professional reporters, law enforcement personnel, public and mental health agencies, prosecuting and defense attorneys, judges, guardians ad litem and court appointed special advocates, schools, and service providers.

***Caseworkers must balance family, agency, and community values and expectations.***

Caseworkers juggle these often competing interests in an atmosphere of contention, collaboration, and sometimes crisis. They need to make critical decisions quickly, often based on limited information and sometimes after only brief encounters with the children and their families. They need to assess individual family strengths while organizing appropriate services to help rehabilitate family actions that prompted a report of child maltreatment. From the moment a CPS report comes to DFS, caseworkers are balancing child safety, parental rights, and community expectations.

### **Federal and state laws guide child welfare agencies**

A significant body of federal law governs child welfare practice in the states. Examples include the Child Abuse Prevention and Treatment Act (1974), the Indian Child Welfare Act (1978), and Adoption and Safe Families Act (1997). Each act sets practice and policy requirements for states that receive the related federal funding.

***Reports of CA/N can involve not only DFS but also the courts.***

In Wyoming, two Chapters of Title 14, Children, contain most of the laws concerning CPS. W.S 14-3-201 through 216 (see Appendix A), Child Protective Services, defines abuse and neglect, establishes general principles and processes DFS must follow, and requires DFS to establish and maintain a central registry of CA/N offenders. W.S. 14-3-401 through 440, the Child Protection Act, establishes the processes and requirements by which DFS can refer CA/N cases for adjudication through the Juvenile Court.

### **Wyoming's CPS workload and costs have increased since 2000**

In 2007, DFS received nearly 8,000 CA/N reports, accepting about 5,000 to which a CPS caseworker then responded. This was

***Since 2000, CPS reports have increased by more than one-third.***

a 36 percent increase over 2000 (see Appendix B for intake and incident statistics). Other reports, those concerning children in need of supervision (CHINS) and delinquents, decreased by almost the same proportion. In that same time, legislative appropriations for CPS more than doubled, to almost \$59 million for FY '09 – '10 (see Appendix C for contract service types and expenditures).

According to DFS, CPS incidents tend to be more complicated and difficult to manage than other child welfare incidents. Caseworkers must respond immediately when there is reason to believe children may be at imminent risk. CPS rules require immediate response to reports of many allegations, including those involving major injury and children under six, and in incidents that indicate a need to take protective custody.

***DFS must respond immediately or within 24 hours, depending on a report's severity.***

For all other accepted reports, caseworkers must initiate a response within 24 hours. Safety assessment, assignment to a service track, case planning, and management of services can follow, all designed to protect the children at risk and preserve their families. Services can be wide-ranging, from nutrition and parenting classes to mental health counseling and substance abuse treatment programs. Services are court-ordered in some situations, but if not, families can accept or decline DFS offers to provide them.

## **WYCAPS is the electronic incident tracking and data gathering system for CPS**

***DFS counts each accepted report as an "incident" in its WYCAPS information system.***

WYCAPS, the Wyoming Children's Assistance and Protection System, is the DFS electronic system for aggregating data required for federal reports. To improve efforts in child welfare quality assurance, DFS has added reporting modules to this system that track each child welfare report. DFS acceptance of a report opens an "incident" in WYCAPS; from there, caseworkers create a narrative in which they record many of the actions taken. A family may have multiple incidents associated with multiple programs (CPS, delinquency, and CHINS actions) open in WYCAPS at the same time. Also, DFS uses WYCAPS to identify substantiated CA/N offenders for the central registry.

### Most CPS staff work in local offices

**Generally, CPS caseworkers staff only CPS incidents.**

At the state level of DFS, the Protective Services Division has eight staff to administer CPS, most of them consultants working with CPS policy and practice. Locally, DFS has 28 offices in six districts (see Figure 1.1), with a total of 197 CPS positions; as of May 2008, 193 were filled. CPS workers include district managers, casework supervisors, caseworkers, and social service aides. In all but one small local office, CPS caseworkers work only CPS incidents. In some larger offices, they further specialize by conducting CPS investigations or managing and providing ongoing services.

Figure 1.1

DFS Offices and Districts



Source: LSO summary of DFS information.

Since our CPS report in 1999, DFS has divided child welfare functions at the state office into two divisions, Protective Services and Juvenile Services. The position of field operations administrator has been eliminated, with districts now reporting to the director’s office.

### **CPS staff have varied social work experience and education levels**

***Almost all caseworkers, supervisors, and managers have post-secondary degrees.***

Statewide, caseworkers have a median experience level of just over 2½ years; by contrast, the median for supervisor and manager experience is over 15 years. Almost all caseworkers, supervisors, and district managers have post-secondary degrees, while aides generally do not, due to the recruiting requirements for those positions. As we found in our 1999 report, turnover among CPS caseworkers is an ongoing problem both nationally and for DFS. Since 2000, annual caseworker turnover in DFS has fluctuated between 10 and 23 percent; in 2007 it was 21 percent.

