# Wyoming Citizen Review Panel 2018-2019 Annual Report



"We are very interested in changing our current system so that it strengthens the resiliency of families as our primary intervention and gives children what they need to thrive." -- Jerry Milner, DSW, Associate Commissioner at the Children's Bureau, Acting Commissioner for the Administration on Children, Youth and Families

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### Letter from the Chair

Dear Reader,

Thank you for taking the time to review the Wyoming Citizen Review Panel's 2018-19 Annual Report. The information presented here is a summary of the Panel's vision and outcomes. I am grateful to have had the opportunity this year to stand shoulder to shoulder with a full Panel of people committed to helping children and families in Wyoming. We have worked independently and collaboratively across the state to make a difference. Wyoming is a place where people have to reach further to cross geographic barriers and dig deep to find the money and time to make what is needed a reality. And we do.

The Panel is the umbrella for and operator of three Parents As Teachers sites, facilitates the Wyoming Child Death Review Panel, and helps engage individuals and communities to provide meaningful feedback to the Wyoming Department of Family Services. This year the Panel will embark on a partnership with Wyoming 2-1-1 to launch a Kinship Navigator Program.

The Panel looks forward to another year of finding ways to bring people together around what needs to be done for the health of children and families. Please consider joining us. We are always looking for volunteers who want to be part of the Panel, share their knowledge and experience, and help promote intra-agency efforts to connect people with resources, identify gaps and create new initiatives. We appreciate the many Panel members who have contributed in the past and look forward to meeting those who will help move the Panel into an increasingly productive future.

Sincerely,

Emily Quarterman Genoff

Chair

### **Letter from the Executive Director**

Dear Wyoming Residents,

It has been my honor to serve the Wyoming Citizen Review Panel as Executive Director over the last year and half. The Panel is made up of volunteers who represent a broad range of disciplines and, many decades of experience advocating on behalf of Wyoming children and families.

With the expertise of Panel members and in coordination with other dedicated state partners in the public, private, and not-for profit sectors, we continue to support promising activities to improve the child protection system in Wyoming and realize the vision to provide children and families the resources and skills they need to thrive in safe and healthy environments.

It is my hope that working together, we can build on past successes and make meaningful improvements in Wyoming's Child Welfare System.

Respectfully,

RVau

Robin Van Ausdall

Executive Director, Wyoming Citizen Review Panel

### **About Citizen Review Panels**

Citizen Review Panels are mandated by the Child Abuse Prevention and Treatment Act (CAPTA) - the key federal legislation addressing child abuse and neglect. CAPTA was originally enacted in P.L. 93-247 and was most recently amended recently amended on May 29, 2015, by the Justice for Victims of Trafficking Act of 2015 (P.L. 114-22) and, on July 22, 2016, by the Comprehensive Addiction and Recovery Act of 2016 (P.L. 114-198). CAPTA provides Federal funding to States in support of prevention, assessment, investigation, prosecution, and treatment activities and also provides grants to public agencies and nonprofit organizations, including Indian Tribes and Tribal organizations, for demonstration programs and projects. CAPTA includes the following requirements, pertaining to Citizen Review Panels:

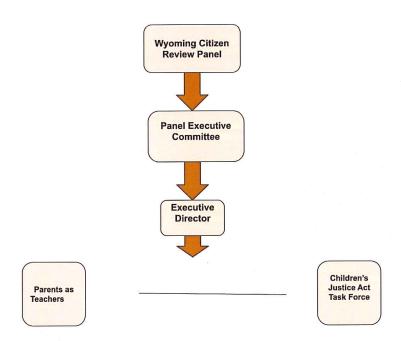
- States shall establish a minimum of three citizen review panels except those states receiving the minimum CAPTA allotment, which shall establish one citizen review panel.
- States may use existing panels established under state or federal law, such as child fatality
  panels or foster care review panels, if the existing panels can meet CAPTA requirements and
  states ensure the existing panels meet the requirements.
- Panel members shall be volunteers broadly representative of the community in which the
  panel is established and include members who have expertise in the prevention and
  treatment of child abuse and neglect, and may include adult former victims of child abuse or
  neglect.
- Panels shall meet not less than once every three months.
- Panels shall examine the policies, procedures, and practices of state and local child protection agencies and evaluate the extent to which the agencies are effectively discharging their child protection responsibilities in accordance with CAPTA.
- Panels may examine specific cases, including child fatalities and near fatalities, and review
  the extent to which the child protective services system is coordinated with the state's
  foster care and adoption programs.
- Panels shall provide for public outreach and comment to assess the impact of current procedures and practices upon children and families in the community and to evaluate the extent to which agencies are effectively discharging their child protection responsibilities.
- Panels shall prepare an annual report containing a summary of the activities of the panel and make the report available to the public.
- Panels shall include recommendations to improve the child protective services system in the panel's annual report.

- States shall provide panel members access to case information if such information is necessary for the panel to carry out its functions.
- States shall provide staff assistance to a panel if the panel requests assistance with performing its duties.
- The appropriate state agency shall submit a written response, no later than six months after receiving the panel's recommendations, to the citizen review panel that describes whether or how the state will incorporate, where appropriate, panel recommendations.
- States shall submit citizen review panel reports to HHS annually (CAPTA).

### Wyoming Citizen Review Panel Organization

The Wyoming Citizen Review Panel is a federally mandated group of citizens who are responsible for determining whether state and local agencies are effectively meeting child protective requirements pursuant to the Child Abuse Prevention and Treatment Act (CAPTA) and subsequent amendments.

