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Back to Basics

A Reform Effort-2013

Introduction

The following is a proposal to assist the Texas Department of Family and Protective Services (DFPS) in improving employee morale and retention, specifically in Investigations and FBSS departments by outlining policies within the DFPS handbook that appear to be problematic and contrary to the goals of the improving employee morale, retention, high caseloads, and employee development at all levels. Additionally, the proposal will provide solution based strategies designed to achieve the above goals, along with specifically reducing re-victimization and child deaths rates. The effectiveness of this proposal shall be measured by a reduction the annual turnover rates of investigators and FBSS caseworkers; along with annual reductions in re-victimization and child death rates.

Outline of Proposal:

- Identified Areas of Concern
 - ◆ 2153.2 CPS Staff Who Formally Screen Reports of Abuse or Neglect
 - Allow all supervisors the ability to screen intakes to help reduce caseloads
 - ◆ Caseload Discrepancies
 - Implement a Round-Robin approach to case assignment within units
 - ◆ 2440 Family Team Meeting
 - Streamline the FBSS referral process from Investigations to FBSS.
 - Limit this to FBSS; it appears to be better served where family is addressing risk
 - ◆ Type of Training Received at all levels and Responsible parties for Certification of Training
 - Implement Hands-on field training at all levels
 - Preceding Level responsible for Certification of Training
 - FBSS caseworkers receive training in In-Home Skills Development
 - ◆ Establish a Checks and Balances for the Department
 - Allow Union representative to be present at meetings and staffings between worker and management, specifically at grievance meetings.
 - Or establish a Worker Association separate from (In-House) DFPS in where workers' are afforded representation and recourse without fear of retaliation; this is will assist in ensuring fairness and accountability at all levels.

Projected Timeline for Goals:

Turnover rates for caseworkers: 1 year from implementation of proposed plan.

Re-victimization rates: 1 year from implementation of Boys Town training, 'Building Skills in High Risk Families' by FBSS workers.

Child Death rates: 1 year from implementation of Boys Town training 'Building of Skills in High Risk Families' by FBSS workers.

Identified Areas of Concerns: In identifying areas of concern within policy and the Department's internal-functioning, the objective is to attempt to streamline the overall progression of a case from Statewide Intake to Family Based Safety Services (FBSS) and stabilize the work environment. Streamlining the overall progression of a case will help to reduce tasks at each level; which will increase workers' time spent on actual assessments, gathering information for cases, and direct contact with children and families. Additionally, this will increase employee morale and result in reduced turnover rates. Improved employee morale and reduced turnover rates, in turn affect the quality of services offered to families as a whole, as it will allow supervisors and workers to focus on the cases which need attention and intervention.

2153.2 CPS Staff Who Formally Screen Reports of Abuse or Neglect:

Currently, policy only allows supervisors during night and weekend hours to screen intakes; for day intakes, Screeners are used to screen intakes that are then forwarded to the day unit supervisors. The current policy is problematic in that it prevents day supervisors from being able to screen out non-essential cases; supervisors are stripped from their abilities to assess, prioritize, and assign cases appropriately. Supervisors and Workers must be able to exercise their training in assessments and decision making skills; and shoulder the responsibility thereof.

It is estimated by former and current workers that 30% - 40% of any caseload includes what is referred to as non-essential cases, meaning they do not warrant a thorough investigation and/or meet the criteria for DFPS intervention. Night Unit supervisors were able to downgrade approximately 50% of all intakes to Priority N's, Administrative Closures, and Priority2's by utilizing the CPS Assessment of Priority. Since 2004, the Department has practiced the 'CYA' approach to intervention by conducting thorough investigations on non-essential cases. Some of these cases simply do not meet the criteria for CPS intervention or the needs of the family can be addressed by referring the family to appropriate community resources when child safety is not an issue and is not thought to be in the "foreseeable future."

By allowing all supervisors to screen intakes assigned to individual units according to DFPS Handbook criteria: 4300 CPS Assessment of Priority, this will help to reduce actual number of

2153.1 Criteria for Formally Screening Reports of Abuse or Neglect

2153.2 CPS Staff Who Formally Screen Reports of Abuse or Neglect

To document in the *Intake* stage of the IMPACT case system that a reports has been formally screened, the worker:

- navigates to the *Formal Screening* section of the *Priority/Closure* page; and
- answers *Yes* to the question *Was the Intake Formally Screened?*.

