
CHAPTER 6

Assurances that children remain safe in the home need to improve

Chapter Summary

DFS needs to strengthen efforts to meet its basic obligation of protecting those children living in inherently risky situations.

The national news media frequently feature stories about incidents where children known by social services agencies to be at risk have been seriously harmed or even killed while in the care of their parents or other caretakers. Ensuring that children in its legal custody are safe, whether they are in foster care or living with their parents, is arguably one of DFS' most critical obligations. Further, by interacting with families through the assessment and prevention tracks, DFS caseworkers know about even more at-risk children, those who are not (yet) victims of substantiated abuse or neglect.

Our review of CPS files and electronic data indicates that DFS does not consistently put forth efforts to ensure the safety of children who are in the care of parents or caregivers known to have compromised their children's welfare in the past. This is a population prone to relapsing into behaviors that are harmful to children. With the DFS change to the family-centered practice model and its focus on family preservation, CPS services for these families concentrate on the parents, attempting to improve their parenting skills and basic functioning. However, we believe DFS also needs to strengthen efforts to better meet its basic obligation, protecting children's health, safety, and welfare.

CPS children in the home are vulnerable

Law enforcement, not DFS, has authority to remove children from their homes.

A common perception is that child protection agencies often remove abused and neglected children from their family homes, then place them in foster care. However, in Wyoming, law enforcement officers have removal authority, not DFS; also, in our investigation incident sample from 2004-2007, just 22 percent of the incidents involved the removal of one or more children (see Appendix H for statistics on CPS placements).

Many children in foster care reunify with parents in trial home placements while still in the state's legal custody.

Thus, many children who are victims of substantiated abuse and neglect remain in their homes while the families receive services, meaning they are often in the care of the persons who earlier maltreated them. In addition, many children in foster care go on to reunify with their families through trial placements at home; some reunify successfully and remain at home after the state relinquishes custody. The children are vulnerable at all these stages because, according to a national study and our review of files, families who become involved in child protective services tend to repeatedly generate reports of child maltreatment.

Re-reporting and re-victimization are likely for CPS client population

In our review sample of families with substantiated incidents, most re-entered the CPS system within two years of closing those incidents.

Many families who become involved in child protective systems re-enter, sometimes voluntarily, but most likely due to multiple later reports on them. According to a 2005 U.S. Department of Health and Human Services study, after an initial accepted maltreatment incident, children will be involved in an average of two future reports and more than one future accepted incident. The study also concluded that some children require more intense services and continuous monitoring to insure safety and prevent long-term harm.

DFS client families in our sample had multiple incidents

Our sample of investigated and substantiated DFS incidents also showed that the families coming into contact with DFS did so repeatedly. Of the 51 cases with at least one substantiated incident, more than half had a subsequent report and accepted incident with DFS, including both tracked and untracked incidents. More than one-third had subsequent reports leading to a full CPS investigation, and 61 percent had either previous or subsequent investigations. Also similar to the national study, most families re-entered the CPS system relatively quickly – within two years after closure of a substantiated incident. In this sample of 220 incidents, DFS opened 123 of them either concurrently with other opened incidents or within six months of previous ones being closed.

Caseworkers are not always following policies for ensuring children's safety in their homes

In order for children to live safely in their homes after DFS receives allegations of CA/N, caseworkers engage, evaluate, serve, and monitor the family through the CPS process. Our review of DFS files and electronic data indicates that caseworkers are not consistent in their efforts to ensure the safety of the children in these uncertain circumstances.

LSO and federal reviews have stated this before

In 1999, DFS lacked a policy on how often caseworkers should visit CA/N victims living at home.

In our 1999 CPS report, we noted that DFS lacked a policy on how often caseworkers should see and evaluate the safety of children who are victims of abuse or neglect and living at home with the caretakers who maltreated them. We also noted concerns that DFS lacked the capability to electronically monitor whether caseworkers were regularly seeing these children. In 2002, the state's first federal review (CFSR) made a similar finding; caseworker visits with children were "not always of sufficient frequency and quality to ensure safety, permanency, and well-being."

Although policy and procedural changes have occurred, there is still room for improvement.

DFS has since implemented policy and procedural changes, but we believe still more improvement is needed in this critical area. To assess DFS safeguards for ensuring safety of children in these vulnerable circumstances, we focused on three policy areas and the procedures that apply to them: use of safety and risk assessments, face-to-face visits with children in their homes, and follow-up on substantiated incidents once they are closed. In our sample of cases, caseworkers were not consistently following DFS policy in these areas.

Formal safety and risk assessments are not completed as policy envisions

Since 2005, there have been CPS policies for safety and risk assessments to guide DFS casework. The policies are specific about when these assessments, including a risk re-assessment, are to be done; they apply to "all open cases where risks are identified."

In our file review, we did not see much evidence that safety and risk assessments were done.