In addition to its work relative to CAPTA, the Wyoming Citizen Review Panel is organized as a 501(c)3 charitable organization and administers several complementary programs. The Panel Executive Committee serves as the Board for the charity. The organizational structure is as follows:



The Panel is composed of volunteer members who are broadly representative of the state, including members who have expertise in the prevention and treatment of child abuse and neglect and the juvenile justice system. The Panel currently consists of 11 members, one full time Executive Director, and one Department of Family Services Liaison:

- Robin Van Ausdall, Executive Director, Cheyenne
- Laura Dobler, DFS Liaison, Cheyenne
- Emily Quarterman Genoff, Chair, Casper
- Jana Conine, Cheyenne, Vice Chair, Cheyenne
- Charla Ricciardi, Treasurer, Cheyenne
- Carissa O'Malley, Secretary, Casper
- Sheri England, Gillette
- Stacy Strasser, Lander
- Carol Nicolarsen, Cheyenne
- Lynn Huylar, Cheyenne
- Dawn Sides, Cheyenne
- Carol Tullio, Cheyenne
- Peter Newell, Cheyenne

### 2018-19 Strategic Plan

WYCRP met in April 2018 in Casper and conducted a strategic planning process, to formulate the 2018-19 Strategic Plan.

**Mission/Vision:** Wyoming Citizens for Children builds collaboration for strong, healthy families and communities, child-safety and well-being.

**Purpose:** The Wyoming Citizen Review Panel, doing business as Wyoming Citizens for Children, is a federally mandated group of citizens who promote child safety and permanency through:

- Education,
- Service provision,
- Review of state and local policies and procedures,
- Review of child protective service cases,
- Communication to build partnerships,
- Advocacy for change where needed.

### **Priorities**

- 1. Strong organization
  - a. Goal: A recognized specialist in public participation and community engagement
    - i. Objectives
      - 1. Name change
      - 2. Budget and Financial Plan
      - 3. MOUs with state agencies
      - 4. Umbrella organization for nonprofits
      - 5. Grants
      - 6. Major donor, planned giving, monthly recurring gifts
      - 7. Stanley grant
      - 8. Fundraising
- 2. Marketing and Communication
  - a. Goal: Promoting safety and well-being for all children and families through recommendations to state agencies
    - i. Objectives:
      - 1. Annual report, containing data driven recommendations and action steps
- 3. Recruiting Members and Partnerships
  - a. Goal: Providing review of state and local agency policy and procedure implementation at the local level to promote development of laws and service standards that encourage community, child and family health, and safety.
    - i. Objectives
      - 1. Focus on collaboration, relationship building, advocacy
      - 2. Look for partners who need an umbrella that fits
      - 3. Build relationships with DFS district managers
      - 4. Hire staff and stretch PAT to reach Rawlins and other communities where home visiting is needed telehealth might be a resource
- 4. Prevention
  - Goal: Supporting the development of strong, healthy families and communities, strengthening families and protective factors in communities
    - i. Objectives:
      - 1. Identify data available from other entities DFS, WDH, DOC, WYSA
      - 2. Identify measures for success (process measures, recommendations, policy evaluation, etc.)
      - 3. Set goals with baseline measures

### **Full Panel Meetings**

	<u>Date</u>	Meeting Type	Number of Attendees
•	8/2/2018	Conference Call	10
•	9/13/2018	In-person, Cheyenne	11
•	11/1/2018	Conference Call	9
•	12/13/2018	In-person	12
•	3/7/2018	Conference Call	6
•	4/11/2018	In-person	11
•	6/12/2018	In-person	14

The WyCRP elects officers to serve on the Executive Committee in the Spring of each year. In odd numbered years, the positions of Chair and Treasurer are chosen. In the Spring of 2019, the Panel elected Emily Quarterman Genoff to serve as Chair and Charla Ricciardi as Treasurer, each for 2-year terms. Because the position of Vice Chair was vacated by Emily Quarterman Genoff, the Panel elected Jana Conine to complete the remainder of the term. Vice Chair and Secretary will be elected at the Spring meeting in 2020.

(Panel Meeting Minutes are public on our website at www.wycrp.org)

### **2018-2019 Annual Report Executive Summary**

The Wyoming Citizen Review Panel (WyCRP) partners with the Wyoming Department of Family (DFS) Services, Wyoming Department of Corrections, law enforcement, mental health and substance abuse professionals, educators, child advocates, attorneys and judges to promote the safety, permanency, and well-being of Wyoming children and families.

This annual report covers the period from July 1, 2018 to June 30, 2019, except where otherwise indicated. The purpose of this report is to provide an overview of substantive activities that have taken place during the past 12 months specific to child abuse and neglect in Wyoming and to identify strengths and opportunities for systemic improvement.

In July 2016, the Wyoming Department of Family Services participated in the third round of the Federal Child and Family Services Review (CFSR). This review measured safety, permanency, and well-being of children and families. The CFSR identified strengths and areas needing improvement. Based on these results, DFS has submitted a Program Improvement Plan (PIP) to the federal government, which was approved in October 2018. Implementation of the PIP will continue over the next three years. Additionally, development of the Child and Family Services Plan (CFSP; also known as the "5-year Plan") began in February 2019.

