



**Child Abuse Prevention and Treatment Act
Report of the Child Abuse and Neglect Advisory Committee
Citizen Review Panel
May 2022**

Background

The Child Abuse Prevention and Treatment Act (CAPTA) mandates the establishment of citizen review panels (CRP) to examine child protective services policies and procedures. When applicable, CRPs may also review specific child protective services cases in order to evaluate key concerns such as the Child Protective Services (CPS) programs' compliance with the State Plan, coordination with Title IV-E foster care and adoption programs, and child fatalities and near fatalities, as well as other concerns the panel considers important to the CPS program.

The Commonwealth of Virginia has three citizen review panels: The Child Abuse and Neglect Advisory Committee of the Family and Children's Trust Fund (CAN/FACT); the State Child Fatality Review Team (CFRT); and the Children's Justice Act/Court Appointed Special Advocate Committee (CJA/CASA).

The Family and Children's Trust Fund (FACT) Board was established by the Virginia General Assembly in 1986 through enactment of § 63.2-2102 of the Code of Virginia. Created as a public-private partnership with the capacity to raise funds in the community for family-serving programs, the FACT Board has the stated mission of providing for the support and development of services for the prevention and treatment of family violence in Virginia. The vision of the Board is to reduce family violence through support of community-based initiatives, public awareness, and collaboration. FACT defines family violence to include child abuse and neglect, domestic violence, dating violence, sexual assault, and elder

abuse and neglect. Through its trust fund, supported by donations from a variety of sources, the FACT Board is able to provide grants to financially support programs that serve Virginia families throughout the Commonwealth.

The FACT Board is governed by a 15-member Board of Trustees appointed by the Governor. The Board meets quarterly and members serve a maximum of 2 four-year terms. The Commissioner of the Virginia Department of Social Services (VDSS) serves as a permanent member. In 2012, the Governor's Advisory Board on Child Abuse and Neglect (GAB) was absorbed into the FACT Board, with the citizen review panel functions of the GAB being assumed by the Child Abuse and Neglect (CAN) Committee established by the FACT Board at that time. The CAN Committee meets quarterly.

The CAN Committee appreciates the response sent by Shannon Hartung, VDSS Child Protective Services Program Manager, on November 18, 2021. VDSS addressed each of the five areas of concern the CAN Committee submitted and the FACT Board adopted in March of 2021. We know that the issues discussed are complex and dynamic, and therefore warrant comprehensive and ongoing efforts over several years. Therefore, the CAN Committee will continue to monitor some of these concerns noted in 2021 and will introduce new areas of focus. Additional context for each area is provided below.

Introduction

CAN Committee members appreciate this opportunity to engage once again with VDSS on a broad range of issues impacting children and their families. We appreciate and honor the challenges of your work on behalf of children. Going forward, we want to work with VDSS in three other ways, all ultimately for the purpose of improving child welfare policies and practices in Virginia. We think of these as cross-cutting threads that influence all concerns outlined in this report. First, we ask that you continue providing the Committee with data already collected, such as in the area of staffing, hotline response, and trafficking cases. Second, we ask you to provide a deeper dive with data that looks at outcomes, impacts, and implications of policy and practice for child safety and well-being. We are

particularly interested in outcome data with regards to Family First implementation and helping to identify what those measures should be. And third, we ask that you assist CAN in finding ways to learn about what's happening in local communities and departments in each of these areas. What can we learn from those who work directly with children and families?

1. Recruitment, compensation, and retention of child welfare professionals and the child abuse and neglect hotline staff.

A ready and responsive child protection system needs case workers who are trained for the work, receive salary and benefits appropriate to the education and skills required to undertake this difficult and stressful work, and a strong sense that their efforts on behalf of the children and families they work with is understood and valued by their community.¹ This is true of Virginia's child protection system as well. Unfortunately, many local social service agencies are short staffed, endure high turnover among child protection employees, and cannot fully respond to the child safety needs in their communities. Child welfare workers are often underpaid given their skills and the significance of their work to their citizens. CAN committee members discussed how the trauma of the CPS investigation process during COVID19, as well as pressure on women² with children at home with no childcare and closed schools, may have also changed the dynamics of work and family life for now.