If a report is eligible for formal screening but a formal screening is not conducted, the supervisor or screener must take the following actions before progressing the report to the next stage or closing it without assignment for investigation:

- Select *No* to the question *Was the Intake Formally Screened* in the *Formal Screening* section of the *Priority/Closure* page in the intake stage, and
- Document the reason the formal screening was not conducted in the *Contact Detail* page of the *Intake* stage.

For detailed procedures on the formal screening process, see:

2153.3 Determining a Report's Eligibility for Screening

2153.4 Reports That Clearly Meet Investigation Guidelines

2153.5 Reports That Do Not Clearly Meet Investigation Guidelines

2153.6 Recommending a Formally Screened Report for Investigation

2153.7 Closing a Formally Screened Reports (Not Recommending Investigation

2153.8 Time Frames for Completing the Formal Screening of a Report

2153.9 Documenting the Formal Screening of a Report

2153.1 Criteria for Formally Screening Reports of Abuse or Neglect

CPS August 2009

The following reports must be formally screened:

- Priority 2 reports when all of the alleged victims are age 6 or older and there is no other open CPS case The P2 designation must be SWI's final priority assigned by staff of the DFPS Statewide Intake (SWI) Division. Reports changed to P2 by CPS staff are not eligible to be screened.
- Priority None (PN) reports that meet the criteria for SWI to forward the report to the appropriate DFPS field office. (See 2144 The Role of SWI in Screening Reports of Abuse or Neglect.)

2153.2 CPS Staff Who Formally Screen Reports of Abuse or Neglect

CPS August 2009

Caseworkers

CPS caseworkers who serve as investigation screeners may formally screen intake reports.

Supervisors

CPS supervisors may formally screen reports when all of the following circumstances exist:

- A designated screener is not available to perform the function
- The report is received on a weekend or holiday
- The report meets the criteria for formal screening (see 2153.1 Criteria for Formally Screening Reports of Abuse or Neglect)
- The supervisor follows the standardized screening protocol.

The supervisor screens the report from his or her own workload within the IMPACT case management system, not from the screener's workload.

2153.3 Determining a Report's Eligibility for Screening

CPS August 2009

The CPS worker assigned to formally screen a report of abuse or neglect:

- navigates to the *Priority/Closure* page in the *Intake* stage of the IMPACT case management system; and
- views the Formal Screening section.

Depending on the determination made there (identified in the *Eligible?* field), the worker takes the actions shown in the table below:

| Eligibility for Formal Screening | CPS Action |
|----------------------------------|--|
| Not Eligible | The worker routes the report to the unit supervisor for screening, following regional protocols. |
| Eligible | The screener proceeds with the: <ul style="list-style-type: none"> • <i>Person</i> search for prior DFPS history on the family; • Determine eligibility for a formal screening; and • Document the reason for the screener's or supervisor's actions. |
| Eligibility Unknown | The screener proceeds with the: <ul style="list-style-type: none"> • <i>Person</i> search for prior DFPS history on the family; |

cases assigned to individual investigators. Subsequently, this will also help to reduce the number of referrals to FBSS and legal cases.

It is suggested that all supervisors be allowed to screen intakes using the following as defined by DFPS Handbook to help screen out non-essential cases, thus reducing caseloads:

4300 Priority N- No current Safety Issues, No Apparent Risk of Reoccurrence in the foreseeable future.

1464/ 2156 Administrative Closures- The situation does not appear to involve a reasonable likelihood that a child will be abuse or neglected in the foreseeable future, allegations are too vague or general, and the report does not give enough information to locate the child or family. Staff must conduct a people search before reclassification.

2412 Abbreviated Investigations- It has been determined that child is safe and no safety plan is needed, abuse and/or neglect did not occur, and family can be referred to other community services.

Example: An example of how the above translates into a reduction of caseloads- If the average intake for a Day Unit is 20 intakes per day, and a supervisor is able to screen out non-essential cases estimated at the lower end at 30% by utilizing the above assessments, the number of intakes that will then be assigned for investigation is reduced from 20 to 14. The average unit consists of 3-4 investigators; therefore each Investigator would receive 5 cases versus 7. Some investigations will be appropriate for Abbreviated Investigations and therefore, will not be referred to FBSS; allowing for a reduction in caseloads in FBSS as well.