## **2018-2019 Annual Report**

The WyCRP continues to witness improvement in agency policy and process initiated through the CFSR and PIP implementation process. Even with ongoing organizational and environmental change, this trajectory carried to its conclusion through the combination of the PIP and the 5-year Plan will reduce or resolve issues challenging our state's systems of care and justice for decades:

- Timeliness and permanency of placements,
- Consistency of processes between jurisdictions and offices,
- Fidelity to proven models.

In the current year, the WyCRP staff and Panel members worked with agency and state partners to support implementation of the PIP and development of the CFSP. The WyCRP administered the Children's Justice Act Task Force, which conducts case file reviews of child maltreatment fatalities and major injuries; partnered on development of a Wyoming Kinship Navigator Program; helped build capacity in the Foster Care system for hard to place youth; and partnered in the Drug Endangered Children training initiative with the Wyoming Children's Trust Fund and the Wyoming Children's Justice Project. We believe all of these efforts will contribute to improved outcomes in the Child Protection System as a whole.

The major activities of the WyCRP are determined by a contract with DFS. Some programs and partnerships are undertaken in support of our mission and goals identified through strategic planning.

### Program Improvement Plan (PIP)

The Department of Family Services (DFS) is Wyoming's child protective services (CPS) agency. As recognized in the 2008 Legislative Program Evaluation of Wyoming's CPS program: "An effective child protection system does not rely solely on the efforts of DFS. An incident may involve many parties: other state agencies, professional and non-professional reporters, law enforcement personnel, public and mental health agencies, prosecuting and defense attorneys, judges, guardians ad litem, and court-appointed special advocates, schools and service providers." Meaningful improvements to systems require a shared purpose, common vision, and deliberate, focused and coordinated efforts of all stakeholders. The WyCRP is proud to support the efforts of all stakeholders in improving outcomes for children and families.

DFS submitted a plan to address areas of need identified in the CFSR to the federal Children's Bureau. This Program Improvement Plan is known as the PIP. The plan was approved in October of 2018 and implementation began immediately. The WyCRP has been supporting PIP efforts since last May, by assisting in the measurement process. WyCRP provides on-site logistics support for PIP measurement by scheduling and facilitating interviews with case participants in randomly selected cases in each judicial district throughout the state. Initially, WyCRP contacted all case participants and scheduled all interviews. As the PIP measurement process was refined, it was determined that it's more efficient for field staff to set up interviews. WyCRP staff and Panel members continue to

provide on-site support for case participant interviews throughout the state.

### Child and Family Services Plan (CFSP)

In February 2019, DFS began the process of developing the CFSP, otherwise known as the "5-year Plan" to support the work being done with the PIP and establish the strategic priorities of the agency in the coming years.. WyCRP staff participated in various stakeholder meetings and acted as an independent third party to encourage candid feedback from former parents, foster parents, and other stakeholders involved with the Child Protection System. Survey forms were mailed to case participants with postage paid envelopes addressed to WyCRP in addition to the option for online form submittal. Once received, survey forms were de-identified and data was entered through an online portal by WyCRP staff. WyCRP will continue to be involved in and support the development and implementation of the CFSP.

### Continuous Quality Improvement (CQI)

Continuous Quality Improvement (CQI), is an approach to quality management that builds upon traditional quality assurance methods by emphasizing the organization and systems: focuses on "process" rather than the individual; recognizes both internal and external "customers"; promotes the need for objective data to analyze and improve processes. Source: Graham, N.O. *Quality in Health Care* (1995)

Key elements of Continuous Quality Improvement:

- Accountability,
- Driven by good management...not crisis,
- Driven by input from all levels of staff and stakeholders,
- Teamwork,
- Continuous review of progress.

### Goals of Continuous Quality Improvement:

- Guide quality operations,
- Ensuring a safe environment and high quality of service,
- Meet external standards and regulations,
- · Assist agency programs and services to meet annual goals and objectives.

The DFS quality improvement process involves a consistent team of social service program analysts, the CQI Supervisor, the policy and program manager, general program manager, and the WyCRP Executive Director. The purpose of the CQI meetings are multi-faceted and consist of reviewing the Annual Program Service Report (APSR) to monitor the progress of goals, objectives and interventions, to gather input and feedback from focus groups and stakeholder calls, and to analyze casefiles to ensure effective case management and policy development. WyCRP participated in the review of case files that focused on CQI efforts in the following areas:

Youth Involvement

Members of the CQI Team conducted a targeted review to assess participation from youth age 14 and older in the development of their transitional living plans and receiving youth rights information. In 2017, the team reviewed additional requirements which included youth having and being involved in case plans; youth being involved in developing the transitional living plans; youth having an appropriate Another Permanency Plan Living Arrangement permanency goal and if Another Permanency Plan Living Arrangement was the identified goal, the youth being 16 years or older; and ensuring youth were screened as a possible sex trafficking victim when required.

### Programs and Partnerships

The WyCRP fulfills its mission, in part, through collaborations with partner organizations. The cornerstone of interagency collaboration in systems of care is "the process of agencies and families joining together for the purpose of interdependent problem solving that focuses on improving services to children and families" (Hodges, Nesman, & Hernandez, 1999). WyCRP partners not only with DFS, but with many other entities focused on child welfare, particularly around primary prevention and early intervention. The Wyoming Children's Trust Fund (WCTF), Prevent Child Abuse Wyoming, and the Wyoming Children's Justice Project, among many others, are entities that WyCRP continues to connect with on projects. This serves to maximize resources and minimize duplication of efforts. Additionally, through this communication and cooperation, gaps in resources and barriers to accessing existing resources can be identified and addressed. While not exhaustive, partnership with and/or administration of the following programs highlight WyCRP activities beyond those required by the DFS contract.

