

**“Each of our children represents either a potential addition to the productive capacity and the enlightened citizenship of the nation, ...”**



“...or, if allowed to suffer from neglect,  
a potential addition to the destructive  
forces of the community.”

—Theodore Roosevelt  
Special Message to Congress, 1909

# INTRODUCTION

The direct and indirect costs resulting from our country’s failure to prevent children’s maltreatment have been estimated at \$104 billion a year.<sup>1</sup> The weight on New York’s economy, taxpayers, and businesses is excessive, and it is a strong reason to place a higher priority on the prevention of abuse and neglect of the state’s future workforce.

The health care costs associated with abuse and neglect place a tremendous burden on the Medicaid system. Children who are maltreated incur annual Medicaid expenses more than \$2,600 higher than children not so identified.<sup>2</sup> They are two times more likely to use psychiatric services and three times more likely to use targeted case management for an estimated 9% of all Medicaid expenses for children.<sup>3</sup>

As abused kids grow up and become adults, the costs to society, employers and taxpayers continue to mount. The human toll of abuse and neglect can be even more devastating as children who have been abused or neglected carry with them the long-term consequences of maltreatment into adulthood. The Adverse Childhood Experiences (ACEs) research indicates that children who have experienced abuse and neglect in childhood are significantly more likely to suffer from chronic illness, disability, a poor quality of life in adulthood, or early death. Further, they are more likely to have lower job performance and employment, and to experience homelessness.<sup>4 5 6</sup>

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“We must change the ‘child welfare system’ into a ‘child well-being system’ that builds hope. America’s goal should be to keep children safe from harm wherever they find themselves—in their families, in their schools and in their neighborhoods. The way to create that safe environment is to build communities where every child can envision and achieve success.”<sup>7</sup>

—William C. Bell, President and CEO  
Casey Family Programs

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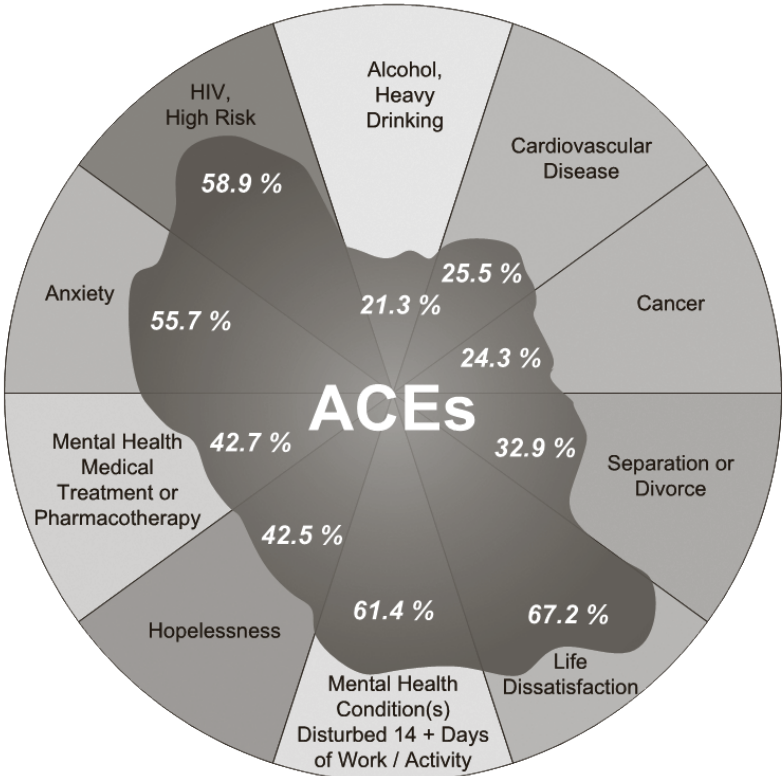
Key New York State Child Welfare Facts	2011	2012
State Central Register (SCR) Reports Accepted	156,258	161,993
Number of Children Named in Reports	216,702	211,290
SCR Reports Assigned to Investigative Track (Percent)	146,997 94%	149,951 93%
SCR Reports Assigned to FAR (Percent)	9,261 5.9%	12,042 7.4%
Indicated Reports	48,493	46,666
Recurrence, Number of Children (Percent)	4,779 12.2%	4,645 12.4%
Admissions into Foster Care	12,845	11,969
Rate of First Admissions	1.8%	1.7%
Exits Out of Foster Care	14,314	13,203
Exits to Permanency (adoption, reunification, guardianship) (Percent)	9,621 67%	8,602 65%
Population in Care, on 12/31	21,463	20,450
Re-entry into Foster Care (Percent)	15%	16%

Source: OCFS Data Warehouse. Accessed at <http://ocfs.ny.gov/main/cfsr/counties.asp>

One study found that adult women who had been physically abused as children experienced 22% higher health care costs than women reporting no abuse in childhood. Other studies have pointed out that chronic diseases, such as those associated with ACEs, can lead to productivity losses that are up to four times higher than the actual medical expenses for those diseases, for a loss of \$40 to \$75 billion in productivity every year. Other costs include the need for social services to respond to reports of abuse and neglect, treatment of acute injuries, and legal and court costs.<sup>8</sup> These expenses are shouldered by employers, taxpayers, and society as a whole.

