



**Child Abuse Prevention and Treatment Act
Report of the Child Abuse and Neglect Advisory Committee
Citizen Review Panel
May 2026**

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. CRPs may also review specific child protective services cases 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, child fatalities and near fatalities, as well as other concerns the panel considers important to the CPS program. This report serves as the annual review from the Child Abuse and Neglect Committee of the Family and Children's Trust Fund (FACT), one of Virginia's three citizen review panels.¹

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 for family-

¹ Pursuant to sections 106(c)(4)(A)(i) and (ii) of the Child Abuse Prevention and Treatment Act (CAPTA), each panel must evaluate the extent to which the State is fulfilling its child protection responsibilities in accordance with its CAPTA State plan by: (1) examining the policies, procedures and practices of State and local child protection agencies, and (2) reviewing specific cases, where appropriate. In addition, consistent with section 106(c)(4)(A)(iii) of CAPTA, a panel may examine other criteria that it considers important to ensure the protection of children, including the extent to which the State and local CPS system is coordinated with the title IV-E foster care and adoption assistance programs of the Social Security Act. This provision also authorizes the panels to review the child fatalities and near fatalities in the State.

https://www.acf.hhs.gov/cwpm/public_html/programs/cb/laws_policies/laws/cwpm/policy_dsp_pf.jsp?citID=70

serving programs, the FACT Board has the stated mission to amplify community programs and initiatives focused on the prevention and treatment of family violence and the protection of children through funding and awareness. The vision of the Board is a world in which no one in Virginia experiences family violence and all children are safe. 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 a variety of sources, the FACT Board provides grants to support programs that serve Virginia families throughout the Commonwealth.

The FACT Board is governed by a 15-member Board of Trustees who are appointed by the Governor (six members), the Speaker of the Virginia House of Delegates (five members), and the Virginia Senate Committee on Rules (four members). The Board meets quarterly and members serve a maximum of two four-year terms. The Commissioner of the Virginia Department of Social Services (VDSS or the Department) serves as an ex officio member of the Board. In 2012, the Governor's Advisory Board on Child Abuse and Neglect (GAB) was moved under the purview of 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 Nikole Cox, Division of Family Services Director, on October 6, 2025. VDSS addressed each of the three areas of concern the CAN Committee submitted and the FACT Board adopted in March of 2025. This year, CAN Committee members will continue their focus on these three issues. Additional context for each area is provided below.

Over the past year, CAN Committee members augmented their reviews of these three issues with information from: the [2025 Annual Report of the Children's Ombudsman](#); the [Safe Kids, Strong Families report](#); with the [Virginia Children's Partnership report](#); the [Virginia Department of Social Services 2025 report on Child Maltreatment Death Investigations](#); the [Child Fatality Investigations and Review and Case Studies reports](#);

the [Costs of Turnover in Virginia's Child Welfare Workforce report](#); and from information provided by several VDSS staff members on various components of the Department's work. Each has contributed to Committee members' understanding of the challenges and issues discussed below.

The CAN Committee meets four times each year and devotes part of each meeting to updates from Department staff on issues identified in these reports. As outlined in 2025 report, over the last year, the Department provided updates on federal Family First Prevention Services Act (FFPSA) implementation at two of those meetings, on child death and fatality review findings and recommendations at one meeting, and on the health and capacity of Virginia's child welfare workforce at one meeting. Each topic contributed to CAN Committee members' understanding of the issues and requests outlined below in this year's report.

1. Data Collection: The Need for Consistent and Comprehensive Data.

For over four years, the Department has had access to funding to purchase a new CWIS (Child Welfare Information System), however a new system has yet to be established. The procurement process has been started several times but ultimately rescinded for changes, further delaying the process. As VDSS staff are aware, the current system, OASIS, is decades old and obsolete. The technology used to create OASIS is over 30 years old and was built using a software system which is no longer used or taught, making it very difficult to find professionals able to make changes and updates to the system. In addition to presenting a significant administrative burden to the already overstretched child welfare workforce, it presents a substantial barrier to the Department's and CRPs' ability to accurately collect data on circumstances and responses to cases involving one of the most vulnerable populations in the care of VDSS.

The CAN Committee's recent research and reporting on [child fatality investigations and reviews](#) highlights some of the implications of this issue. Through that work, the Committee found that the documentation available through OASIS varied significantly from case to case and was difficult to access. Some files had detailed information on a family's prior history, while others had conflicting information and/or the bare minimum

of case information. Additionally, it often took a significant amount of time to do an accurate search history of children's past involvement with local Departments of Social Services prior to their deaths. Accessing these case notes are crucial to frontline workers' ability to respond effectively to the cases they are working with and for fatality review teams' ability to determine information surrounding cases. Consistent and accurate data is a fundamental component to developing effective prevention strategies. As outlined in the report, upgrading this system will address a critical missing piece needed to improve the child welfare system in the Commonwealth. The CAN Committee urges the Department to prioritize procuring an updated system.

As part the review of this area of concern, CAN Committee members ask to receive updates at each meeting on the progress being made on the development and implementation of Virginia's new CWIS and echoes the FACT Board of Trustees [letter sent in April to Commissioner Storen](#) restating FACT's [May 2024 request](#) for the CAN Committee Co-Chairs to be included in conversations related to outcome measurement for the future system.