At the same time, the state hotline for reporting suspicion of child abuse and neglect continues to struggle with staffing and therefore optimal responsiveness when children may be in danger. Wait times average between 15 to 45 minutes. We know that long wait times lead to callers often becoming discouraged and hanging up without making their reports. While we appreciate that the web-based portal for reports from Mandated Reporters continues to grow and expand as a source for reporting, we believe a hotline

¹ See [this report](#) from the Casey Family Programs for additional information.

² One [national source](#) puts the percentage of child welfare case workers who are women at 76.9%.

working at full capacity and fully responsive is fundamental to a strong child protection system. The very essence of a 24-7 hotline is the promise to “be there” in cases of emergency.

We know that Virginia is reporting surplus funds available in its budget for the current year (\$2.6 billion), as well as in each of the next two budget years (\$3.5 billion), and urge VDSS to educate and advocate for a portion of these resources to build staffing and retention capacity in local departments of social services and in the state hotline program.

We recommend that the VDSS work with the Virginia General Assembly, Secretary Littel, and Governor Youngkin, and local communities to invest in recruitment, compensation, and retention of child protection workers in Virginia communities and in the state hotline office.

We recommend that VDSS provide the CAN Committee members with additional data and information on these two staffing concerns in the coming year. How are staff shortages being addressed at the state and local levels? How do these shortages affect the workers and the families they serve? How are communities meeting the needs of at-risk children and their families given these shortages? With regard to the hotline, CAN Committee members request more data to understand the character and scope of cases that are missed because of these staff shortages. The Committee would also like to learn more about the recruitment, training and support for hotline staff.

2. In-Home Services and Family First implementation.

Family First is a relatively new federal law that prioritizes keeping children who are adjudicated as at risk for abuse and/or neglect with family, kin, and community, with foster care as a placement of last resort. Federal funding is available to support these in-home services. Over the past few years, VDSS has continued to implement federally mandated Family First legislation through the development of policy, guidance, and training, as well as in discussions with local departments. Members of the CAN committee have learned about and discussed this implementation with members of the Department

a great deal over the past year. Your leadership and momentum in moving this forward in Virginia is both substantive and appreciated.

Family First is a paradigm-shifting change in child welfare policy and practice, offering the hope that abused and neglected children can remain safely with family and kin with support from local child protection systems. The updated VDSS In-Home Services model, designed as part of the implementation of Family First, promises a myriad of services to children and their caretakers – through training and guidance for child protection workers, updated screening and case management tools, and use of evidence-based prevention services to prevent foster care placements.

CAN committee members recognize the importance of keeping children with their families and in their communities. However, we have continued concerns about children’s safety and well-being and the possible unanticipated consequences of this new policy and practice. How do we know that this new model for response to abuse and neglect will keep children safe? What types of safeguards will caseworkers and agencies use to assure that this model works, particularly for children in imminent danger? How will Virginia’s Family First effort impact the practice of diversion?

We recommend that VDSS continue to review Family First policy and practice as implementation moves forward, particularly with an eye to outcome data about how this shift impacts child safety and well-being, as well as information on how this policy and law is operationalized in local departments. We fully expect that the number of children in foster care will steadily go down as Family First continues to be implemented. How do Family First practices and responses fix the problems they are designed to address? What are local departments doing in these cases? Which impact measures are used to evaluate the efficacy of Family First in Virginia, and how can these data be provided to the CAN committee members so that they can offer additional guidance on child welfare policy and practice in Virginia?

3. Regional child death review teams.

There are five regional child fatality review teams in Virginia which are organized by VDSS Program Specialists. The teams may review cases where the decedent child or family was known to a local department and when the death was investigated for suspicion of abuse and neglect. The teams collect case level data and generate recommendations based on trends that they see in these cases; this information is collated in an annual statewide report by the Department.