States can do much to support the safety and healthy development of children. The research on the prevention of child abuse and neglect provides a clear pathway to the prevention of child maltreatment through policies, procedures and practices that nurture children,

strengthen families, and build caring and responsive communities. An increased focus on child well-being can lead to improved outcomes for children and reduced costs to society. This shift in practice recognizes that children need more than food, clothing and shelter to become fully functioning, successful adults and that the child welfare system's focus on risk-reduction is not enough.<sup>9</sup> Attention must also be paid to reducing the trauma experienced and improving cognitive functioning, physical health and development, and social-emotional health.<sup>10</sup>



The gray area across the pie chart represents the portion of risk attributable to Adverse Childhood Experiences or ACEs. Accessed at: [http://aceresponse.org/give\\_your\\_support/Policy\\_Examples\\_14\\_52\\_sb.htm](http://aceresponse.org/give_your_support/Policy_Examples_14_52_sb.htm)

Leadership for this new focus is provided by the U.S. Health and Human Services Children's Bureau through a series of administrative memos, letters to agency directors and use of waivers.<sup>11</sup> Panel members fully embrace this added emphasis and encourage social services districts in New York State to adopt this shift in focus to child well-being using trauma-informed and evidence-informed practices.

# 2013 RECOMMENDATIONS

## ESSENTIAL CHILD WELFARE SERVICES

**Restore open-ended funding for preventive, protective, adoption, aftercare, and independent living services to the full 65% state share as called for in New York State statute.**

Uncapped preventive funding is the core component of the State's strategy to reduce foster care placements, by increasing services to families in their communities and homes, strengthening and supporting their ability to care for their children. Along with a capped Foster Care Block Grant, this funding strategy continues to accomplish its goal. In 2003 the foster care population totaled 37,232; by 2012 this number had dropped to 20,631, a 45% decline over 10 years.<sup>12</sup> During those same years, the number of reports accepted by the Statewide Central Register (SCR) increased 9%, and on December 31, 2012 the number of children receiving preventive/protective services was 54,284. The fund's impact on cost-savings and innovations in child welfare cannot be underestimated. Practice shifted from out-of-home placements to home- and community-based services that engage families. The Child Welfare Financing Law that permitted the incorporation of child welfare services outside of foster care established New York State as an innovation leader among the states.<sup>13</sup>

But local districts have lost ground since the 2007-08 budget, when the state share of funding for these services was cut from 65% to 62%, imposing an increased burden on local taxpayers. As county governments had to pick up a larger share of the cost for preventive services, the result has been a decline in the claims made for this funding as localities struggle with competing priorities within their budgets. The diminished use of these funds comes at the same time that the federal government is calling "for integrated use of trauma-focused screening, functional assessments, and EBP's (evidence-based programs) in child-serving settings."<sup>14</sup> The stresses on counties are enormous as they struggle to manage workloads and increased reports accepted by the SCR. Local

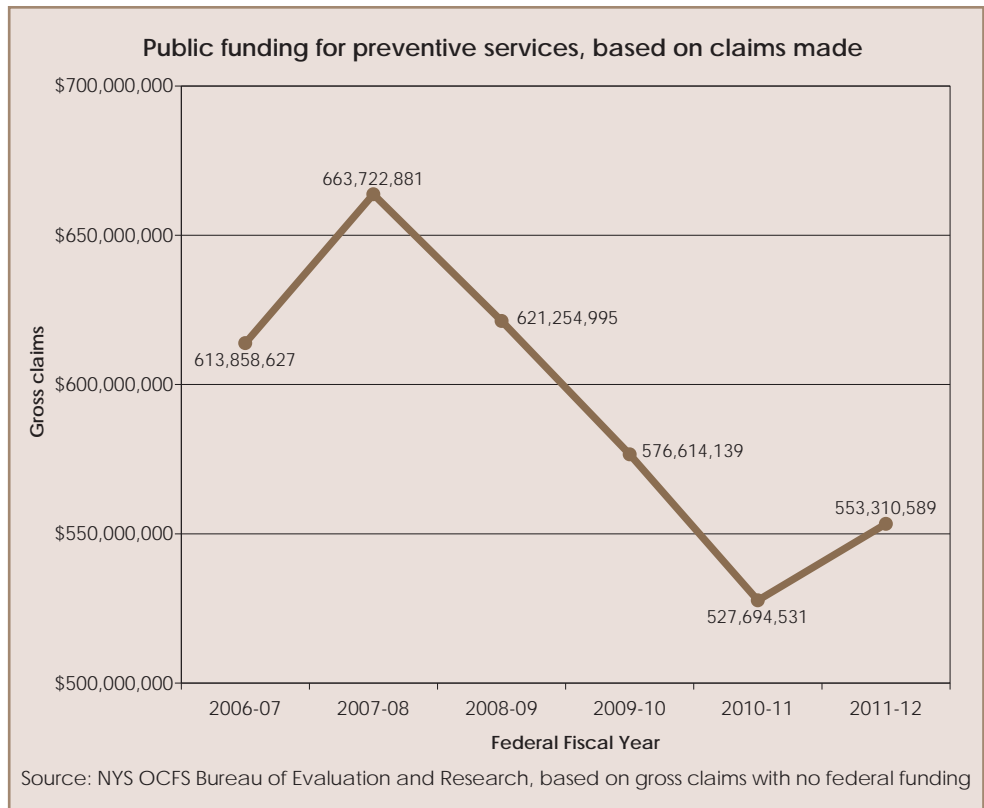


governments are caught between the competing demands of child welfare needs, shrinking assistance from New York State, and a call for local tax relief.

For the most part, private non-profit social service agencies provide the family and community-based services that can help prevent child maltreatment and many strive to implement evidence-based or -informed practices. As it is, too many in need of these services don't have access to them, and the fiscal viability of the agencies that offer them are in jeopardy. These not-for-profit organizations are at a tipping point; they can no longer do more with less. Evidence-based or -informed practices cost more on the front end and pay off in terms of the outcomes they achieve. They require a greater amount of expertise and skill on the part of staff and a strict adherence to a model. Not-for-profits are called upon to use these practices and achieve better outcomes without receiving any new resources.