We reviewed evidence of caseworkers' use of safety and risk assessments and risk reassessments by looking at both hard copy files and WYCAPS. In review of the hard copies, we saw that at most, half of the files included safety assessments for at least one of the incidents in the file. As to risk assessments and risk reassessments, the same was true for less than one-third of the files we reviewed. Further, we saw little indication in incident narratives that the results of these assessments were being applied to incident management.

WYCPAS aggregate data showed more, but not the expected level of completed assessments.

Because safety and risk assessments are so critical to ensuring children's safety, and because we saw so few of them documented in hard copy files, we turned to WYCAPS. We looked at aggregate data for all CPS incidents, as well as for the targeted incidents in our sample. Aggregate WYCAPS data show that caseworkers are completing safety and risk assessments in WYCAPS to a greater degree than we saw in the files, but still not to the extent required by policy. For example, as Figure 6.1 shows:

- Safety assessments are completed in most incidents.
- Risk assessments are completed in a majority of incidents, but less often in non-investigation cases.
- Risk re-assessments are completed in only one-third of investigation incidents, and rarely for non-investigation incidents.

The lack of risk re-assessments poses a concern.

We also found problems with caseworker timeliness in completing assessments. From the date a report is received, requirements are: completion within 7 days for safety, 30 days for risk, and 6 months for risk re-assessments. Our aggregate analysis showed that roughly one-third of the assessments in any category are not completed within policy timeframe requirements.

Figure 6.1

**Incidents with completed safety, risk, and risk re-assessments
October 2005 – December 2007**

Assessment	LSO Case File Review					
	Incidents		Investigations		Non-Investigations	
	Number	Percent	Number	Percent	Number	Percent
Safety	121	92.37%	67	98.53%	54	85.71%
Risk	76	58.02%	46	67.65%	30	47.62%
Risk Re-Assess	32	24.43%	25	36.76%	7	11.11%
Applicable Incidents	131		68		63	
Assessment	All Incidents					
	Incidents		Investigations		Non-Investigations	
	Number	Percent	Number	Percent	Number	Percent
Safety	8,520	85.49%	1,827	99.67%	6,693	82.29%
Risk	4,347	43.62%	1,313	71.63%	3,034	37.30%
Risk Re-Assess	1,418	14.23%	524	28.59%	894	10.99%
Applicable Incidents	9,966		1,833		8,133	

Source: LSO analysis of DFS-WYCAPS data. Since our study review period began before the assessment policies were developed, we considered only those incidents opened after October 1, 2005 when policy took effect instructing caseworkers to complete assessments electronically in WYCAPS.

Completed assessments are meant to inform case management decisions.

According to DFS, caseworkers are constantly and informally assessing families while managing cases. Some informality appears reasonable since documenting an assessment after each contact may be burdensome and inefficient. However, CPS policy states that certain decision points during management of an incident require documented safety and risk assessments. This, too, is reasonable: in addition to informing case management, completing these assessments can assist others such as judges, attorneys, and quality assurance reviewers in understanding the bases for caseworker decisions.

Risk is a factor in all incidents, but policy does not require risk assessments in lower tracks.

Policy is confusing about the use of risk assessments in prevention and assessment track incidents

When working an accepted DFS incident, policy directs caseworkers to complete safety assessments on *all* accepted reports (therefore any recorded incident), and to complete risk assessment and reassessments on all incidents with identified risks. Yet policy for the DFS prevention track says that risk assessments are not necessary, even though prevention incidents are opened due to “identified risk factors.” A similar conflict

appears between the safety assessment and prevention track policies. Further, the assessment track policy does not mention the need for risk assessments, although by definition, risks must be present for DFS to open those incidents as well.

Caseworkers make fewer than required in-home visits to children who remain at home

Visits are to be at least monthly, but weekly is recommended.

DFS has enhanced policy since our 1999 LSO evaluation, adding guidance on visits with children who have not been placed out of their homes. “Face-to-Face Contact” policy states that the minimum frequency for such visits with non-placed children is monthly, but “weekly is recommended.” The full policy is somewhat confusing, but it appears DFS expects these visits to occur in the family home if family preservation is the goal; the policy applies to incidents where placement has never occurred.

By policy, all children should be visited in their homes.

If the goal is family reunification, visits can be “in treatment plan meetings or family partnership conferences” as well as in the home. However, this policy does not meet the requirement in its own preamble: “per federal regulations, a caseworker shall visit all child(ren)/youth who have an open case with the Department of Family Services monthly, in the residence of the child.”

We saw regular contact with families, but not necessarily face-to-face visits in children’s homes.

In our review of a sample of investigation incidents, we saw that caseworkers generally attempt regular contact with families; much of that contact is not at families’ homes, but via telephone calls or office visits, as policy seems to allow. However, since many families get involved with DFS for the very reason of conditions in their homes, it is a concern to us that more visits are not done in that locale. Further, based on our review of sample incidents, we saw the visits occur barely at the minimum level of monthly, and certainly not weekly.

Caseworkers are not complying with policy to follow-up on substantiated incidents

Supervisors said follow-up visits do not occur because families prefer it that way: but a majority in our sample had new incidents within 6 months.