### **Accepting reports, assigning tracks, planning and delivering services, are just some parts of the CPS process**

***In the complex and stressful environment of CPS, policies and procedures are important.***

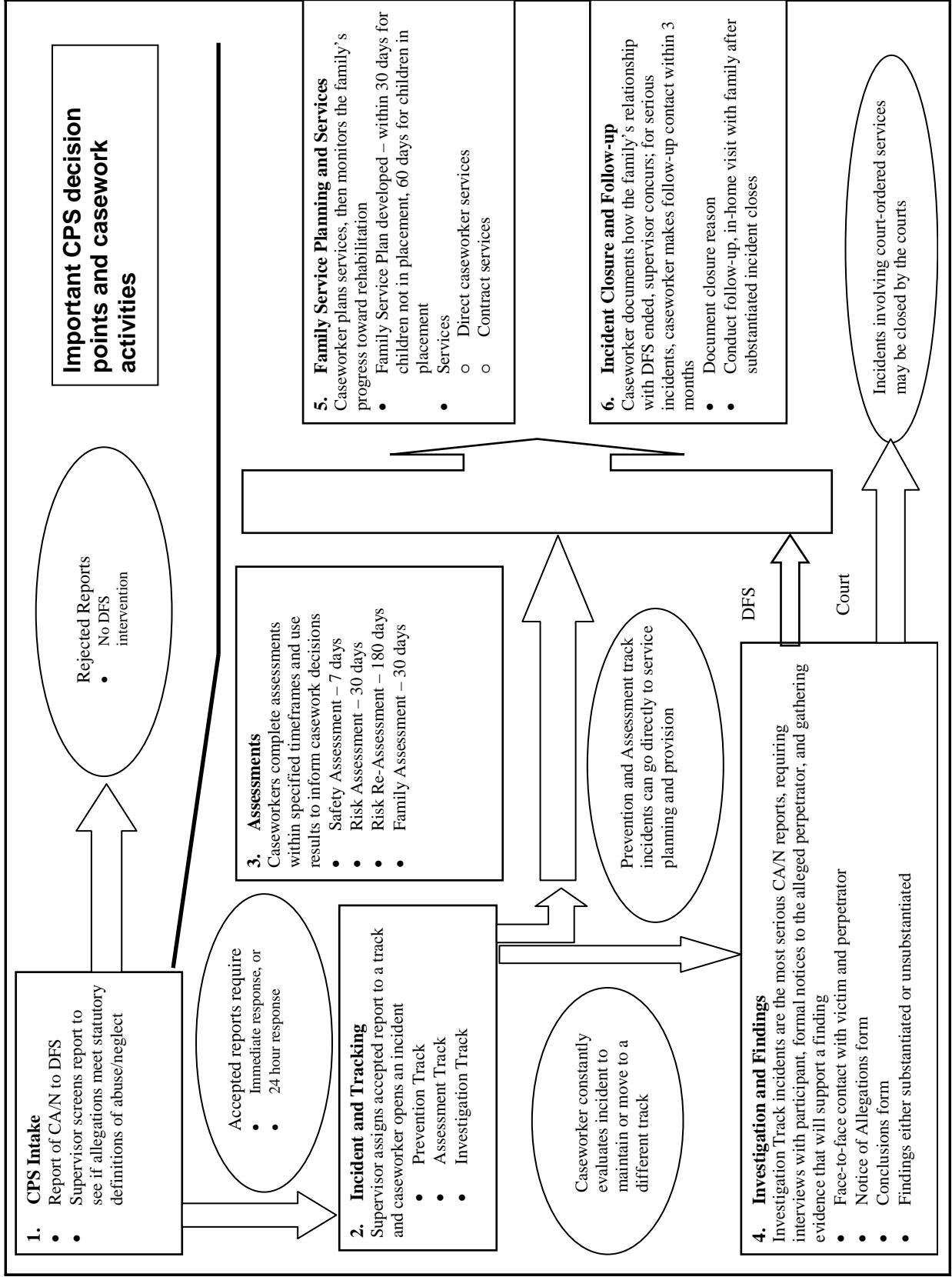
Guidance through written policies and procedures is critical to the CPS process, according to the Governmental Accountability Office (GAO). In a study of CPS, GAO stated that “policies and procedures provide structure in the stressful environment in which caseworkers function, and reduce the probability of making mistakes.”

DFS has more than 300 pages of policy that apply to the management of child protective services and child placement cases. In the last few years, the agency has been working to comprehensively evaluate its policies and procedures, with the intent to make them more accessible and clearer to caseworkers in the field. Since October of 2007, the Family Services Manual has been accessible online, through the “Publications” link on the DFS website, <http://dfsweb.state.wy.us>.

