



# ASSEMBLY STANDING COMMITTEE ON CHILDREN AND FAMILIES ASSEMBLY STANDING COMMITTEE ON OVERSIGHT, ANALYSIS AND INVESTIGATION SENATE STANDING COMMITTEE ON CHILDREN AND FAMILIES

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New York City Child Protective Practices

Testimony by
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Good morning Chairs Lupardo, Hevesi and Felder and members of the Children and Families Committee and the Oversight, Analysis and Investigation Committee. I am Ronald E. Richter, Commissioner of the New York City Administration for Children's Services (ACS). With me today is Gilbert Taylor, who is the Executive Deputy Commissioner for the Division of Child Protection and who served as the Deputy Commissioner for Family Court Legal Services from 2008 to 2011. Thank you for the opportunity to testify about New York City's child welfare practice.

New York City oversees one of the largest child welfare systems in the country. This year, over 1,200 Child Protective Specialists, supported by over 300 supervisors, 78 Child Protective Mangers and over 160 investigative and clinical consultations address approximately 55,000 allegations of abuse or neglect. Each CPS engages in a challenging balance when investigating an allegation and supporting a family, while ensuring the safety of the child. The decisions that CPS are required to make can be both life changing and traumatizing and the role requires intelligence, resilience, strength, courage and calmness.

Over the past seven years, with the help of many partners, ACS has refined our approach to child protection – we have bolstered our ability to investigate allegations of maltreatment, strengthened the support we provide to frontline workers, hired staff with specialized expertise, overhauled our training curriculum with the support of numerous national experts, and enhanced our oversight and accountability mechanisms. These changes have allowed ACS to become more adept at conducting expeditious and comprehensive investigations in order to protect children and youth and support families.

Child welfare work sits squarely at the intersection of two sometimes competing but otherwise complimentary professions: law and social work. Our work requires both the fact-gatherings skills of law enforcement and the empathic, helping skills of social work. As such, our agency has been simultaneously criticized for removing children too quickly or not quickly enough. While this fall's Grand Jury report asserted that child welfare practitioners in Brooklyn err on the side of preserving families, last week's New Yorker magazine lamented precisely the opposite: that child welfare workers across the country err on the side of removing children, "choosing a knowable tragedy, the separation of parent and child, in order to prevent an unknowable one."

Our Child Protective Specialists carry out one of the toughest jobs in the City. I can assure you that no CPS worker possesses a crystal ball to see into the future of a given family. But each CPS does have the training, skills, and compassion to investigate and address allegations of child maltreatment.

#### **Staff Support and Training**

I cannot speak about New York City's strides in child protection without first acknowledging the extraordinary challenges that our Child Protective Specialists face every day. They make difficult decisions about whether children can remain safely at home or whether we must take other protective measures, including the most extreme action of bringing children into the care and custody of the City. When I was appointed Commissioner in 2011, the first commitment I made was to strengthen the support that we provide to our frontline child protective staff.

## **Worker Safety**

Last year, New York State passed a law offering greater protection for CPS workers who are assaulted while doing their difficult jobs. We are enormously grateful to the Legislature, including Senators Golden and Savino and Assembly Members Paulin and Lentol, as well as the Children and Families, and Codes Committees, for supporting the law that makes it a felony to assault a social service worker.

In addition, with the help of the Assembly in 2008, child protective services was authorized to access the criminal history records of individuals residing with children who are the subject of an abuse or neglect report. This change allows our child protective staff to access information regarding past criminal activity in a home. The information may connect a past history of violence in a home with the current allegation of abuse, and the information may also protect frontline staff.

# **CPS Support**

While the physical safety of our Child Protective Specialists is paramount, we also focus on the emotional well-being of our staff. CPS face extraordinarily difficult situations on a daily basis and are vulnerable to stress, depression, and vicarious trauma - the psychological

and physical reactions that can result from long-term exposure to the suffering of others.

ACS partnered with the NYU Langone Medical Center in developing a training curriculum to assist frontline staff coping with these issues. This curriculum, called "the "Resilience Alliance Training," is designed to increase satisfaction, optimism, resilience, and social support, while reducing burnout. Over 350 Child Protective Specialists participated in Resilience Alliance Training.