### Parents As Teachers

WyCRP is one of two affiliates in Wyoming offering evidence-based home visiting services through the Parents as Teachers (PAT) model. The WyCRP affiliate operates in Laramie, Albany, and Sweetwater Counties. PAT provides direct, in-home support to families facing a variety of stressors known to put children and families at risk for crisis. Home visiting in general, and PAT specifically has been identified as one of the most promising methods for preventing children from coming into DFS custody and also for supporting families during reunification after being in care.

Since July 1, 2018, WyCRP has increased the number of Parent Educators from 3.5 FTE to the current 7 FTE and the number of families served from seventy (70) to one hundred twenty (120) in the three counties. WyCRP and Parents as Teachers National Center are excited that PAT was identified as one of the home visiting programs chosen by the Families First Prevention Services Act as a promising means to keep children at risk of coming into care in their homes. Families meeting these criteria are eligible for enrollment for services:

- Income </= 100% of the Federal Poverty Level for family size</li>
- Prior history with Child Protective Services, prior history with abuse/neglect (as a child or adult)
- Child with a developmental delay
- History of substance or alcohol abuse

- Tobacco user in the home
- Military service
- Low student achievement/no high school diploma
- Pregnant/parent under age 21

Families with children ages prenatal to 24 months meeting any of these criteria can be enrolled and services delivered up to age 36 months. In addition to the services provided to individual families, PAT is active in local communities through:

- Community activities
- Resource and Referral Networks
- The Wyoming Home Visiting Network

The WyCRP Parents as Teachers affiliate is eligible to become a "blue ribbon" affiliate and will begin a year long quality assurance process beginning in the fall of 2019. Once certified, the affiliate will have to maintain its standards of excellence and recertify every 5 years thereafter. The blue ribbon affiliate designation process is expected to take one year to complete.

More information on Parents as Teachers Model Quality and Fidelity Standards is included as an attachment to this report.

### **Drug Endangered Children**

In January 2017, the National Alliance for Drug Endangered Children, in coordination with DFS, focused Drug Endangered Children (DEC) efforts in Carbon County. The Carbon County DEC Alliance has become a model for interdisciplinary coordination and cooperation. They have adopted "Handle with Care" protocols as well as protocols for law enforcement officers interacting with possible drug offenses when children are present.

In August of 2018, DFS and the National Alliance for Drug Endangered Children offered an opportunity for professionals from law enforcement, child protection, education, mental health, and other service providers throughout the state to attend "train-the-trainer" in Douglas, Wyoming. Since then, several communities have started forming local DEC Alliances. Staff from WyCRP were among those receiving training.

The work of the DEC initiative is ongoing. WyCRP looks forward to continue partnering with the Wyoming Children's Trust Fund and Children's Justice Project to support this worthwhile endeavor. The Wyoming Children's Trust Fund (WCTF) is a Governor appointed board focused on primary and secondary abuse and neglect prevention efforts in Wyoming. The Board supports a variety of evidence informed projects throughout the state, focused on community-based efforts to strengthen families and increase resiliency. WyCRP works cooperatively with WCTF to maximize resources, minimize duplication of effort, and improve outcomes for children and families by supporting local communities.

The Children's Justice Project is a project of the Wyoming Supreme Court through a grant from the

Children's Bureau. The goal of the Children's Justice Project is to improve outcomes for abused and neglected children in Wyoming involved in the court system. Improvement is accomplished through timely hearings, legal representation for parents and children throughout the court process, and increased involvement of children and families. The work of the CJP, specifically reducing time to permanency in placement, is a core part of the PIP. The WyCRP communicates with CJP through a Panel member who also serves on the CJP Advisory and provides regular updates and information about activities across the two groups.

### **Kinship Navigator Program**

WyCRP is partnering with Wyoming 2-1-1 to create a comprehensive resource for kinship caregivers, usually grandparents. The program is in its infancy and will initially be rolled out in Laramie and Natrona Counties. WyCRP will provide support for evaluating the pilot programs through conducting focus groups with kinship caregivers and measuring the impact of the program on important metrics such as time to permanent placement.

### **Community Outreach**

One of the core functions of a Citizen Review Panel under CAPTA is outreach to communities. WyCRP fulfills this role through our website and social media as well as acting as an independent and neutral facilitator for focus groups and listening sessions for parents, foster parents, kinship caregivers, youth, and youth alumni involved with the child protection and juvenile services systems in Wyoming.

### Building Capacity in the Foster Care System for Hard-to-Place Youth

With the passage of the Families First Prevention Services Act in the Spring of 2018, states will need to increase options for such children to be placed in a home setting as an alternative to congregate care, or after being released from congregate care. WyCRP staff and Panel members partnered as co-facilitators of focus groups with foster parents in four locations throughout the state to find out what support would be needed for them start and/or continue offering foster placements to these hard to place youth. WyCRP looks forward to future collaboration to increase capacity for home-based placements. Some of our Panel members include those with lived experience as foster parents and former foster youth, which makes WyCRP uniquely qualified to assist with this important project. DFS is working with the Capacity Building Center for States (a contractor with the Children's Bureau), to increase capacity for providing in-home, family-based care for "hard to place" youth in Wyoming. Youth with behavioral issues, children with significant medical needs, children who are sexually reactive, children with significant developmental delays, and adolescents are considered hard to place.