More services are needed to address the root causes of child maltreatment—social isolation, poverty, substance abuse, maternal depression, domestic violence and

lack of parenting skills.<sup>15</sup> As Wales' story below points out, services are needed not only to deal with an abused child's trauma, but also to help and support families who care for a child scarred by maltreatment, if we wish to prevent re-entry into the child welfare system. With close to one in four of the State's children living in poverty, assistance obtaining concrete supports and benefits can help put families back into the workforce and ameliorate the impacts of poverty on children. A large number of the reports that come into the SCR have to do with neglect that are poverty related. The Family Assessment Response (FAR) is particularly effective for these cases.



The expectations on the child welfare system are enormous, and adequate resources are required if the system is to reach those expectations. Restoring funding to the

65% state share called for in State statute would be a first step toward the Panels' aspiration goal of returning funding for these essential services to a 75% state share.<sup>16</sup>

## Wales' Story

Wales Brown works as a Clinical Case Manager and Parent Educator helping and supporting family members to develop skills to better care for their children. He also served as a foster parent with a reputation for handling some particularly difficult problem behaviors displayed by children due to a lack of parenting or trauma. Several years ago he took on the role he wanted most in life, to be a dad. He did it by adopting one boy under his care. He then adopted three brothers. His sons now range in age from 10 to 18. His oldest son still suffers tremendously from the abuse he endured as a young child and, at one point in his life, the boy had to be hospitalized frequently. These hospitalizations were expensive—\$343,000 for one particularly lengthy stay. However, in the past six years, he has needed only three short hospitalizations. The difference: Wales' determination to keep his son at home rather than to place him in a residential setting as the Office of Mental Health (OMH) encouraged. As a last effort to keep him at home, Wales was offered services provided by an esteemed trauma specialist. It took nine months for his son to improve, though he still struggles. Another of his sons

was determined to have an IQ of 62, but with structure, consistent school attendance, and tutoring, he was recently determined to have an IQ of 98 and no longer in need of special education. His youngest has short-term memory loss and has an Individualized Education Plan or IEP.

Even with his training and skills, Wales has difficulty obtaining the needed services and supports for his family. He feels lucky that he can sometimes travel and pay for experts and services himself. The support and trainings he accesses at a nearby post-adoption resource center have been particularly helpful. But Wales reported that the post-adoption resource center will be closing soon. He also finds respite services from OMH valuable.

As a single parent, Wales finds it a challenge to provide his sons with opportunities in life, but he is determined. Once, when he came to the hospital to pick up his oldest son and take him home after a stay, his son asked him, "Why do you keep coming back for me?" Wales responded, "Because you live with me at home, not in a hospital."

## FAMILY ASSESSMENT RESPONSE (FAR)

Continue to support implementation of FAR throughout New York State, by providing the necessary training, coaching and flexible funding needed to meet individual family needs.

Conduct an evaluation of FAR incorporating a broader representation of counties utilizing an approach that includes a cost/benefit analysis.

FAR is a child protective services (CPS) response which is used for low- or moderate-risk reports accepted by the SCR. FAR caseworkers must do a safety assessment and assess risk on each report. If a serious concern is identified, the case is transferred to the investigative track. By law, many types of reports are excluded from a FAR response. Offering FAR allows county departments of social services to strategically dedicate staff time and investigation resources to reports where court involvement may be necessary to protect children. For reports assigned to this differential response, FAR engages family members to identify needs and solutions and helps them access services.

FAR has grown from the initial six counties offering the response in 2008 to 25 counties in 2013. New York City began implementation of FAR in January 2013 within one zone in the borough of Queens, and has already expanded its practice within Queens. In addition, counties offering FAR have deepened their commitment to the practice by adding staff and categories of reports for which a FAR approach can be assigned. Five counties have withdrawn from using the FAR response due to various district issues such as changes in leadership and staffing issues not related to the practice itself. Over 36,900 CPS reports were assigned to the FAR track from 2009 through May 2013.<sup>17</sup> Nationally, 27 states, territories or localities implement a differential response (FAR) and another 12 are planning for implementation.<sup>18 19</sup>

The New York State Office of Children and Family Services (OCFS) recently completed a two-year evaluation conducted in two pilot counties in the state. The evaluation demonstrated that families assigned to FAR are less likely to have a petition filed in Family Court and that FAR can reduce placements into foster care. Importantly, children were found to be just as safe with the FAR approach as with the investigative approach.<sup>20</sup>



### FAR in Orange County: Commissioner David Jolly, in his Own Words.

Orange County became an early adopter of FAR because we saw a need to come up with something different to meet the needs of our families. FAR gave us an opportunity to take a more strength-based, family-focused approach to reflect what we wanted to be as a social services agency. At the time, 68% to 70% of the reports we investigated were unfounded. We commonly track educational neglect and cases involving adolescents to FAR. It's important to take into consideration any history of reports, history of the family, and type of case in making a decision as to whether or not to assign a case to FAR. All cases begin the same way with a safety assessment no matter the track; our first obligation is to keep children safe.

We are seeing positive outcomes. Families are more willing to engage with us and accept services in the household. They are also much more willing to improve their parenting. Our staff is 100% on board with FAR. It has changed our practice and our perspective and is having a ripple effect throughout the agency. Our staff are inspired to offer a more family-focused approach no matter the track.

We still struggle with a couple of issues. We know our caseworkers in the investigative track experience stress. This is a challenge for our supervisors. The caseworkers in the investigative track have very difficult cases which lead to indicated reports. We also need more flexible funding. This is a top priority for our department. Preventive funding is critical to our success.

Going forward, we plan to deepen our skills by doing more advanced training and hope to build a bigger FAR unit. We will continue to develop a community understanding of FAR as an alternative in hopes of eliminating the stigma associated with CPS involvement. We are happy to have a much more appropriate response for families with emergency needs.