Additionally, the Committee requests to continue receiving data presentations on topics such as local department and call center staffing, hotline response, and reports from child death reviews. As stated in our 2025 request, we ask that more comprehensive data be presented that includes outcomes, impacts, and implications of policy and practice for child safety and well-being. We are particularly interested in outcome data, not just output data, with regards to FFPSA implementation and helping to identify appropriate outcome measures and goals. We also request additional assistance with finding ways to learn from local communities and departments in each of the report areas

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

CAN Committee members support VDSS' efforts to strengthen and support the child protection labor force in Virginia. We believe that a fully responsive child protection

system needs case workers who are trained for the work, receive salaries 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. The Department's Office of Trauma and Resilience Policy has updated the CAN Committee on its efforts to develop tools and resources to support child protection workers in Virginia.

But there is still much to be done to build this capacity in Virginia. As outlined in the Safe Kids, Strong Families report, there are problems with high turnover, low pay, burnout, and low morale among child protection employees. Local departments with high vacancy rates tend to have lower outcome metrics and, as a result, communities cannot fully respond to child safety needs in their localities. The Safe Kids, Strong Families report identified five initiatives for strengthening the workforce: providing competitive compensation, piloting a broadened recruitment pipeline, expanding professional development, piloting programs to increase retention of local DSS staff, and enhancing employee experience. CAN Committee members ask to continue receiving updates on efforts within these initiatives including the work with Evident Change and the Workload Design Committee and process on implementation of the training academy, as mentioned in the VDSS 2025 response letter. Data and information provided will help the Committee and the FACT Board to advocate and educate for additional funding and resources as appropriate.

3. Child fatalities.

Child fatalities were a large focus area of the CAN Committee last year, resulting in the publication of two reports. These reports identified significant issues related to the prevention, response, and data collection of these cases across multiple agencies, including VDSS. The CAN Committee members ask to continue receiving updates on the processes and findings of the regional case reviews and any other efforts being made to address issues related to case responses.

As a continuation of this focus, the subcommittee of the CAN Committee will reconvene

to meet at least quarterly to review a sample of OASIS records that are not reviewed by the Office of the Children’s Ombudsman or the regional review teams. To continue monitoring trends and providing reports, CAN Committee members request that notices of child deaths provided by VDSS staff and continued OASIS access be shared with FACT staff.

Every year, there are continued reports of infant deaths, many of them sleep-related, where parents, caregivers, or both, have substance use disorders and cannot safely care for their children. Like so many other states in the nation, substance exposure and use continues at epidemic levels. CAPTA was updated in 2016 to include requirements related to Plans of Safe Care for infants who are exposed to substance use during pregnancy; however, efforts in Virginia to implement these requirements have been inconsistent and delayed. The CAN Committee requests any updates related to the Pathways of Coordinated Care workgroup mentioned in the VDSS 2025 response letter, and any other efforts for addressing the needs of substance-exposed infants and their caregivers.

Conclusion: A Confluence of Concerns for Children and Families at Risk

As the CAN Committee met and discussed issues associated with child protection and safety in Virginia over the past year, three overarching factors and circumstances continue to be of profound concern to us. Taken together, these concerns present a crisis facing Virginia’s Child Welfare System. They include the following:

- The federal policy of FFPSA is focused on preventing out-of-home placements for children who are abused and/or neglected, instead prioritizing keeping children in their home with their parents or placing them with other caregivers who are kin/kith. The goal of this legislation is to increase the use of in-home services to stabilize the children and families with support from local Departments and other FFPSA Approved Evidence Based Program services, such as Multisystemic Therapy or Parent-Child Interaction Therapy. While the intent of this legislation is positive, there continues to be concern about the lack of available data related to the

overall safety and welfare of the children involved in these cases. Specifically, it is unclear how success is being measured for these children outside of achieving the overall goal of keeping them with their parents or with kin/kith. During their work last year, the CAN subcommittee established to focus on child fatalities reviewed multiple cases where kin/kith were placed as caregivers for the child, but the parent(s) was able to access the child without supervision which directly contributed to the fatality. As difficult as it is to know if a different strategy would have prevented the fatalities, these cases highlight the need for better discretion and data rather than a prescriptive model of services.

- While the absence of substantial outcome data related to the health and welfare of children involved with child welfare systems is relevant across all states, the issue is further compromised in Virginia because of the antiquated Child Welfare Information System (CWIS), OASIS, currently in use. Years after the funding was secured to update the system, the Department still does not have a contract for a new system. The ability to accurately measure outcomes related to practices in the field are central to developing effective training, policies and laws that are essential to keeping a child safe, healthy, and with their families.
- Lastly, significant workforce challenges continue to hamper response efforts in many local departments of social services. Long after COVID-19 impacted this work, local departments continue to struggle to hire and retain child protection workers to meet the needs of children and families. The work is emotionally difficult and these workers are underpaid. Staff report that many front-line workers suffer from secondary trauma responses including burnout and feeling overwhelmed. This is happening in Virginia and in many other states. A comprehensive solution is complicated and involves improving social-ecological systems across the prevention spectrum, but this is a factor that greatly contributes to this crisis facing effective responses to abused and neglected children in Virginia.

Like our colleagues at the State and Local Departments of Social Services, CAN Committee members worry about the safety and well-being of children in the face of these challenges and wonder how long it will take for a comprehensive, fully protective

child welfare system to be implemented in Virginia.

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Thank you for engaging with the CAN Committee in this effort. We recognize and appreciate the efforts made by the Virginia Department of Social Services to build and support a strong child protection system in Virginia and are aware of the difficult work carried out by local departments of social services around the state. We look forward to working with you on these issues and concerns in the coming year.