Caseload Discrepancies:

It is proposed a Round-Robin approach to case assignment be implemented by supervisors within the individual units. This will help reduce 'overloading' individual workers for any reason. It should not be expected that caseloads be exact; however, when trends of significant caseload discrepancies begin to occur, workers who are 'overloaded' begin to become overwhelmed with concerns of a possible child death as a result of not having a manageable caseload; no child should suffer as a result of poor case management whether it be on the worker or supervisor level. The need for a child to be seen should outweigh any case management issue. Supervisors should be trained, as they are promoted up from the worker level, to assist unit in meeting the needs of the child and should be able and willing to do so if such situation presents itself.

2440 Family Team Meeting:

Presently, policy states a Family Team Meeting shall take place to prevent the removal a child, with the exception of "immediate safety threat and not sufficient time to schedule meeting." It is suggested the policy on Family Team Meetings be reviewed and possibly revised to limit task to FBSS workers. Most removals in an Investigation Stage, would meet the exception

4300 CPS Assessment of Priority

SWI Policy and Procedures November 2011

Once it has been determined that the situation meets CPS definitions of abuse or neglect, the intake specialist selects the appropriate priority based on the information available at the time the intake is taken.

Intakes are assessed as Priority 1, Priority 2, and Priority N, based on the intake specialist's assessment of the immediacy of the risk and the severity of the possible harm to the child.

Priority 1

A Priority 1 (P1) is assessed for any CPS intake in which the children appear to face an immediate risk of abuse or neglect that could result in death or serious harm.

An intake received after a previous investigation was closed with a disposition of *Unable to Complete* (UTC) is assigned a P1, if the appropriate criteria are met.

See:

- 4410 Subsequent Referrals on Unable to Complete (UTC) Investigations
- 4420 Child Death Reports Under CPS Jurisdiction
- 4422 Death of a Child Reported by Law Enforcement
- 4431 Prenatal Drug or Alcohol Exposure

CPS is required to initiate the investigation within 24 hours of receiving a Priority 1 intake.

For examples, see the *Child Protective Services Handbook*, 2142 Assigning Priority to Reports of Abuse or Neglect.

Priority 2

A Priority 2 (P2) is assessed for any CPS intake in which the children appear to face a risk of abuse or neglect that could result in substantial harm.

CPS is required to initiate the investigation within 72 hours of receiving a Priority 2 intake.

Priority N

A Priority N (PN) is assessed for a CPS intake in which either of the following reasons applies:

Past Abuse or Neglect; No Current Safety Issues; No Apparent Risk of Recurrence in the foreseeable future

- An incident of abuse or neglect would have met legal definitions at the time the incident occurred, but at the time of the report, there are *no current safety concerns* and *no known risk of recurrence in the foreseeable future*.

priority, *Other Agency/Out of State* must be the reason for closing the report. After reviewing a report, the supervisor must assign it for investigation, if it meets the criteria outlined in 2142 The Allegations That CPS Accepts for Investigation and Assessment.

2156 Closing Reports of Abuse or Neglect Without Assignment for Investigation

CPS August 2009

The supervisor or investigation screener may close a report of abuse or neglect without assigning it for investigation for the following reasons:

- The situation does not appear to involve a reasonable likelihood that a child will be abused or neglected in the foreseeable future.

Exception: This does not apply when the report meets the criteria under 2710 When a Child Dies and its subitems, relating to deaths from abuse or neglect when there are no surviving children in the home.

- The allegations are too vague or general to determine whether a child has been abused or neglected or is likely to be abused or neglected.
- The report does not give enough information to locate the child or the child's family or household. Before closing the report, staff must search:
 - local records,
 - SAVERR (the State's Medicaid eligibility system),
 - IMPACT records (IMPACT is DFPS's automated case management system),and
 - the telephone directory, to explore all possible resources to locate the necessary information.
 - The report has been reclassified and referred to the DFPS Adult Protective Services or Child Care Licensing divisions. If the reclassification and referral requires a priority change, the priority of the intake must be changed in IMPACT to *Priority N*, and the reason for the change must be documented as *Closed and Reclassified*.
 - Handling the report is not the responsibility of CPS and will be investigated by another state agency in Texas, another state's protective services program; or a law enforcement agency.

If closing the report without assigning it for investigation requires a priority change:

2412 Abbreviated Investigations

CPS November 2009

An abbreviated investigation begins as a thorough investigation, but concludes as a shortened but complete investigation when ensuing investigative events determine that:

- the child is safe, so a safety plan was not needed;
- abuse or neglect did not occur; and
- CPS involvement is not needed, and the investigation worker has enough information to refer the family to receive other services, if appropriate.

The following describes the actions and conclusions that characterize an abbreviated investigation.