Panel members urge OCFS to continue its long-standing support for FAR and to encourage and allow more counties to offer the response as an integral tool in their child welfare practice. Further, the panels encourage OCFS to conduct a broader evaluation of FAR in New York State that incorporates additional counties beyond those in the original pilot and allows for a cost-benefit analysis to include improved outcomes for children and families, children’s safety, use of services and cost-savings.

## RACIAL EQUITY

**Continue to address and seek to eliminate racial and ethnic disproportionality and disparities by expanding OCFS’s work to additional counties through the use of data-informed and data-driven strategies.**

**Recruit more racially and ethnically diverse and bi-lingual staff to child welfare.**

**Require continuous staff development and education advancing cultural competence and responsiveness in child welfare.**

Panel members reiterate their recommendations to achieve racial equity in child welfare policies, procedures and practices, as noted in the Panels’ 2012 Annual Report. It is well known that children of color are over-represented in the child welfare system in New York State and across the country. Black, Latino, and Native American children enter the system in greater numbers relative to their proportions of the general population and are more likely to have an indicated case, enter foster care, and remain in foster care longer. The disparity for Black children is particularly pronounced.

In 2009, OCFS initiated a pilot project in six counties to address high rates of disproportionality and disparities that is now operating in twelve select counties. Strategies used by the pilot counties vary but usually include training in cultural competence, using data to identify where disparities exist, implementing FAR in low-income communities, and locating services to increase access in communities of need. In 2013, OCFS focused this pilot work on three counties that offer a FAR track. The work is complex and difficult and is critically important if the system is to achieve fair outcomes. It has yet to achieve its goal of reductions in disparities. While this work has included outreach to numerous community partners including the courts, panel members encourage outreach to various mandated reporters including law enforcement, health care professionals including hospital staff, and school district personnel.

Panel members encourage a deeper examination of the system as a whole as well as within individual districts of social services using the following questions as a guide:

- Does poverty play a role in disproportionate minority representation?
- Are there differences in the types of reports and allegations from mandated sources for minority and non-minority groups?

Disparity Index <sup>21</sup>	SCR Reports			Indicated Reports			In Foster Care		
	2010	2011	2012	2010	2011	2012	2010	2011	2012
Black	2.10	2.10	2.08	2.60	2.70	2.72	6.90	6.20	5.06
Hispanic	1.40	1.30	1.27	1.70	1.70	1.73	2.40	1.90	2.09
Native American	NA	1.20	1.22	NA	1.50	1.40	NA	2.80	2.09

Source: NYS OCFS Bureau of Research, Evaluation and Performance Analysis



- Are there differences between reporting sources (mandated vs. non-mandated) for minorities and others?
- Are appropriate and adequate services located in communities of color and accessible to the populations most in need?
- How are cultural differences addressed in staff development and training? How are these differences understood and used in training staff in family engagement strategies?
- Are districts collaborating with representatives of immigrant communities to build understanding and competence?
- Are there differences in disparity rates in counties offering FAR?
- To what extent does potential liability factor into placement decisions?
- Are risk assessments conducted adequately? Do families with similar risk assessment profiles receive similar services?

## ADDITIONAL RECOMMENDATIONS

In addition to the previous recommendations, the New York State Citizen Review Panels offer their continued support for the following recommendations and urge their adoption:

### HOME VISITING PROGRAMS

**Restore funding for Healthy Families NY to \$26.8 million, an increase of \$3.5 million.**

**Provide \$5 million in funding to sustain The Nurse-Family Partnership (NFP program), an increase of \$3 million.**

Home visiting programs are evidence-based primary prevention programs aimed at new mothers and fathers at a time when they are most receptive to services. Programs improve health outcomes for babies, improve parenting skills, reduce the incidence of abuse or neglect, and increase school readiness and parental employment. These programs have suffered from lack of funding to meet the demand for services. These programs achieve cost savings through reductions in low birth-weight babies and



associated medical expenses, reducing recurrence in abuse and neglect reports, and increased school performance and less need for special education.

Funding for Healthy Families NY has been effectively reduced by 15% since SFY 2007-08.<sup>22</sup> Healthy Families NY providers reported a cut back in services offered, inability to provide families needed supplies to care for and keep babies safe, and higher caseloads and reduced wages leading to staff turnover. The Nurse-Family Partnership program is now in four counties and the five boroughs of New York City. Once funded at \$5 million, the SFY 2013-14 Budget funds NFP at \$2 million.

### EDUCATIONAL NEGLECT

**Eliminate educational neglect as a basis for child protective reports for children 13 and older.**

**Identify effective practices to reduce absenteeism, educate school district personnel about these practices and support the implementation of promising models in school districts throughout the state.**

**Address chronic absenteeism in primary and elementary schools where research shows the most promising results.**

Since 2010, panel members have urged a change in statute for situations involving teens who choose not to attend school but whose parents are reported to the SCR for educational neglect only. A CPS response is simply not effective in such circumstances and represents an inappropriate use of child protective resources. In 2012, 23,111 reports containing an allegation of educational neglect were investigated and were determined as either