"The potential possibilities of any child are the most intriguing and stimulating in all creation." -- Ray L. Wilbur, Third President of Stanford University

### Children's Justice Act Task Force and Child Maltreatment Fatality and Major Injury Review

Administration of the Wyoming Children's Justice Act (CJA) Task Force is one of the requirements of the contract between WyCRP and DFS, the recipient of federal funds for the Children's Justice Act, under section 107 of CAPTA. These funds are intended to improve the investigation, prosecution, administration, and judicial handling of child abuse and neglect cases. The Task Force is mandated as part of the Children's Justice Act, and has specific responsibilities, such as conducting a data-driven 3-year assessment, which guides the activities and use of funds for the CJA grant. The Task Force has specific required membership, such as law enforcement, judges, defense and prosecuting attorneys, parent representatives, medical and mental health professionals, and child protection professionals, among others.

In Wyoming, one of the primary activities of the Task Force is to conduct case file reviews of all cases of fatality and major injury as defined by DFS policy which are the result of substantiated abuse or neglect and those that occur while children and youth are in protective custody of the state. The Task Force reviews cases in order to make recommendations as part of the 3-year assessment to improve the investigation and prosecution of child abuse and neglect cases. The Task Force is a multidisciplinary team and as such, some members focus on primary and secondary prevention professionally. Risk factors and trends identified during reviews are shared with and used by prevention professionals to make decisions about prevention initiatives, though prevention, other than prevention of secondary trauma, is not a focus of the Task Force.

In calendar year 2018, the Task Force convened in April, June, September and December. During these meetings, a total of eight (8) cases of child fatality and major injury resulting from child maltreatment were reviewed, affecting Wyoming children ages 0-17. \*\*Please note that the data gathered from the Task Force follows the calendar year.

Each member of the Task Force maintains strict confidentiality regarding the identities and personal information of individuals involved with child maltreatment fatality and major injury cases.

### <u>Identified Trends in Risk Factors from Cases Reviewed</u>

- Substance abuse by caregivers
- Unrelated males in household

Because of the small sample of reviews completed in 2018, these risk factors should not be viewed as representative of risks and trends in the state generally. The only very consistent risk factor identified in 2018 was substance abuse by caregivers; identified in 6 of the 8 cases reviewed. DFS has worked hard to ensure that the Task Force will have access to complete case files for all cases that they are required to review in the future to make sure the Task Force has access to adequate data to make recommendations and fulfill its obligation to complete the three-year assessment. Once case file reviews are complete, WyCRP staff enters the information into the Fatality Review Case Reporting System, which tracks non-natural child deaths nationally.

### **Action Plan**

As part of the current contract with DFS, the WyCRP is required to develop and implement an action plan, based on needs, trends, and risk factors identified by the Children's Justice Act (CJA) Task Force, which is the entity responsible for conducting child maltreatment fatality and major injury reviews. The CJA Task Force operates as a program under the umbrella of WyCRP and makes case-specific and systemic recommendations based on case file reviews.

The Task Force reviewed a total of eight cases in 2018, and of those, the most common trend and risk factor identified was related to alcohol and substance abuse (six of eight cases). WCTF has made funding available to local communities to improve local child protection teams. Eleven counties were awarded funds for this purpose and most chose to implement Drug-Endangered Children (DEC) Alliances as their focus.

DFS at the state level has supported the DEC Initiative in the past few years by providing opportunities for training of individuals throughout the state to become DEC certified trainers.

In alignment with the purpose of the CJA, and in order to support coordinated efforts and maximize resources, WyCRP will provide financial support to WCTF grantees to encourage participation in the annual Joint Symposium on Children and Youth held in June. Because the common risk factor across cases of fatality and major injury cases reviewed was substance abuse the WyCRP also will host a "meet and greet" to allow grantees to hear from the well-developed DEC alliance in Carbon County and interact with experienced CPT participants from throughout Wyoming. Goodwill Industries of Wyoming has matched funds offered by WyCRP to increase the opportunities for local community representatives to attend the Symposium and DEC "meet and greet." The meet and greet featured speakers from the Carbon County DEC alliance and was attended by 19 members of local child protection teams.

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### **2018 Child Maltreatment Statistics**

Child maltreatment is the abuse and neglect that occurs in children under 18 years of age. It includes all types of physical and/or emotional ill-treatment, sexual abuse, neglect, negligence and commercial or other exploitation, which results in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power. There were 1569 total substantiations of child maltreatment, affecting 997 children 18 and under at the time of allegation in 2018. All 23 counties and the Wind River Reservation having at least one substantiated incident of child maltreatment. Data Source: WYCAPS

Table 1 shows Child Maltreatment statistics for children ages 18 and under for the calendar year 2018 in Wyoming