In the past several years, the attrition rate of our child protective workers has decreased notably: from 11% in 2011, to 7% in 2012, and most recently, to 2.5% in 2013. As we continue to support and train our child protective staff, we are hopeful that attrition rates will remain low. As a result of our improvement in retaining staff as well as our prospective hiring of child protective specialists, each New York City case worker carries approximately 10 cases, which is one of the lowest caseloads in New York State and the nation.

#### **CPS Training and Supervision**

Supporting staff also means ensuring that we are hiring people who are more likely to succeed in the job: that we are screening candidates for the skills required to do this work, properly training those we hire, and providing consistent supervision and professional feedback. In 2008, ACS developed a new training curriculum to enhance CPS' investigative skills regarding safety and risk assessment. Since it was implemented in September 2008, all new and current staff have been trained on the curriculum. We have also developed a Casework Practice Guide, which provides uniform guidance for child protective staff through each step of an investigation and follow up: from the initiation of an investigation, through interview and assessment techniques, appropriate and available services, supervision, and quality assurance. Over the past several years, we have issued numerous Child Safety Alerts to supplement the Guide while it has been updated. A new, updated version will be issued later this month

We have also recently developed a Child-Parent Template to guide the CPS through a thorough assessment of safety and risk, assuring the safety of each child at the earliest stages of an investigation. The template prompts CPS to ask specific questions of the child and the parent to elicit information relevant to the safety of the child that will be included in documented case notes of the investigation.

ACS has also solidified the structure and consistency of standing and recurring supervision for Child Protective staff. Supervision is now uniform and allows a comprehensive approach to formal and informal supervision that provides a basic framework for supportive, educational and administrative supervision. Child protective staff receive one-on-one and group supervision bi-weekly. As of October 2013, 97% of supervisory sessions are being completed. There are also monthly area meetings held within zones to discuss agency topics, provide training or invite local organizations to present on services that can assist families and children.

## **Hiring Specialized Staff**

In addition to refining how we hire, train and supervise child protective professionals, we have resourced CPS frontline staff with expertise from various disciplines through the use of consultants co-located in the DCP borough offices. These consultants assist CPS staff with investigations every day.

#### **Investigative Expertise**

Since its inception in 2006, the Investigative Consultant (IC) Program has become integral to our child protective investigative practice in the agency. Through this program, we have hired retired law enforcement professionals to assist CPS staff with various investigative activities on their cases including locating at-risk children and families, interviewing subjects, fact gathering on complex cases, coordinating our joint response with Law Enforcement on some high risk cases, responding to fatalities, and pursuing unexplored leads on cases. In the past seven years, the program has successfully brought critical investigative expertise to our child protective work. In 2012 alone, our ICs conducted over 51,000 consultations and assisted CPS in locating 2,646 people. In January of 2012, we hired an additional 38 investigators, and another class of 18 investigators began in March, bringing the total number of Investigative Consultants on staff today to 109. We are budgeted for a total of 117 and are in the process of hiring eight additional ICs.

#### **Clinical Expertise**

Through the Clinical Consultation Program (CCP), ACS has provided on-site clinical expertise to front line CPS staff to address some of the most challenging issues our CPS encounter during their child protective investigations. This consultancy has supported front line staff in safety and risk assessment and decision-making on their cases. The consultants offer child-centered, strengths-based, trauma-informed consultations that take into account the needs of the whole family and help CPS staff to identify more tailored support services for the families with whom we work. For example, a two year old boy came to our attention because of a fractured arm. The mother's explanation, that her son had been pushed down stairs by his cousin, was found to be both credible and consistent with the explanation given by others. However, because the child and family were known to ACS for a previous concern, and because the caseworker's interview with the mother revealed a history of self-mutilation and suicidal thoughts, the caseworker requested a mental health consultation. The consultation resulted in the CPS referring the mother for both mental health and parenting services.

Subsequently, the mother began treatment for depression, enrolled her young son in day care, got a job and is pursing professional training.

Fourteen clinical consultation teams are based in DCP borough offices throughout the City and in 2012, these teams provided 19,983 consultations. This year, we are on track to provide well over 20,000.