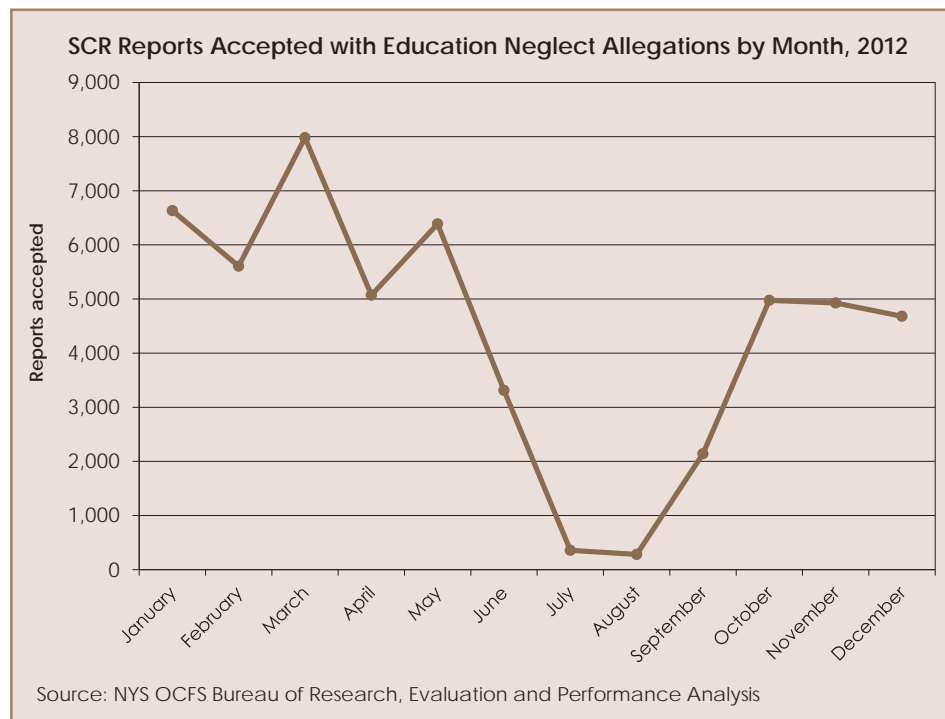
indicated or unfounded. Of these, 9,716 (42%) involved only an educational neglect allegation, and 64% of these reports were unfounded. Of the reports with additional allegations of abuse or neglect, 53% were unfounded.<sup>23</sup> Fifty-five percent of the reports involved teens 13 to 17 years of age, 61.7% of which were unfounded. Many of the educational neglect reports are tracked to FAR and have no determination.

School district and child welfare personnel, including the State Department of Education and OCFS, should work in collaboration to identify promising practices and to support their implementation. Operation Start Strong, Ready Freddy, Read to Succeed, Get Schools, and Say Yes to Education are initiatives currently in use in New York State to increase school attendance and improve education outcomes.

Panel members also call on school districts to address chronic absenteeism in the primary and elementary grades before children fall behind in school.<sup>24</sup> Schools with average daily attendance rates between 94% and 97% should analyze their data to identify any potential problem with chronic absenteeism; those below 94% should immediately address chronic absenteeism to improve student performance.<sup>25</sup> This is particularly true for students in the early grades where attendance in school is linked to success in reading. California found that only 17% of those chronically absent in Kindergarten or 1st grade were proficient in reading by 3rd grade compared with 64% of those who attended school regularly.<sup>26</sup> Nearly 17% of New York's SCR reports that included an educational neglect allegation involved children between the ages five to seven, 43% of which were unfounded.

In addition, poor attendance in 6th grade is one of the indicators, along with misbehavior and course failure, that can predict 60% of the students who will not graduate from high school.<sup>27</sup> Twenty-eight percent of New York's reports with an educational neglect allegation involved children ages 8 to 12; 58% of them were unfounded.<sup>28</sup>

Addressing attendance and truancy will support and enhance the Governor's education investments and goal of increased graduation rates.



# KINSHIP CAREGIVER SERVICES AND KINSHIP GUARDIANSHIP ASSISTANCE PROGRAM

Restore funding for Kinship Caregiver Services and the Kinship Navigator Program to \$3 million.

Fund Kinship Guardianship Assistance Program (KinGAP) as an uncapped permanency option with no reduction to the Foster Care Block Grant.

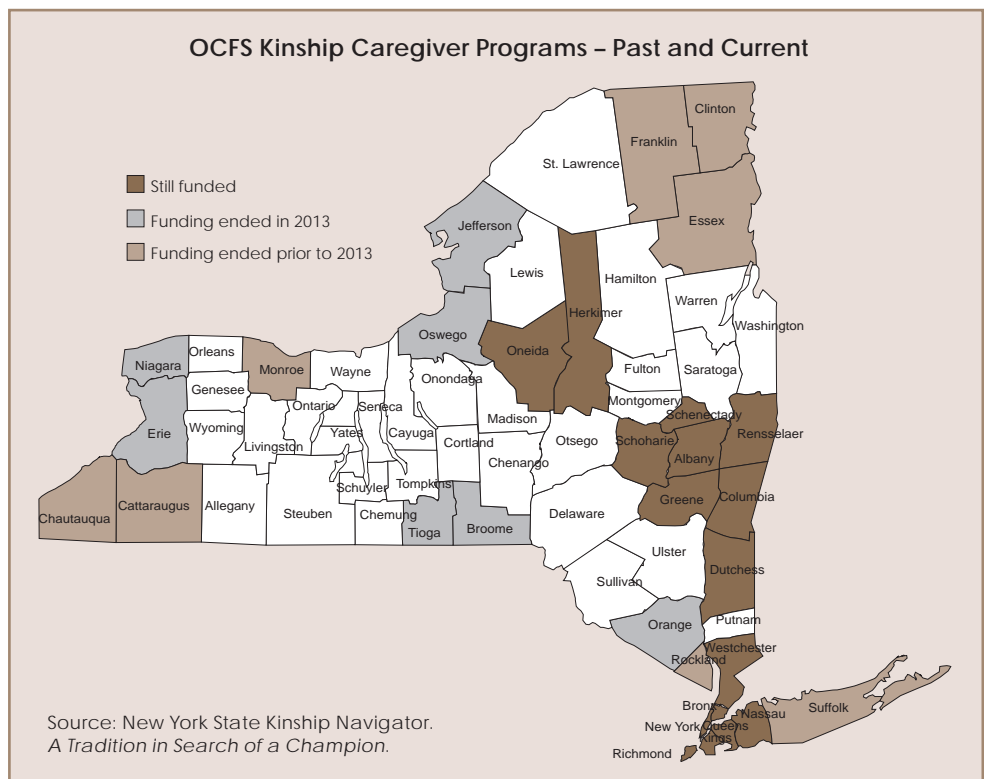
Two programs administered by OCFS are available to kin taking care of children when parents can no longer do so: Kinship Caregiver Programs and Kinship Guardianship Assistance Program (KinGAP). Kinship Caregiver Programs are available to family members taking care of children outside the child welfare system. Programs commonly provide peer support, assistance with services, activities and other resources. Approximately 153,000 children are in kinship care, with 54,305 of the caregivers age 60 or older, 21.7% of whom have incomes below the poverty level. The costs for these services average \$466 per year per child. There were once 21 multi-county programs; now eight programs remain covering 11 counties.<sup>29</sup> In addition, federal funding is supporting a national demonstration project involving five departments of social services in New York and the Kinship Navigator which supports kin via an information and referral network statewide. The work includes conducting a comprehensive evaluation. The purpose of the work is to use a collaborative approach to improve outcomes related to safety, permanency and well-being.