Since at least 2004, if not before, DFS has had a policy requiring a follow-up visit in substantiated incidents “within three months of case closure to determine how the children and family are doing and to evaluate the need to reopen the case.” We did not see this occurring in our sample of investigation incidents. This was concerning because for a majority of the families in our sample who had closed, substantiated incidents, DFS opened new incidents within six months.

In replies to our survey, CPS supervisors generally agreed that follow-ups do not happen with families in which substantiated abuse or neglect has occurred. One supervisor noted that caseworkers tell families to contact DFS if they need services, but families are usually relieved to have DFS out of their lives and do not want further contact. Others indicated that staff resources are not adequate to do follow-ups, and that DFS does not contact these families unless a new referral comes in.

Reunification and family preservation provide permanency for children

Federal and state laws share the focus on permanency.

Since enactment of the federal Adoption and Safe Families Act (ASFA) in 1997, the national CPS focus on achieving permanency for children has heightened. Federal laws and corresponding state statutes emphasize family preservation and reunification, in recognition that children should have permanency in their lives, and that foster care does not necessarily provide that. Wyoming statutes also emphasize permanency in children’s lives, whether through adoption or reunification with their own immediate or extended families:

- **1997 creation of the Child Protection Act** When a child is adjudged to be neglected, the court shall ensure that reasonable efforts were made by DFS to prevent or eliminate the need for removal of the child from the home or to make it possible for the child to return to the home. (W.S. 14-3-429 (a)(iv))

- **2005 change to Wyoming Statute** State agency shall ensure that all CPS workers are trained in the principles of family-centered practice that focus on providing services to the entire family to achieve the goals of safety and permanency, including balancing the best interests of children with the rights of parents. (W.S. 14-3-203 (c)(i))

Family partnership conferences are

voluntary. They involve people who know and care about a family coming together to develop a family service plan that protects the family's welfare. They aim to identify strengths, needs, and supports as well as **all** circumstances affecting the family.

*LSO summary of DFS
Family Partnership Policy*

These changes in law were accompanied by DFS making conscious changes in approach to CPS. The July 2002 federal review (CF SR) by the U.S. Department of Health and Human Services emphasized outcomes of the state's child welfare system. This review noted deficiencies in DFS' family-centered practices, finding that DFS had focused the majority of its activities on the target child and had not provided adequate services to the child's family. In response, DFS developed and began implementing a family-centered service model as its overarching strategy. Major components of this strategy were the creation of a family-centered assessment process, the family-partnership conference planning model, and the quality assurance process examined in the following chapter.

Nearly all the services for in-home service incidents go to the parents.

From our review of family files for this study, the implications of this family-centered model are that some caseworkers expend great effort helping parents rehabilitate themselves so they can provide safe homes for their children. Indeed, we found that nearly all of the services provided for in-home service incidents focused upon the parents: substance abuse and mental health evaluations and tests, counseling, parenting classes, and assistance with applying for other benefits are examples.

But caseworkers must continually evaluate children's safety and risk.

Still, at the core of every DFS report is a concern about children's safety and current and future risk of maltreatment. This is why it is so important for caseworkers to continually evaluate safety and risk to children at critical points and document the conclusions they reach. It is especially critical when the DFS decision is to let them remain at home with parents who have been abusive or neglectful, and after placement, when reunifying children with these families.

Recommendation: DFS should balance family-centered practice with ensuring child safety by clarifying policies in key areas, and setting electronic alerts to prompt caseworkers to make visits to children in in-home services incidents.

DFS is consciously shifting its casework focus to encompassing all family members and avoiding placement.

When we evaluated CPS in 1999, agency philosophy centered around “safety first” and resulted in many out-of-home placements of child victims. Although DFS reports that its CPS rate of removal is still higher than the national average, its policy emphasizes the importance of maintaining children in their homes when possible. The agency is consciously shifting its casework focus to encompassing all family members in an incident and avoiding placements of alleged victims. This shift is congruent with best practices and national trends, but DFS has not attended as well as it might to a critical element of this change, providing overall assurances for child safety.

We recommend reviewing policies in key areas to ensure children are safe in their homes.

DFS must balance its family-centered practice approach with taking adequate measures to ensure children’s safety in their homes. As steps in this direction, we recommend that DFS review its visitation policies to clarify that visits, at least monthly, should occur in children’s homes, regardless of whether the service plan goal is family preservation or family reunification. Further, DFS should clarify how the safety and risk assessment policies apply to incidents in the different tracks, and determine a workable policy for follow-ups in substantiated incidents. Based upon the tendency for families to have recurring incidents, disregarding this policy does not seem prudent.

DFS might also adjust WYCAPS to monitor in-home services visits.

Although WYCAPS includes “alerts,” or electronic prompts to remind caseworkers to complete certain tasks, it does not include one for in-home services visits to children. Nor does the system provide a means for supervisors to monitor whether those visits are made, as it does for out-of-home placement visits. It can be risky for children to remain at home in a neglectful or abusive environment, so we recommend that DFS add these components to WYCAPS.