Required Case Actions in Abbreviated Investigations

Actions Required of the Investigation

Worker

Check the abuse and neglect backgrounds of every member of the family and home, unless an exception to this requirement is met.

Interview and examine each alleged victim.

Interview at least one parent in the home. If both parents (or the only parent) in the home are alleged perpetrators, the investigation worker must also interview:

- a collateral with relevant information; or
- a principal who is not an alleged victim or perpetrator.

Visit the home unless abuse and neglect can be ruled out without taking this action.

Check the criminal background of each alleged perpetrator, unless an alleged perpetrator is a child who is also alleged to be a victim.

Cross-References

2341 Abuse and Neglect Background Checks

2361 Interviews with Alleged Victims
2371 Examinations of Alleged Victims and Other Children in the Home

2392 Interviews with Parents, Alleged Perpetrators, and Other Adults

2397 Interviews with Collateral Sources

2350 Visits to the Home

Item 2342 Conducting Criminal Background Checks

Optional Case Actions in Abbreviated Investigations

In an abbreviated investigation, the investigation worker may take actions beyond the required actions listed above. If these actions constitute a thorough investigation, the investigation worker must document a thorough investigation

2440 Family Team Meetings

CPS November 2009

Whenever possible, parents and family members must be given the opportunity to find solutions to situations that threaten the safety of children. Family Team Meetings (FTMs) are a process in which DFPS, family, relatives, friends, and other professionals join together to develop a plan that ensures children are cared for and protected. FTMs are:

- designed to provide quick, family-involved responses to concerns about the safety of children; and
- used to achieve positive outcomes for children in the earliest stages of CPS and family connection.

Family Team Meetings are a part of the Family Group Decision-Making process. See:

1121 Family Group Decision-Making (FGDM)

6273.1 Family Group Conferences

Using the FTM model, case planning becomes a shared process among parents, family members, and CPS in which the safety of children is the primary focus. Participation also meets the statutory requirement to:

- involve the family in case planning; and
- make efforts to prevent the removals of children from their families.

FTMs are available in all areas of the state.

When an FTM Is Not Feasible

An FTM may be convened *unless*:

- the threat to a child's safety is immediate; *and*
- there is not sufficient time to schedule an FTM.

In such cases, the caseworker and supervisor must take the appropriate action to ensure the immediate safety of the child.

Goal of Family Team Meetings

During the FTM process, all parties strive for a consensus when deciding how to ensure the safety of the child. In FTM planning, a consensus is reached when:

- participants agree that the child will be safe in the placement, even though it might not be the placement each individual participant preferred. The placement can be the child's own home, a relative's or friend's home, foster care, or another arrangement; and
- every participant has had the opportunity to present information and provide perspective.

criteria; however, in practice FTM's sometimes have been used to establish safety plans at a later date from initial contact and to refer family to FBSS. With regard to using a FTM at a later date to establish a safety plan, the delay in establishing a safety plan potentially leaves a child at risk. This sometimes will occur if the family is 'non-cooperative' at initial contact and investigator has assessed situation involving the child as needing a safety plan. The assessment for the need of a safety plan should not be taken lightly. Safety plans should also not be abused in way to "cya" during an investigation. The assessment for the need of a safety plan should relate directly to safety and risk assessments. If there is concern for the safety of a child that warrants a safety plan and family is not cooperative, then a staffing for a removal should take place, not a scheduled FTM at a later date.

With regard to a FTM being used as part of the FBSS referral process, policy does not require it and it distracts the investigators' time from pending cases. It appears to be better served in the FBSS stage, where the family is addressing risk factors contributing to the safety of child.

2463 The FBSS Family Assessment and Staffing:

Policy currently states "the investigator caseworker must attend the family assessment with the FBSS caseworker to *introduce the FBSS caseworker to the family and provide information about the need for services." Additionally, the policy states "once the family assessment is complete, FBSS and Investigation staff consult in a staffing to determine whether the family would benefit from FBSS." This staffing usually includes the supervisors as well.

In addressing the Assessment part of this policy, an Investigator should be able to communicate to the family prior to making the referral to FBSS the "need for services" and effectively articulate the referral process to include a reasonable timeframe in which a FBSS caseworker would be contacting the family. This is repetitive and timely, as it involves the FBSS caseworker, the investigator, and the family all scheduling a day to meet for an introduction and repeat of the "need of services." This distracts from both the investigator's and FBSS worker's time from other children and families who have yet been assessed.