Table 1

Allegation Type	Total Substantiated Allegation	% Total Substantiated Allegation	Number of Child(ren)	% Total Child(ren)	Average Age When Allegation Made (Years)
NEGLECT	969	61.8%	620	62.2%	7
ABUSE	437	27.9%	252	25.3%	8
SEXUAL ABUSE	63	4.0%	54	5.4%	11
EDUCATIONAL NEGLECT	35	2.2%	30	3.0%	11
MEDICAL NEGLECT	13	0.8%	4	0.4%	5
PHYSICAL ABUSE	11	0.7%	10	1.0%	12
LACK SUPERVISION	11	0.7%	10	1.0%	7
ABANDONMENT	9	0.6%	5	0.5%	5
PHYSICAL INJURY	7	0.4%	6	0.6%	7
MALNUTRITION	6	0.4%	2	0.2%	1
MENTAL INJURY	3	0.2%	1	0.1%	12
DANGEROUS ACT	3	0.2%	1	0.1%	12
EMOTIONAL ABUSE	2	0.1%	2	0.2%	10
	-				

Figure 1 shows the Child Maltreatment statistics for children ages 18 and under by type for calendar year 2018 for Wyoming

Figure 1

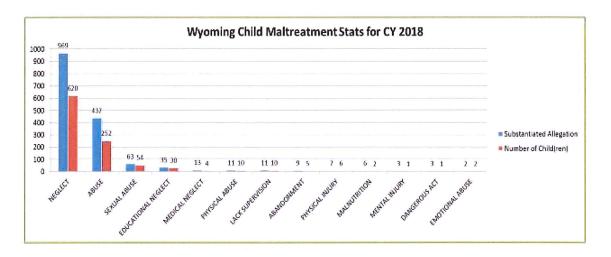
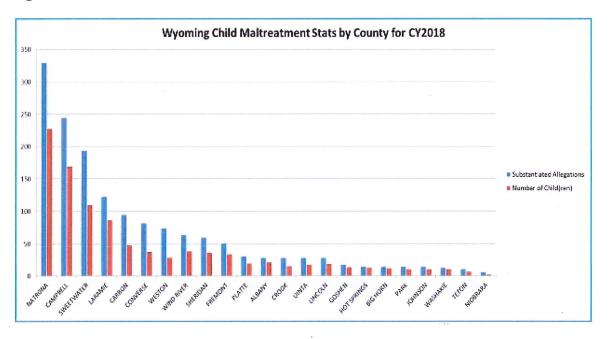


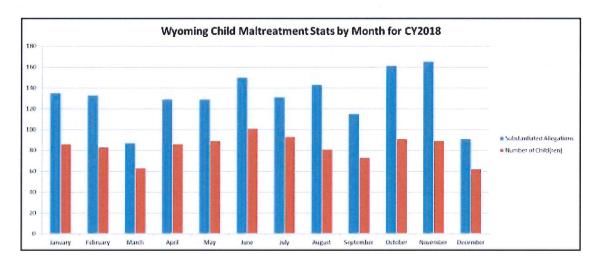
Figure 2 shows the Child Maltreatment statistics for children ages 18 and under  $\$ by county for calendar year 2018 for Wyoming

Figure 2



# Figure 3 shows the Child Maltreatment statistics for children ages 18 and under $\,$ by month for calendar year 2018 for Wyoming

Figure 3



### Recommendations for Systemic Improvements in Wyoming's Child Protection System

These recommendations for improvement to Wyoming's Child Protective Services system are offered understanding that the CPS is large and complex and includes more than DFS. As previously stated, it is the intent of the WyCRP to work collaboratively to implement these recommendations. Further, these recommendations acknowledge the work currently being done as part of the PIP and development of the CFSP, which addresses building on strengths and acting on opportunities for improvement identified during the CFSR. These recommendations have also been developed with possible future implementation of the Families First Prevention Services Act in mind. All recommendations are intended to compliment past and present efforts within the state, by all stakeholders involved in the child protection system.

A 2018 National Conference of Death Review Teams offered the following guidelines (courtesy of the New Hampshire Fatality Review Team) for creating recommendations:

- Recommendations should be specific,
- Recommendations should be based on sound science and/or best practices,
- Recommendations should be feasible and take into consideration the resources necessary for implementation,
- Recommendations should be sustainable
- Political issues should be considered,
- · Risks and unintended consequences should be considered.

The following recommendations are offered with these guidelines in mind:

- 1) Ensure consistency in case management across districts and throughout the life of each case, including but not limited to timely completion of safety and risk assessments; child/family involvement in case planning; consistency in multidisciplinary team (MDT) meetings and actions; and consistency in child protection team coordination.
  - a) Action Step: Consider utilizing the Wyoming Practice Model philosophy throughout the life of a case
  - b) Action Step: Continue with implementation and training for the Wyoming Practice Model; including measuring model fidelity
  - Action Step: Continue with Continuous Quality Improvement (CQI) activities and act on findings from longitudinal data to address concerns and reinforce strengths identified
  - d) Action Step: In cooperation with Wyoming Courts, continue with training and support for Multidisciplinary Team (MDT) coordinators
  - e) Action Step: Gather data on outcomes from MDT activities and act to address concerns and reinforce strengths consistently throughout the state
  - f) Action Step: Continue with Program Improvement Plan (PIP) implementation and measurement and development of CFSP aligned with the PIP