CAN Committee members recognize the significance of these teams in providing data and insight into suspected child abuse and neglect in Virginia communities and we look forward to establishing a regular feedback loop and dialogue with these teams.

We recommend that VDSS make a presentation annually to the CAN Committee, once its annual report of findings and recommendations from Virginia's regional fatality review teams is completed. The presentation would provide key data findings and recommendations, feature a group discussion of policy and practice implications of this information, and provide routine updates on which recommendations have been implemented.

4. Problematic sexual behavior between children.

We know that local departments of social services have some involvement in these cases, typically limited to when both the alleged abuser and the alleged victim are children and the abuser was in a caretaking role with the victim. Given the CAN Committee's larger interest and project on problematic sexual behavior between children, we want to continue to get updates on those cases that are reported to and/or investigated by child protection in localities.

Through a partnership between FACT and the Virginia Department of Health, CAN committee members are working with an outside consultant and expert in the investigation and prosecution of cases of problematic sexual behavior in children. The

goal is to develop a guidance document to assist professionals in local communities with their responses to the cases that fall outside the jurisdiction of CPS; that is, cases where the offending child is not in the role of caretaker to the victim.

We recommend that the VDSS continue to educate CAN Committee members on cases coming under the jurisdiction of a local agency and on the evolving role of Virginia’s child protection system in these cases. We also recommend that VDSS advise CAN Committee members as the above-described guidance document project unfolds.

5. Human trafficking cases involving children.

A 2017 report from the Children’s Bureau asserts the significance of the child welfare system in addressing the human trafficking of children:

"The growing awareness of human trafficking in the United States and abroad requires government and human services agencies to reevaluate old policies and develop new ones for identifying and serving victims. Due to their potentially unstable living situations, physical distance from friends and family, traumatic experiences, and emotional vulnerability, children involved with child welfare are at risk for being targeted by traffickers who are actively seeking children to exploit. Therefore, it is imperative that child welfare agencies be at the forefront of the response to and prevention of human trafficking."³

We understand that Virginia’s social services agencies have had few reported cases of child trafficking – 19 – since a new law went into effect on July 1, 2019. What policies and practices could be put in place to assist local agencies in recognizing and responding to child trafficking cases in their communities?

We recommend that VDSS continue to provide the CAN Committee with updates and data on this issue in Virginia. What are the challenges and barriers to finding these children and using resources of the child welfare system to protect them? How do you understand the complexity of these cases? How can we elevate and move Virginia’s response forward? What changes in guidance and practice will assist local agencies in this

³ <https://www.childwelfare.gov/pubs/trafficking-agencies/>

important area of child protection? We know that Virginia's Child Advocacy Centers are positioned to see these children. How are state and local departments collaborating with child advocates on these cases?

6. Virginia's Safe Haven Laws

Virginia's safe haven law allows a parent or parents to relinquish their infant up to 30 days old with an employee at a properly equipped hospital or emergency medical rescue squad in Virginia. The general intent of the law is to allow the parent to remain anonymous and be shielded from criminal liability and prosecution for child endangerment, abandonment, or neglect in exchange for surrendering the baby to a safe haven. While the law is relatively clear, it runs contrary to other laws and policies related to the issue. It is unclear how localities are expected to uniformly handle these cases and what the actual outcome for infants and their parents will be.

In the interest of improving response in these cases, **we recommend that VDSS** provide CAN Committee members with data and information about how these cases are being handled in Virginia communities. How, where and why are some infant cases of relinquishment being reported for child neglect or abuse? What paradoxes or contradictions in child protection lead to these decisions? How can guidance and policy support compliance with Virginia law? Does the law need to be changed to accommodate a more complex reality in these cases?

Conclusion

Thank you for engaging with CAN Committee workers in this effort. We look forward to working with you on these issues and concerns in the coming year.