

Child Abuse and Neglect Committee Meeting Minutes

May 31st, 2023

Virtual Meeting (Microsoft Teams)

Meeting Attendees: Ginny Powell, FACT Board; Kathleen Hollywood, VDSS; Taylor Hohle, FACT; Abigail Wescott, FACT Board; Stephenie Howard, Norfolk State University; Betty Wade Coyle, Prevent Child Abuse Hampton Roads (Retired); Beverly Crowder, FACT Board; Michelle L'Hommedieu, FACT Counsel; Nicole Poulin, FACT Executive Director; Carol Wilson, Office of Children's Services; Anya Shaffer, DCJS; Maria Altonen, VDH; Ali Faruk, Families Forward; Katharine Hunter, DBHDS; Shannon Hartung, VDSS; Melissa O'Neill, CASA-DCJS; Kristen Pritchard, VSDVAA; Jeanine Harper, GRSCAN; Eric Reynolds, OCO; Carley Lansden, VDSS; Christy Clarke, VDSS

Meeting called to order by Ginny Powell at 2:34 PM

All motions were passed unanimously unless otherwise noted.

Review of Updated CAN Charge, *Michelle L'Hommedieu*

- The FACT Board recently made some changes to their [bylaws](#), in response to a recent change in Freedom Of Information Act (FOIA) law. Nicole will send out the updated FACT bylaw to the Committee.
- The majority of these changes revolve around virtual participation and quorum requirements. Appendix A lists members of the CAN committee who have continued to be active and represent a wide range of child advocates across Virginia.
- There were no edits made by the committee to the proposed updates and appendix.
- There was a motion by Committee member Jeanine Harper to accept the updated CAN Charge. Committee member Maria Altonen seconded.

Updates from the Office of the Children's Ombudsman (OCO), *Eric Reynolds*

- OCO office now provides Quarterly Reports to the Governor. The most recent report (Jan 1 – Mar 31st) was shared with the Committee. It has already been shared with Secretary of Health and Human Resources, Dr. John Littel, and the VDSS Commissioner, Dr. Danny Avula.
 - In the first quarter of the OCO's operation (FY 2022, Q1), they received 19 complaints. This past quarter (FY 2023, Q1) they received 119 complaints.
 - Of those 119 complaints, 52.9% in open status, 40.3% in closed status and 6.7% are not yet open.
 - Out of the 101 investigations that made it to the preliminary assessment phase, only 5 investigations were opened.
 - Most complaints come from parents. After parents, the majority of reports come from relatives, mandated reporters, and foster parents, respectively.
 - Inadequate services are the majority of complaints (ex. "the agency didn't tell me what to do"; "I ran into a roadblock, what do I do?")
 - Documentation in OASIS is the second largest complaint topic. (ex. Court hearings not being documented well; placement decisions not being documented thoroughly).
 - Practice consultants within VDSS (one in each region; soon to be two in each region) are helping local offices with documentation once a problem has been identified.
 - Visitation issues are third highest, mostly from parents but also a few relatives.

- There was discussion around complaints for unsupervised children (in response to SB 1367 that was discussed last meeting). Those types of complaints have not been reported to the OCO.
 - Carroll County received the most complaints; however there was some press about their local department that appeared to effect an increase in complaints.
- Still continuing project for substance exposed infants – This project looks at child fatalities for those who were born exposed and those who were exposed after birth. There is good state policy in place to follow if CPS gets the call from a hospital that there is a substance-exposed infants. However, children are falling through the cracks.
 - This is a long-term project where the OCO will talk with CPS workers and their partners to find out why these children are not getting this critical support.
 - There was a suggestion that the leaders of the project reach out to the Virginia Hospital and Healthcare Association to get information on how and when hospitals are screening and reporting infants at birth, as it's been identified in the past that there is a lack of consistency on that process.
 - In Virginia, overdose is currently the most likely cause of death for pregnant women.
- There was discussion around how long investigations take, which varies widely across cases.
- There was discussion around using peer-led learning within the agencies to help with local agencies that are struggling with documentation. There are opportunities within practice consultant meetings for local agencies throughout the region to learn from each other but nothing specifically about documentation.
- In a future meeting, committee members would like to hear more about how child placements that don't work out are assessed and evaluated.