#### **Substance Abuse Expertise**

Co-located CASACs (Certified Alcohol and Substance Abuse Counselors) are available in the DCP borough offices through a cross-system collaboration between our agency and the New York State Office of Alcoholism and Substance Abuse Services (OASAS), who oversee the substance abuse counselors in each of the ACS Borough Offices. CASACs from various provider agencies are based in each borough office and conduct assessments of and provide treatment to families struggling with substance misuse and addiction. We partner with Federal, State and City Agencies to expand the use of Recovery Coaches to assist clients to stay in treatment and facilitate long-term recovery from addictive illness. Our agency's CASAC's also provide staff with assistance in understanding and

navigating the health insurance requirements for client treatment. This year, the substance abuse counselors have provided services to over 2,000 families.

Our agency's Mental Health Evaluation Program (MHEP) contracts with providers to perform psychiatric and psychological evaluations for children and/or family members involved in the child welfare system at no charge to the family in cases where investigations raise questions of safety. These evaluations may be court ordered or may be indpendently requested by CPS staff as needed on active cases. The program provides on average 100 assessments per month.

#### **Specialized Trainings**

As part of our efforts to enhance our investigative and assessment practice, ACS has developed and delivered specialized training to front line CPS staff to support them in their work with medically fragile clients or with clients who have special medical needs. Our agency has developed and distributed a new Special Medical Needs Policy to all front line CPS staff to raise awareness of the needs of these children with special needs and to ensure that they and their families are connected to the most appropriate services to meet their unique needs. Our work in this area was done in partnership with the Coalition for Medically Fragile Children. We developed a training curriculum which included the production of a training video as well as the creation of a CPS Desk Aid and Pocket Guide to assist CPS in identifying, assessing, and planning for the safety of medically fragile children. As part of this work, ACS has hired medical consultants who are licensed Nurse Practitioners who are colocated in the DCP borough offices and available to front line CPS staff to assist with these cases. There are now twelve full-time medical consultants on staff.

New York City is also partnering with the State – as well as other jurisdictions – to identify best practices around identifying and serving young people who are at risk of commercial sexual exploitation. We have recently added staff with expertise in this area to our Children's Center, where children and youth enter our foster care system, as a resource for young people.

### **Quality Assurance Oversight**

Child protection and welfare practice are always works in progress. ACS is committed to seeking input from our colleagues outside the agency who are affected by our work, and from experts in other parts of the State and country who are working hard to serve children, youth and families. Varying, diverse perspectives can only enrich how we may improve the work we do on behalf of New York City's children, youth and families. That is always our goal.

Even with the rigorous training, policies, and programs in place, ACS remains vigilant about assessing our case practice. The agency's Division of Policy Planning and Measurement conducts a semi-annual case review and audit of 27 cases in each of the 18 geographic child protective zones in NYC; this deep dive involves almost 500 cases. The audits focus on case practice at different stages of the investigation, review the work of both child protective specialists and supervisors and identify best practices that should be replicated, as well as areas of practice that need to be further strengthened.

In addition to zone-based reviews, this year will be the 7<sup>th</sup> anniversary of ChildStat. Modeled after the NYPD's CompStat, ChildStat is an accountability process which convenes ACS leadership and staff from the child protective division to review and discuss active cases and performance data. In 2008, we implemented Foster Care Child Stat in which we and our provider agency partners take a close look at the cases of children who have come into foster care. And, beginning in 2011, building on the success of both ChildStat and Foster Care ChildStat, we implemented Preventive ChildStat, which involves an examination of randomly selected cases that are both known to the Division of Child Protection and preventive service agencies. ChildStat is an evaluation process and learning experience for both ACS leadership and the frontline staff. We broadcast each session via close circuit video link to all borough offices so that more staff can attend. I encourage any Legislators or staff interested in attending a ChildStat session to contact my office.

# Closing

ACS has made significant improvements to child protective practices over the last several years. Child welfare practitioners from across the country, in fact, throughout the world, have visited ACS to learn from our staff how to carry out the sensitive work of child

welfare with rigor, competence, and compassion. We sincerely appreciate you providing the opportunity for to share the important work we have been doing. We will continue to reach out to other jurisdictions and to share best practices as we further update and improve our practice. We appreciate our partnership with the New York State Legislature in carrying out this critical work. I am happy to address any questions that you may have.