- 2) Improve outcomes for children in the Child Protection System
  - a) Action Step: Consider changes to policy and/or procedure when there are multiple reports of child maltreatment for a family
  - b) Action Step: Invest in Prevention and Early Intervention service delivery options aimed at keeping children in their homes safely
  - c) Action Step: Continue with implementation of PIP, focusing on safety and risk, and decreased time to permanent placement
  - d) Action Step: Consider increased utilization of wrap-around services for children in foster care and throughout the reunification process; consider standardizing how wrap-around services are offered
- 3) Increase Capacity in the Foster Care System, especially for hard-to-place youth
  - a) Action Step: Expand Together Facing the Challenge (TFTC) to all foster parents
  - b) Action Step: Continue providing training and support to foster care coordinators and foster caregivers
  - c) Action Step: Explore options for greater utilization of kinship placements
- 4) Improve Coordination between and among all stakeholders in the Child Welfare at the state and community level.
  - Action Step: Hold regular meetings with all partners and stakeholders to share information about current and planned projects, funding opportunities, needs and concerns
  - b) Action Step: Implement strategies for consistent communication with all stakeholders regarding changes to federal or state policy, changes to organizational structures and personnel, successes, and challenges that need coordination and cooperation with partners to address
  - c) Action: Facilitate, coordinate and cooperation at the community level
- 5) As soon as possible, invest in a replacement for WYCAPS

### **Conclusion**

Once again, the WyCRP believes it's important to emphasize that improved outcomes for children and families involved in the Child Protection System can only occur when all stakeholders in child welfare work together and take action to make improvements. While many of these recommendations focus on activities and projects currently taking place within DFS, all partners and stakeholders must coordinate resources and efforts to support meaningful, sustainable improvement. Per federal mandate, this report focuses on systemic issues that affect the entire state. It's important to note that children and families will get the most benefit when the improvements to the system as a whole translate to improvements in the essential functions of child protection in local communities. The WyCRP, WCTF, PCA of Wyoming, Wyoming Children's Justice Project, Wyoming Drug Endangered Children Initiative, and a host of state and local service providers can and must support local communities in coordinating efforts to empower families and protect children.

### Parents as Teachers Quality and Fidelity Standards Attachment

The Parents as Teachers model is an evidence-based early childhood home visiting model that builds strong communities, thriving families, and children who are healthy, safe and ready to learn.

Central to the PAT model are 20 model fidelity requirements, called Essential Requirements., which cover affiliate leadership, staffing, services to families, and evaluation. In order to become a PAT affiliate, an organization must be designed to meet these Essential Requirements. Annually, affiliates report implementation and service data that address the Essential Requirements and this data is used to confirm that the affiliate is meeting or exceeding the minimum levels for each Essential Requirement.

In addition to the Essential Requirements, Parents as Teachers has Quality Standards that provide a comprehensive blueprint for high quality Parents as Teachers services.

Together, the Essential Requirements and Quality Standards form the basis for the Parents as Teachers Quality Endorsement and Improvement Process (QEIP) which confirms affiliate quality and facilitates continuous quality improvement. PAT affiliates are required to engage in the Quality Endorsement and Improvement Process in their fourth year of implementation and every five years thereafter.

To earn the Quality Endorsement, affiliates must complete a comprehensive self-study and review process that demonstrates they are meeting or exceeding the Parents as Teachers Essential Requirements, along with at least 75 of the 100 Quality Standards.

Programs that earn the Quality Endorsement are recognized by the national Parents as Teachers office as exemplary Blue Ribbon Affiliates, delivering high-quality services to children and families.

### ment Criteria

Essential Requirement	Measurement Criteria
1. Affiliates provide at least two years of services to families with children between prenatal and kindergarten entry.	An affiliate is designed to provide at least two years of services to families with children between prenatal and kindergarten entry.
2. The minimum qualifications for parent educators are a high school diploma or equivalency and two years' previous supervised work experience with young children and/or parents	100% of an affiliate's parent educators have at least a high school diploma, GED, or equivalent degree in countries outside the United States.
3. Each affiliate has an advisory committee that meets at least every six months. (It can be part of a larger committee, community network, or coalition as long as the group includes a regular focus on the Parents as Teachers affiliate).	An affiliate conducted two advisory committee meetings during the program year covered by the most recent Annual Performance Report (APR).

4. Each month, parent educators working more than .5 FTE participate in a minimum of two hours of individual reflective supervision and a minimum of two hours of staff meetings and parent educators working .5 FTE or less participate in a minimum of one hour of reflective supervision and two hours of staff meetings. In order to support high-quality services to families, this requirement includes supervisors who carry a caseload.

On average, parent educators working more than .5 FTE and supervisors that carry a caseload equivalent to more than .5 FTE received at least 75% of the required individual reflective supervision hours per month (at least 1.5 hours per month). On average, parent educators working .5 FTE or less and supervisors who carry a caseload equivalent to .5 FTE or less received at least 75% of the required individual reflective supervision hours per month (at least .75 hours per month). At least 18 hours of staff meetings occurred during the program year covered by the most recent APR.

5. Each supervisor, mentor or lead

100% of an affiliate's 1.0 FTE

parent educator is assigned no more than 12 parent educators, regardless of whether the parent educators are full-time or part-time employees. The number of parent educators assigned to the supervisors is adjusted proportionately when the supervisor is not full-time. For example, a .75 FTE supervisor would have a maximum of nine parent educators; a .5 FTE would have a maximum of six parent educators; a .25 FTE would have a maximum of three parent educators.

supervisors are assigned a maximum of 12 parent educators.

6. All new parent educators in an organization who will deliver Parents as Teachers services to families attend the Foundational and Model Implementation Trainings before delivering Parents as Teachers; new supervisors attend both Foundational and Model Implementation Trainings.

100% of parent educators and supervisors have attended the required PAT trainings.

7. Parent educators obtain competency-based professional development and training and renew certification with the national office annually.