With regard to need for the staffing to "determine whether the family would benefit from FBSS", this process involves 2 supervisors (investigation and FBSS), 2 workers, and perhaps family members, and other professionals. It should be noted the referral was initially generated by a trained Investigator who assessed the family in that stage to be in need of services. It suggests that the Investigator's assessment of risk and need for services is inadequate and invalid. The policy creates a notion of policy over policy.

It is proposed that the policy be eliminated as it is repetitive and timely. Investigators should be trained on how to effectively communicate their assessments of identified risk factors and the referral process to FBSS to the family. FBSS caseworkers should attempt to make contact with the family and should the family not be willing to participate in the family services, then FBSS has the options to conduct a FTM, staff for a Motion to Participate, or staff for a removal.

Training at all levels, Program Directors, Supervisors, Workers:

Historically when addressing High Caseloads and Turnover rates, more training has been the emphasis rather than the **Type** of training. Basic Skills Development training (BSD), in general offers an introduction to Child Protective Services concepts, administrative tasks and forms, and minimal training on using Impact. Though this is necessary, the breakdown seems to be occurring in the supervisor's and worker's ability to accurately assess intakes and safety and risk factors in the field; along with investigative techniques to gathering information that meet the civil standard of a preponderance of evidence, and application thereof to the definitions of abuse and/or neglect as defined by Family Code. Accordingly, the following are proposed to improve assessment skills at both supervisor and worker levels, investigative skills, services provided to families while participating in FBSS, and overall quality services to families.

It is proposed **more Hands-on field training** occur at **all levels**. Accountability is key to ensuring that policies and procedures are adhered to and that thorough assessments are conducted. Accountability appears to be lacking in upper levels; it appears to roll down to the front-liner however, the directions given to the front-liner by upper management and/ or the training or lack thereof received is not called into question. Therefore it is purposed **the preceding level of rank should be responsible for the training and the Certification of the training for the employee they have direct supervision over; i.e., Program Directors approve the training Certification of Supervisors, Supervisors approve Certification of the worker. This is a teamwork approach where everyone is accountable for each other's successes and failures. In addition, it is suggested the duration of On-the-Job training be increased to develop and enhance.** The San Antonio Police Department trains their officers at the training academy for nearly 7 months and then officers must participate in Field Training for an additional 14 weeks with a tenured officer.

For all levels, the following should be taught and emphasized as cohesiveness will foster a team effort for safety, intervention, appropriate dispositions, and services provided to the families.

- 1. Know, understand, and be able to apply Family Code definitions of abuse and neglect** to evidence gathered, appropriately. Family Code definitions contain phrases such as "results in substantial harm to the child" and "substantial risk of harm"; the key word being substantial. Often times, the word substantial can be confusing when determining dispositions and can lead to very subjective decisions. Through appropriate training and emphasis in this area at all levels, this can help workers and supervisors arrive at more appropriate assessments and dispositions.
- 2. Know the criteria for each CPS Assessment of Priority** according to DFPS handbook, section 4300.
- 3. Practice screening intakes** using CPS Assessment of Priority, 4300.

4. Know and be able to **apply** safety and risk assessment without the use of forms. The safety and risk assessment forms are good guides; however **should not** be relied upon in the field. The **ability to assess safety and risk factors is a skill** and should be demonstrated before Certification is approved. Additionally, being able to assess the Totality of risk factors and understand how multiple risk factors in their totality can increase risk.

2320 Assessing Risk- Risk Assessment Form: Overall Scales of Concerns **should** compliment and support case disposition and subsequent actions for case, i.e., family services. All levels of staff should be able to understand and assess the Totality of risk factors and how it may relate to increased risk in home. All households have risk factors present; however knowing how to assess the totality of risk factors is what determines direction of case.

In attempting to strengthen the Department's ability to appropriately assess safety and risk factors, the Recruitment efforts to hire individuals with degrees in Social Studies should be emphasized as indicated in the Human Resource Management Plan of 2012, along with the number of years experience. (We aren't selling cars here folks, lives and health of children is what we are dealing with.)

Investigator Training:

'Un-Blur' the role of investigator and FBSS caseworker. Train investigators to be investigators; along with being able to demonstrate the skill of assessing safety and risk factors, investigators should be trained to gather information as it relates to the current allegations. It is suggested that interview and investigative techniques should shift from a 'caseworker' social history-gathering approach to gathering necessary evidence to meet the civil standard of evidence as it relates to the Family Code definitions and the presenting allegations. In streamlining the roles and tasks of an investigator, the investigator will be able to conduct quality assessments and investigations.