KinGAP is available to relatives caring for kin in approved or certified foster care homes, when adoption and reunification have been ruled out. Relative foster care providers can apply for the program and, once approved, leave the child welfare system



and receive much needed financial support. Between January 1, 2013 and December 12, 2013, 242 children left foster care and entered into approved KinGAP arrangements. A total of 339 children entered KinGAP arrangements since the start of KinGAP in April, 2011.<sup>30</sup>

Panel members urge appropriate funding for these programs and ask that OCFS ensure that local departments of social services fully inform family members of their placement options as required by the Fostering Connections and Increasing Adoptions Act.



# 2013 PANEL ACTIVITIES



## Eastern Panel

### MEETING, FEBRUARY 5, 2013

Gail Haulenbeek, OCFS Bureau Director, Bureau of Practice Improvement, Division of Child Welfare & Community Services, began the meeting by providing an overview of the OCFS Supervisor Training project, now in its third and final year. Frank Woods, Coordinator for the Office of Court Administration Division of Professional and Court Services, Child Welfare Court Improvement Project and Betsy Stevens, Associate Counsel Legislation & Special Projects Division of Legal Affairs with OCFS, provided a statewide overview of the Court Improvement Project. Honorable Judge Gerard Maney, Albany County Family Court, and Commissioner Colette Poulin, Albany County Department for Children, Youth & Families, provided an overview of Albany County's work within the Court Improvement Project.

### MEETING, MAY 31, 2013

Charles Carson, OCFS Assistant Deputy Counsel, provided an overview of the "some credible evidence" and "a preponderance of evidence" standards in New York's child welfare laws and the challenges they present. OCFS Bureau Director Gail Haulenbeek, Children & Family Services Specialist 1 Michelle Heyward-Cooper, and Research Scientist Joanne Ruppel provided an update on FAR practice in New York State and an overview of the 2-year evaluation of FAR. Bridget Walsh, Schuyler Center for Analysis and Advocacy Senior Policy Associate, provided an update on home visiting in New York State and led a discussion as to how to build a system across the state that would offer access to all who need these programs. Panel members reviewed the 2013-14 Budget and legislation under consideration during the current session. They also discussed the need for additional panel members.

### MEETING, SEPTEMBER 20, 2013

Emily Bray, OCFS Associate Attorney in the Legal Division, provided an overview of the Justice Center which began implementation on June 30<sup>th</sup>. Sophine Charles, Preventive Services Associate for Policy and Practice for the Council on Family and Child Caring Agencies, discussed her work supporting over 200 foster care agencies in the state with implementation of evidence-based practices. Northern Rivers Family Services staff including Chief Officer of Programs and Services Audrey LaFrenier, Clinical Case Manager and Parent Educator Wales Brown, Director of Consultation and Research Dr. Richard

Kagan, and Director of Training Joanne Trinkle provided an overview of their preventive services, challenges in sustaining them, and trauma-informed practices at Northern Rivers. Panel members proposed recommendations to present at the October Joint Panel meeting.

### MEETING, DECEMBER 13, 2013

OCFS Deputy Commissioner, Office of Strategic Planning and Policy Development Jeanne Milstein, and OCFS Director Rebecca Colman and Assistant Director Joanne Ruppel from the Bureau of Research, Evaluation, and Performance Analytics, discussed the state agency's current and future plans for research, plans for addressing child well-being within the context of child welfare, and implementation of standardized assessment tools. Edward Blatt, Smarter Social Programs Market Segment Manager, IBM Software Group, Enterprise Content Management, discussed the use of predictive analytics in child welfare. Panel members discussed the need for child welfare data and topics for their 2014 meetings.

## Western Panel

### MEETING, MARCH 1, 2013

Amy Fleischauer, Director of Victim Services, International Institute of Buffalo, met with panel members to discuss her work with victims of human trafficking which includes children involved in the sex trade and those living in households with domestic violence. The International Institute works with victims, provides needed services, and trains human services professionals about identifying potential victims and supporting them. Panel members received information about Prevent Child Abuse New York's planning for a statewide Enough Abuse Campaign. Panel members reviewed the Executive Budget and discussed their visit to Niagara County Department of Social Services.