100% of model affiliate parent educators are up to date with their certification.

8. Parent educators complete and document a family-centered assessment within 90 days of enrollment and then at least annually thereafter, using a method that addresses the Parent as Teachers required areas.

Family-centered assessment was conducted using a PATapproved method. At least 60% of families enrolled more than 90 days had an initial family-centered assessment completed within 90 days of enrollment during the program year covered by the most recent APR. At least 60% of families that received at least one personal visit had completed

	a family-centered assessment in the program year covered by the most recent APR.
9. Parent educators develop and document goals with each family they serve.	At least 60% of the families that received at least one personal visit had at least one documented goal during the program year covered by the most recent APR.
10.Parent educators use the Foundational Personal Visit Plans and Personal Visit Planning Guide from the Foundational Curriculum to design and deliver personal visits to families.	Parent educators plan for each visit, documenting the planning process in a Foundational Personal Visit Plan or Personal Visit Planning Guide.
11. Families with one or fewer stressors receive at least 12 personal visits annually and families with two or more stressors receive at least 24 personal visits annually.	75% of the required number of visits in the program year covered by the most recent APR. At least 60% of families with two or more stressors receive at least 75% of the required number of visits in the program year covered by the most recent APR.
12.Full-time first year parent educators complete no more than 48 visits per month during their first year and full-time parent educators in their second year and beyond complete no more than 60 visits per month. The number of visits completed monthly is adjusted proportionately when a parent educator is part-time. In addition, a number of factors need to be considered when establishing the maximum number of visits completed monthly, including: staff responsibilities, travel time for visits, and data collection responsibilities.	Full-time first year parent educators complete no more than 48 visits per month in the program year covered by the most recent APR. Full-time parent educators in their second year and beyond complete no more than 60 visits per month in the program year covered by the most recent APR.

13.Affiliates deliver at least 12 group connections across the program year.	At least nine of the 12 (75%) required group connections were delivered in the program year covered by the most recent APR.
14. Child health screening is completed by 7 months of age, or within 90 days of enrollment, and at least annually thereafter. Completion of the Child Health Record, which consists of health status, safety, vision, and hearing elements, constitutes a complete health screening.	At least 60% of children received a complete child health screening by 7 months of age or within 90 days of enrollment in the program year covered by the most recent APR. At least 60% of children received a complete annual child health screening in the program year covered by the most recent APR.
15. Child developmental screening takes place for all children within 90 days of enrollment or birth, and then at least annually thereafter.  Developmental domains that require screening include language, cognitive, social-emotional, and motor development.	screening within 90 days of enrollment or birth in the program year covered by the most recent APR. At least 60% of children received a complete annual child developmental screening in the program year covered by the most recent APR.
16.Child developmental surveillance takes place during each personal visit and is recorded after each personal visit, using the Milestones to monitor child development.	Parent educators review and update (as applicable) the Milestones record for each enrolled child after each visit.
17. Parent educators connect families to resources that help them reach their goals and address their needs.	At least 60% of families that received at least one personal visit were connected by their parent educator to at least one community resource in the program year covered by the most recent APR.
18.At least annually, the affiliate gathers and summarizes feedback from families about the services	An affiliate gathered and summarized feedback from families about the services they have received at least

they've received, using the results for once during the program year covered program improvement. by the most recent APR and used the results for program improvement. 19. The affiliate annually reports data An affiliate submitted the most recent on service delivery and program APR and participated in the Quality implementation through the APR; **Endorsement and Improvement** affiliates use data in an ongoing way Process when designated or selected by Parents as Teachers National for purposes of continuous quality improvement, including participating Center. in the Quality Endorsement and Improvement Process every five years. 20.Programs will pick two\* outcomes At least 60% of eligible families to measure with eligible families. One annually participate in an assessment of parenting skills, practices, capacity, outcome will be from a list of or stress using an approved tool. At approved tools that measure parenting skills, practices, capacity, or least one additional approved outcome measure is assessed and stress assessment and the second reported for eligible families. outcome will be from an approved list Programs report in the APR how they of measures. It is important to select outcomes that align with the program are using the data from a set of goals. Programs will also report on the response options (e.g., continuous APR how they are using the data. quality improvement or advocacy).

High quality Parents as Teachers affiliates regularly monitor compliance with the Essential Requirements and pursue continuous quality improvement by using a variety of tools, such as:

- Affiliate Quality Assurance Blueprint: Describes necessary quality assurance activities, along with who completes the activities and at what frequency. This blueprint functions as an ongoing tracking tool, helping the supervisor monitor fidelity and implementation quality.
- **Personal Visit Observation Tool**: Used to assess and record content and delivery of a Parents as Teachers personal visit.

- **Group Connection Observation Tool**: Used to assess and record content and delivery of a Parents as Teachers group connection.
- **File Review Tool**: Outlines specific items and content that should be in a family file.
- Quality Endorsement and Improvement Process (QEIP) Manual: Provides the Quality Standards along with comprehensive information about and instructions for the three steps of the QEIP.

The WyCRP uses all these tools to maintain quality standards consistent with eligibility for Blue Ribbon affiliate status.

The WyCRP affiliate has met or exceeded all Essential Requirements standards for 2017 and 2018 program years, and will report having met or exceeded Essential Requirements quality standards for the 2019 program year in the APR due in August of 2019.

<sup>\*</sup> Sources- Annual Program Report data and Parents as Teachers National Center Standards