*Example: In the Brasse case, throughout two years of CPS intervention, not one investigator asked for **proof of application** of medical insurance or proof of accessing other resources to meet the needs of child.

It is proposed that once the worker is assigned to a unit, he/she receives hands-on skills development in the field by supervisor for 1 month and then assigned a tenured mentor for 6 months before solely being responsible for his/her cases. Supervisors of Investigators and FBSS caseworkers should be responsible for the Hands-on field training of the employee and his/her Certification of Training.

The investigator should receive actual hands-on training from the supervisor that involves case reading, safety and risk assessment training, screening intakes, and a complete walk through on an actual investigation before assigning investigator to a tenured mentor for six months. While mentoring with a tenured investigator, the new investigator should be capped at 5-7 cases.

Additionally, the supervisor should conduct biweekly meetings to review the progress of the training until it is determined the investigator is appropriate for Certification.

Investigators should receive training on bridging the gap between Law Enforcement and CPS to encourage collaboration. First and foremost in any case is safety; once safety is established an investigator does not want to compromise any possible criminal investigation. Currently in BSD training there is little training on this matter and as result, there seems to be a gap between the two entities; and often times, a liaison (middleman) will assist in this collaboration. **It is proposed Investigators own their investigations entirely, and communicate directly with assigned Law Enforcement staff with safety always in consideration. Middleman approaches suggests a fully trained investigator does not possess the skills to handle such collaboration and often will confuse the communication between the two entities.**

Supervisor Training:

Supervisor training should be the responsibility of the Program Director; therefore requiring the Program Director to approve Certification of Training for the supervisor. The Program Director is accountable for both the successes and failures of the supervisors. Additionally, this allows for Program Director to become invested in the progress and quality of work produced by supervisors. *Currently, training for supervisors does not occur until six months after promotion and/or when schedule allows.

Implement On-job training, such as screening intakes, staff evaluations, case reading for closures, and case assignment and management by mentoring new supervisors with tenured supervisors. It is suggested a mentoring training be in place for at least 6 months. The first month should require the mentor supervisor and newly promoted supervisor to meet once a day to practice the above tasks; the second month, requiring weekly trainings to practice and review job related tasks. The third month would require biweekly trainings; and thereafter, once a month trainings for the remaining months. **During this time, it is proposed that the Program Director meet with the new supervisor biweekly, in where review of progress of training can be assessed until it is determined Certification is appropriate.**

FBSS Caseworker Training:

Currently, FBSS caseworkers act as facilitators of family services; FBSS caseworkers do not provide any in-home skills development to the families that have been identified as needing services to reduce risk in the home. FBSS outsources services which does not allow for first-hand observation and assessment of changed or reduced behaviors related to risks. Assessments of risk reduction are mostly based upon a certificate of completion of parenting classes which usually equates to “successfully completion” of family services. Additionally, outsourcing recommendations for reunifications are limited in that providers (parenting classes, counselors) are often not able to work with the family unit in their natural environment.



It is proposed FBSS caseworkers be trained to provide actual in-home skills to the families through receiving training in Boys Town's In- Home Family Services, 'Building Skills in High-Risk Families' to reduce re-victimization and child death rates. This type of training would allow for FBSS workers to teach and provide actual skills to parent(s) and the family as a whole in their natural environment. This model also allows caseworkers to observe interaction and implementation of skills between parent and child over a period of time. It is suggested as indicated by evidence based outcomes of this model, actual hands-on, in-home skills taught will help reduce re-victimization and child death rates as the outcomes measured relate to risks factors. Additionally, this will help to reduce the actual number removals, lowering the caseloads for Conservatorship (CVS) caseworkers. Attached is a brief summary of Boys Town's Teaching Model and material on the training package to include estimated costs for training Region 8's caseworkers and 20 trainers; along with evidence-based outcomes of this model.

Checks and Balances:



Currently, Union representatives are not allowed to accompany workers at grievance staffings and/or meetings with management without permission from management, which as you can manage is rarely granted. **It is proposed Union representatives be allowed to attend such meetings without the need for management's permission, as it would offer a sense of support to workers and protection for the Department against accusation of hostile work environments.** Perhaps the establishment of a Worker Association can achieve the above as well. Currently, workers have no place to turn to when they feel they are being 'targeted' or to address concerns they may have without fear of retaliation. The Department is currently top heavy and offers very limited support for its front-liners. This type of establishment would be certain to hold others accountable for their behaviors and adherence to policies.



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