### MEETING, MAY 10, 2013

Panel members met with Melissa Desiderio, Supervisor of the Catholic Charities of Buffalo's Refugee Preventive Services Program, Ali Kadhum, President of Buffalo Immigrant and Refugee Empowerment Coalition (BIREC), and representatives of the Monroe County Department of Social Services including Lisa Deutsch, Child Protective Investigation Supervisor, Evelyn Bianchi, Residential Services Unit Supervisor, Lena Pride-Stepherson, Unaccompanied Refugee Minor (URM) Senior Caseworker, and Jen Berenson, CFS Supervisor

of the URM Program. The meeting was devoted to a discussion of immigrant populations and the intersection with child welfare. Panel members reviewed child welfare legislation under consideration during the current session and discussed the need for and identified potential panel members. Members then went into Executive Session.

#### **MEETING, SEPTEMBER 13, 2013**

The Honorable Sharon S. Townsend, Supreme Court, 8th Judicial District, and the Honorable Joan Kohout, Monroe County Family Court, joined panel members for a discussion about the intersection of child welfare and the courts, the Court Improvement Project, and trends and challenges moving forward. Gerard Wallace, NYS Kinship Navigator program and Caterina Plotnicki, Program Operations and Coordinator for Catholic Charities of Buffalo, discussed the fate of kinship caregiver services in the state and challenges maintaining levels of service to families. Panel members proposed recommendations to present at the October Joint Panel meeting. Panel members also convened by phone on October 30<sup>th</sup>.

#### **MEETING, DECEMBER 6, 2013**

Panel members met in executive session for a large portion of their meeting. In addition, panel members discussed the need for child welfare data and topics for their 2014 meetings.

### **New York City Panel**

#### **MEETING, JANUARY 15, 2013**

New York City's Administration for Children's Services (ACS) Commissioner Ronald E. Richter, Executive Deputy Commissioner for the Division of Child Protective Services, Gilbert Taylor, Queens Borough Commissioner Marsha Kellam, Assistant Commissioner for System Development and Program Operations Bryan Kemp, and Associate Commissioner of Child Protection Eden Hauslaib met with panel members to provide an update on various projects and activities of the agency and to provide an overview of the implementation of Family Assessment Response pilot in a specified area of Queens. Details and updates were provided for Teen Preventive Services Initiative, Child Success, Close to Home, Early Learn NYC, and ACS Hurricane Sandy response.

#### **MEETING, APRIL 9, 2013**

Marika Turano, Director/Producer of the documentary, *The Word is Love*, presented a short clip of her movie which brings public awareness of children with incarcerated parents. Tanya Krupat, Program Director for the New York Initiative for Children of Incarcerated Parents with the Osborne Association, Tenisha Cummings, Attorney with the Family Defense Practice at The Bronx Defenders and Dinah Ortiz-Adames, Parent Advocate with The Bronx Defenders discussed the various challenges children and family members face when a parent is incarcerated, and particularly when a child is involved in the child welfare system as a result.

#### **MEETING, MAY 14, 2013**

Panel members met to review the discussion about children of incarcerated parents from their April meeting and plan for the June Joint Panel meeting with the Eastern and Western panels. They reviewed their past meetings and determined which items could be included in the 2013 Report and Recommendations. Panel members reviewed child welfare legislation introduced to date during the current session.

#### **MEETING, SEPTEMBER 10, 2013**

ACS Commissioner Ronald E. Richter, Executive Deputy Commissioner Gilbert Taylor, Assistant Commissioner Marsha Kellam, Deputy Commissioner Benita Miller, Director Tinaddine Turner, Deputy Commissioner Jacqueline McKnight and Director Kathleen Hoskins met with panel members to provide updates on the implementation of FAR in Queens and KinGAP. They also provided information regarding various ACS initiatives including a new Office of Education Support and Policy Planning. Panel members proposed recommendations to present at the October Joint Panel meeting.

#### **MEETING, NOVEMBER 19, 2013**

Dr. Jane Waldfogel, Compton Foundation Centennial Professor of Social Work for the Prevention of Children's and Youth Problems at Columbia University, met with panel members to discuss the needs of children and families within the child welfare system, the importance of FAR, and child welfare research findings from across the country. Panel members discussed the need for child welfare data and plans to reach out to the new administration in New York City.

### **Joint Panel Meetings**

#### **MEETING, JUNE 21, 2013**

The three New York State panels met with Commissioner Gladys Carrión who provided an update on various OCFS initiatives. Each panel provided an overview of their work and discussed their 2013 annual report.

#### **MEETING, OCTOBER 4, 2013**

Members of the three New York State Citizen Review Panels met to discuss their 2013 Annual Report and Recommendations. Diane Mastin, Senior Policy Associate with the Schuyler Center for Analysis and Advocacy, provided context for this year's recommendations. Panel members discussed and made decisions regarding the recommendations to include in the 2013 report and planned for 2014 meetings.