FACT Updates, Nicole Poulin

- The Office of Trauma and Resilience Policy at VDSS is focusing efforts on increasing workforce development throughout VDSS by increasing trauma informed and healing centered practices. As part of that work, they are conducting focus groups with local VDSS personnel throughout the state. A representative from that office will be attending the September CAN Committee to provide an update on that process.
- FACT is currently developing a new strategic plan for sustainability. It is anticipated that part of that process will be to move staffing support outside of VDSS and to increase the authority of the Board of Trustees in overseeing staff, and advising and communicating with state agencies.
- FACT will be hosting more “lunch & learns” (one hour panel discussions) in the next fiscal year. The first one will be conducted this summer and focus on child fatality review processes.
- There is potential for the FACT Board to expand the Problematic Sexual Behavior Project (two additional years for train-the-trainer and then piloting the project). The Board is scheduled to meet on June, 9th and will vote on that project at that time.
- Co-Chair Powell updated the Committee on its recommendation on SB 1367 (voted on during the March CAN committee meeting). The Governor signed it into law prior to the March FACT Board Meeting so the Board was unable to vote on whether to support the recommendation or not. The letter was not sent.
 - The letter advocating for a Child Tax Credit (voted on in the last meeting) has been drafted and will be sent soon.
- A survey will be sent out to the Committee to determine areas of interests from the committee members.

VDSS Family Services Updates, Christy Clarke & Carley Landsen

- Hotline Updates:

	Jan –April 2022	Jan – April 2023
Average # of calls per week	2035	2123
Average wait time	20 minutes	5 minutes
Average # of abandoned calls per week	573 (on average, hanging up around 8 minutes)	314 (on average, hanging up at 6 minutes)
% of calls answered in 10 mins or less	64%	85%

	State Fiscal Year (SFY) 2021	SFY 2022	SFY 2023
# of Mandated Reporter Portal Reports	1838	5,397	7850 (and counting)

- There was discussion around how this data differs compared to pre-covid. While there was a drop in calls during the pandemic, the average number of calls per week is close to pre-pandemic levels.
- Duties of a hotline specialist:
 - Process calls received by the state hotline (average handle time – 17 mins + processing time – 35 mins (depends on type of call))
 - Respond to the state hotline email inbox
 - Process CPS reports through the mandated reporter portal
 - Attend meetings and trainings.
- There are currently four different types of employment for the hotline: full time (40 hours), full time contractors (40 hours), part time (24 hours), part time contractor (20 hours)
 - Currently have 42 hotline specialists equaling 56,544 minutes available to take calls each week.
 - 10 current vacancies are almost filled (offers have been made or about to be made)
 - 74,305 minutes available to answer calls are needed (2,123 calls a week x 35 minutes) There are 56,544 available minutes at the current staffing rate. There are 71,289 minutes available when fully staffed.
 - Another 10 full-time employees (FTEs) would increase the minutes available to take calls to 91,657 which would essentially create a zero minute waiting time.
 - Training & retention updates
 - Updating training and increasing online trainings
 - iCAL (scheduling system) Microlearning - newly released training to help local agencies adjust their iCAL practices to be the most accurate
 - After hours messaging – clear messaging in voicemails on how to make a report of abuse or neglect
 - Verizon Incontact – system used to take phone calls, increasing training on the capabilities of this program
 - Hiring FTEs to boost morale and retain current employees
- A question was raised about whether the motivations of those who report suspected abuse and neglect was captured. This could potentially give us an idea of what the societal understanding of child abuse/neglect is at any given time. This data is not currently captured, the only available data would be on what the investigation has found.

- Fatalities Review:

- Water-related deaths have increased (this follows typical seasonal patterns). Two infographics have been made about gun-related deaths and water-related deaths. These are available on FUSION and the local departments have been made aware that the resource is available. An infographic around sleep-related deaths is also available.
- Majority of founded investigations continue to be physical neglect. Child deaths related to physical abuse have remained consisted for the past three fiscal years.
- There was discussion on the differences in CPS reported gun-related injuries and deaths versus those where CPS is not involved. This potentially can be discussed at the "lunch & learn." Frequently, child suicide is not reported to CPS. Maria suggested that one of VDH's epidemiologist, may be able to help with collecting this.

Committee Report Out:

- No updates at this time.

Next Steps, *Nicole Poulin*

- A doodle poll will be sent out for the upcoming fiscal year's meetings. Nicole will mark which meetings will be virtual and which will be in-person.

Meeting was adjourned at 3:50 PM

Minutes recorded and summarized here by Taylor Hohle