Because the CPS process can be intricate and hard to understand, we developed the following flow chart and summary of decision points (Figure 1.2 with accompanying narrative).

Figure 1.2

## CPS process flow chart



Source: LSO summary of DFS statute, rules and policy.

## Important CPS decision points and casework activities

From beginning (when CA/N reports come into DFS) to end (when DFS closes an incident), the CPS process can be complex and wide-ranging. Federal law, Wyoming statutes, rules and regulations, and DFS policies set the standards. Generally, six broad categories of actions occur, with DFS making key decisions at these points: 1) intake, 2) tracking of accepted reports (incidents), 3) assessments, 4) investigations and findings, 5) family service (or “case”) plan and service provision, 6) incident closure and follow-up. Not all of these take place in each CPS incident and may not occur in exactly this sequential order; for example, only some incidents are fully investigated, assessments may be done throughout the incident, and many do not involve family service planning or services.

**1) Intake and Reporters** Statute authorizes a central toll-free CA/N reporting system, but almost all reports go to local DFS offices. A DFS intake worker gathers as much identifying and situational information as possible from the reporter, and a supervisor screens the intake to determine if the report meets statutory definitions of CA/N. This must be done within 24 hours, although certain reports require immediate response. Supervisors reject reports not meeting CA/N definitions and no DFS response is necessary. Important intake information includes the basics of who, what, when, where, and how. Statute designates everyone as a mandated reporter; professional reporters include law enforcement, healthcare, education, and social services personnel.

**2) Incident and Tracking** Once accepted, a report becomes an open incident, often called a case; DFS organizes casework and recordkeeping around the incident. Since 2001, DFS has assigned intakes to one of three response categories, called tracks: *prevention*, *assessment*, and *investigation*.

- **Prevention track:** For reports with no specific allegations, but families may need services to alleviate identified CA/N risks.
- **Assessment track:** For reports with specific allegations against a family, the allegations present no apparent immediate safety concerns, and a collaborative approach can bring resolution to the presenting CA/N issues.
- **Investigation track:** The most serious track, assigned for reports meeting critical safety criteria where children may be in imminent danger, sexual abuse may be occurring, protective custody may result, or criminal charges may be pursued.

The first two tracks attempt to keep family situations from escalating to the investigation track, where findings of CA/N on the family must be substantiated or unsubstantiated.

**3) Assessments** To help make decisions on actions, caseworkers complete a series of assessments on accepted reports. Assessments take place at the beginning of an incident and throughout its duration.

Caseworkers constantly evaluate families to ensure that track assignment and assessments remain accurate; incidents that move up or down in track assignment may need to be reassessed. Each type of assessment helps evaluate a family's progress toward keeping the children safe and rehabilitating the family.

A *safety assessment* and safety plan must be completed within 7 calendar days of the report. In addition, where risks have been identified, caseworkers complete a *risk assessment* within 30 days. A *risk re-assessment* is required on incidents open for at least 6 months where risks were previously identified, or when new circumstances impact family risks. A *family assessment* is done within 30 days of the initial report, to identify family strengths and problem areas on which to base interventions and services.

**4) Investigations and Findings** Certain types of allegations require immediate DFS response and face-to-face contact with the victim and perpetrator. In the investigation process, alleged perpetrators of CA/N receive a Notice of Allegations about the alleged child maltreatment, as well as a formal Conclusion documenting the investigation findings.

If DFS finds a *preponderance of credible evidence* to support the conclusion that CA/N did occur, an investigation yields a substantiated finding. A substantiated perpetrator may make a voluntary statement of explanation which accompanies the finding onto the central registry of CA/N offenders.

DFS allows up to six months to conduct investigations, with extensions allowed under special circumstances. Substantiated perpetrators may appeal findings within DFS, then to the Office of Administrative Hearings, and ultimately to District Court.

**5) Family Service Planning and Services** Some incidents develop to the point that families and caseworkers together devise a Family Services Plan. Previously called a case plan, it may change as a family's service needs or the children's permanency goals alter. DFS can offer *direct services* such as parenting classes, in-home visits, or transportation, through local staff. DFS may also offer *contract services* delivered by third-party providers; examples of such services include mental health and substance abuse evaluations and therapy, out-of-home placements for children, and medical and dental services paid for by Medicaid.

**6) Incident Closure and Follow-up** Case closure defines how CPS incidents eventually close – after successful completion of the case plan, a family's refusal of services, or court termination of an incident. Once an incident is closed, CPS interventions and contact with DFS staff effectively cease for most cases, unless another report on the family comes in. However, for incidents with substantiated allegations, DFS policy requires caseworkers to make a follow-up visit with the family within three months after closure.