## Endnotes

- <sup>1</sup> Gelles, R. J. & Perlman, S. (2012). Estimated Annual Cost of Child Abuse and Neglect. Chicago IL: *Prevent Child Abuse America*. Accessed at [http://www.preventchildabuse.org/images/research/pcaa\\_cost\\_report\\_2012\\_gelles\\_perlman.pdf](http://www.preventchildabuse.org/images/research/pcaa_cost_report_2012_gelles_perlman.pdf).
- <sup>2</sup> Florence, C., Brown, D. S., Fang, X. and Thompson, H. F. (2013). Health Care Costs Associated With Child Maltreatment: Impact on Medicaid. *Pediatrics*; 132.1-7. Accessed at <http://pediatrics.aappublications.org/content/early/2013/06/26/peds.2012-2212>. Based on a survey of children who were subjects of a child maltreatment investigation regardless of whether or not they were substantiated. Those enrolled in Medicaid were matched to their claims and compared with the NSCAW 1999 and 2000.
- <sup>3</sup> Florence, C., Brown, D. S., Fang, X. and Thompson, H. F. (2013).
- <sup>4</sup> U.S. Department of Health and Human Services. July 11, 2013 State Director Letter.
- <sup>5</sup> Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., Koss, M. P., and Marks, J. S. (1998). Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults. *American Journal of Preventive Medicine*. 14 (4).
- <sup>6</sup> Larkin, H. and Johnson, M. (2010). Adverse childhood experiences (ACE) and breaking the cycle of homelessness. *National Health Care for the Homeless Conference and Policy Symposium*. San Francisco, CA.
- <sup>7</sup> Bell, W. C. (2013). Moving toward Hope, Paths to Keep Children Safe, Make Families Strong and Build Supportive Communities. *Casey Family Programs*.
- <sup>8</sup> Corso, P. S. (2010). Dollars and Lives: The Economics of Healthy Children. *Prevent Child Abuse America*.
- <sup>9</sup> Raising the Bar: Child Welfare's Shift Toward Well-Being (2013). *Center for the Study of Social Policy*.
- <sup>10</sup> U.S. Department of Health and Human Services (2013).
- <sup>11</sup> The New York City Administration for Children and Families was recently named as a recipient of a Title IV-E waiver for a demonstration project to reduce length of stay in foster care and improve outcomes.
- <sup>12</sup> New York State Office of Children and Family Services (2013). *Response to the 2012 Report and Recommendations of NYS Citizen Review Panels for Child Protective Services*.
- <sup>13</sup> Gettman, W. (2010). Preventive Testimony provided when Exec. Deputy Commissioner of the NYS Office of Children and Family Services.
- <sup>14</sup> U.S. Department of Health and Human Services (2013).
- <sup>15</sup> *New York State Citizen Review Panels for Child Protective Services 2009 Annual Report and Recommendations*.
- <sup>16</sup> *New York State Citizen Review Panels for Child Protective Services 2012 Annual Report and Recommendations*.
- <sup>17</sup> Ruppel, J. (2013). Presentation to the NYS Eastern Citizen Review Panel. New York State Office of Children and Family Services.
- <sup>18</sup> Allan, H., and Howard, M. (2013). Disparities in Child Welfare: Considering the Implementation of Differential Response. *National Quality Improvement Center*.
- <sup>19</sup> This is consistent with the federal government's encouragement for states to implement a differential response by requiring states in their CAPTA State Plan Assurances to address triage procedures, including the use of differential response, for the appropriate referral of a child not at risk of imminent harm to a community organization or voluntary preventive service (section 106(b)(2)(B)(v) of CAPTA).
- <sup>20</sup> New York State Office of Children and Family Services (2013). *FAR Evaluation Impact Study: Two-Year Follow-Up*. Accessed at <http://www.ocfs.state.ny.us/main/reports/FAR%20Research%20Brief%20-%202%20yr%20followup%20FINAL%205-8-13.pdf>.
- <sup>21</sup> Disparity index is the ratio of the rate of the number of children for those in foster care, for example, per 1,000 children in a given population compared to the rate for White children.
- <sup>22</sup> Schuyler Center for Analysis and Advocacy and Prevent Child Abuse New York (2013). *Helping Vulnerable Families Gets Harder for Healthy Families NY*.
- <sup>23</sup> OCFS Bureau of Research, Evaluation and Performance Analysis. Data received March 25, 2013.
- <sup>24</sup> Chronic absenteeism is defined as missing more than 10% of the number of days in the school year no matter the reason. Truancy is typically refers to unexcused absences and is associated with students willfully missing school without the permission of an adult.
- <sup>25</sup> Bruner, C., Discher, A., and Chang, H. (2011). Chronic Elementary Absenteeism: A Problem Hidden in Plain Sight. *Attendance Works and Child & Family Policy Center*.
- <sup>26</sup> Bruner, C., Discher, A., and Chang, H. (2011).
- <sup>27</sup> Balfanz, R., Herzog, L., and MacIver, D. J. (2007). Preventing Student Disengagement and Keeping Students on the Graduation Path in Urban Middle-Grades Schools: Early Identification and Effective Interventions. *Educational Psychologist* 42 (4), 223-235.
- <sup>28</sup> OCFS Bureau of Research, Evaluation and Performance Analysis. Data received March 25, 2013.
- <sup>29</sup> New York State Kinship Navigator (2013). *A Tradition in Search of a Champion*.
- <sup>30</sup> New York State Office of Children and Family Services (2013). *Response to the 2012 Report and Recommendations of NYS Citizen Review Panels for Child Protective Services*.

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**FEDERAL LAW AND THE CITIZEN REVIEW PANELS**

The 1996 amendments to the federal Child Abuse Prevention and Treatment Act (CAPTA) mandate that states receiving federal funding under that legislation create volunteer Citizen Review Panels. The purpose of these panels is to assess whether state and local agencies are effectively carrying out their child protection responsibilities. The federal statute broadly defines the work of the Citizen Review Panels.

The panels must meet not less than once every three months and produce an annual public report containing a summary of their activities and recommendations to improve the child protection system at the state and local levels. They must evaluate the extent to which the state is fulfilling its child protective responsibilities under its CAPTA State Plan by:

1. Examining the policies, procedures, and practices of state and local agencies.
2. Reviewing specific cases, when warranted.
3. Reviewing other matters the panel may consider important to child protection, consistent with Section 106(c) (A) (iii) of CAPTA.

Following the order of federal CAPTA Amendments of 1996, the New York State Legislature passed Chapter 136 of the Laws of 1999, establishing no less than three Citizen Review Panels, with at least one in New York City. The other panels are in Eastern and Western New York.

Each panel has up to thirteen members; the Governor appoints seven, with the Senate President and Assembly Speaker appointing three each.

For further information please visit the panels' website at [www.citizenreviewpanelsny.org](http://www.citizenreviewpanelsny.org) or contact:

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