## **Most accepted incidents do not require DFS investigation**

***Most CPS reports never reach formal investigation status.***

Most CPS reports that come into DFS do not progress from intake to incident closure by meeting family service plan goals. Many do not require formal investigation, assessment, and casework to resolve, and only about one-fifth of CPS accepted reports reach formal investigation status. The remaining incidents, according to policy, become either assessment or prevention track incidents, as determined at intake. From 2004 to 2007, only about five percent of accepted incidents (three percent of all CPS reports) went through the entire CPS process by meeting family service plan goals.

### **“Goal achieved” and other closure reasons are not definitive**

Caseworkers enter reasons into WYCAPS to close incidents and describe how DFS involvement ended. They sometimes note the reason as “goal achieved,” although this label fails to reflect the varied casework activities that often take place prior to closure. Other examples of closure reasons include “unfounded” and “unable to locate,” as well as the less clear “services not needed” and “family request.”

## **DFS’ child welfare system has received multiple federal and state reviews**

***States must undergo U.S. Dept. of Health and Human Services CFSR review to retain federal CPS funding.***

The federal government, through the U.S. Department of Health and Human Services, began to perform Child and Family Services Reviews (CFSRs) in each state in 2001; Wyoming had its first CFSR the following year. Since federal funds account for about 18 percent of the CPS budget, Wyoming must comply with the CFSR to retain this funding. The CFSR targeted three outcomes of child safety, permanency and wellbeing, through examination of case files and aggregate data. As a result of the state not being “in substantial conformity” with several measures, Wyoming, like all states, submitted a Program Improvement Plan (PIP). DFS is currently drafting a PIP in response to the recent June 2008 federal review, its second.

***After the 2002  
CF SR, DFS  
implemented a  
“family-centered”  
casework practice  
model.***

The main thrust of the 2002 PIP was shifting CPS in Wyoming from a focus on child safety to a family-centered concept. The cornerstone of PIP efforts was to implement family-centered practices designed to give families more input into the intervention, case planning, and services provided. This change meshed well with the assessment and prevention approaches (described on page 7) aimed at lessening the legalistic and often adversarial atmosphere in which caseworkers operate. DFS also undertook a broad review and revision of rules and policies, and now incorporates citizen feedback into its ongoing quality assurance efforts. The agency believes these changes have contributed to significant improvements, such as a clearer framework of rules and policies, more comprehensive casework practices, and better outcomes for children.

***Several oversight  
boards are reviewing  
the department’s  
CPS practices.***

**DFS receives many recommendations on how to improve child welfare system**

DFS has a well-established, multi-faceted framework for child welfare oversight. Most prominent in this category are the federal Children and Family Services Review (CF SR) and the ongoing state version of the same review done by the Wyoming Citizen Review Panel. In addition, there are the DFS Advisory Board, the Interagency Children’s Collaborative, and the Major Injury and Fatality Review, all in place and making recommendations. We sense that all of these recommendations may be overwhelming DFS’ ability to analyze, synthesize, and translate them into consistently-applied CPS practice changes.

***DFS has addressed  
issues from our  
previous reports.***

**Recent LSO program evaluations identified problems with placements and financial accountability**

Wyoming is noted as having a high placement rate for children, a fact acknowledged by DFS in its most recent Statewide Assessment for the CF SR. However, since we completed evaluations in 2004 and 2005 covering placements at residential treatment centers and foster care, this report does not cover out-of-home placements. In response to the shortcomings we identified in those reports, DFS has instituted performance-based contracting, third-party reviews on continuing placement appropriateness, and tiered rates for different-aged children in family foster care.

## **DFS can do more to ensure consistent and effective CPS processes**

Many entities continue to review CPS, but we did not see that any of them, or DFS itself, had looked at the specific aspects of CPS in which the Management Audit Committee expressed interest: the implementation and effectiveness of the track system, and investigation, in-home services, and central registry processes in and of themselves. Thus, we focused on these areas, and amid its many recommendations, encourage DFS to give ours particular consideration since they represent the Legislature's concerns.

***DFS needs to adjust CPS processes to better fit with statutory and agency intentions.***

When we reviewed CPS in these specific areas, we found that CPS processes can improve. To begin, we reviewed implementation of the track system and found concerns with both how accepted CA/N reports are assigned to tracks, as well as with how effective the multiple response system has been so far. Further, with respect to casework practices, we saw need for improvement in how caseworkers fulfill investigation responsibilities, and how they monitor children who remain in their homes with the caretakers who abused them. Finally, with respect to specific parts of the CPS program, we make suggestions for strengthening the central registry process, and for how DFS can enhance its own quality assurance program so it identifies the sorts of issues we found.

