Child Welfare

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Presentation Outline

- Differential Response is part of a 3 prong effort.
- Roll out of Strengthening, Preserving and Reunifying contracts.
- Work effort to improve practice; supporting Oregon Safety Model

Differential Response; part of a 3 prong effort

SB 964

Outward Facing Community Providers Local Service Gaps Proven Programs Internal Facing (OSM) Policy and Practice Family Engagement Best Practice to Impact Neglect

Foundation of Child Welfare Practice: Oregon Safety Model, Safe Family

DR

Screening - Intake - In Home Ongoing - Certification - Adoptions

Workload Staffing ICWA Compliance

Child Welfare is an interdependent system



5) DHS

Differential Response

Differential Response is the addition of alternative child welfare interventions that focus less on investigative fact finding and more on assessing and insuring child safety by helping the family identify their needs to keep their children safe.

Differential Response evolved out of the growing understanding that not all families need an investigative intervention to address child safety concerns. Earlier interventions that connect families with preventive, community based services can prevent further contact with the Child Welfare system.

A differential response model allows for the provision of preventative and early intervention services through the use of community based organizations. It also provides for a reconnection of the family to their community. The traditional investigative CPS response is used for the higher risk cases where significant state intervention is needed.



Differential Response

Children are safer and families are stronger when DHS and Communities work together to identify a families strengths and needs.

Differential Response is an addition to the Oregon's practice model, the Oregon Safety Model (OSM). The change will allow DHS to provide a two track response intervention to allegations of abuse and neglect.

- Traditional Track
- An Alternative Track

The agency is moving from the Differential Response Design process to developing an implementation plan. This will include an Implementation/Installation Team, an Advisory Group; Differential Response Subcommittees that will focus on issues such as screening of abuse reports, communication, assessment, staffing array, training and coaching, provider roles, family engagement, policy and procedure, and information technology.



Goals: Differential Response

In other states/counties that have implemented Differential Response:

- Families are engaged earlier in the case process.
- Families are more receptive and less resistant to child welfare involvement.
- Families report greater satisfaction with the outcome of services and agency involvement.
- Multiple tracks of intervention allows agency to tailor child welfare response to the family's needs.
- Reduction of the number of children in foster care.
- Decrease/mitigate generational trauma to reverse the dependence on high end state services.



GBB Investments: Differential Response

- Adds an alternative approach to child protection, known as "Differential Response" to the Oregon Safety Model.
- Allows state workers to conduct a family assessment, gauge the needs and strengths of the family, and engage them and community partners in outcomes that keep the family together, benefitting the family as a whole.
- Differential Response will not replace investigations or assistance when there is imminent danger or significant safety threats.
- In other states this approach has safely reduced costly foster placements and the associated trauma on the child and families.
- The service delivery innovation depends both on investment in culturally specific community-based services such as our <u>Strengthening</u>, <u>Preserving and Reunifying</u> <u>Families Programs</u>, as well as investment in adequate child welfare staffing, focused on serving more children safely in their own homes.



SB 964 – Strengthening, Preserving, and Reunifying Families

SB 964 – Strengthening, Preserving, and Reunifying

Families

- Senate Bill 964 (ORS 418.580) directed the Department of Human Services and county partners to implement Strengthening, Preserving, and Reunifying Families (SPRF) programs.
- Provide for family preservation and reunification services allowing children to remain with their families and in their homes when safe and appropriate.
- This effort compliments the work of the Coordinated Care Organizations and the future work of the Early Learning Council hubs, targeting children and families involved in the child welfare system.
- Local collaborations of interested stakeholders determine community strengths and service gaps and request funding targeted to specific outcomes focusing on keeping children safe and families together.
- These programs are an essential compliment to the implementation of Differential Response and supporting children being safely parented at home.



SB 964 Implementation To Date



- Sackson, Clackamas, Malheur, Multnomah (Alberta), Coos, Josephine and Umatilla
- Tillamook, Washington and Deschutes



SB 964 – Strengthening, Preserving, and Reunifying Families

The Department has expanded an array of contract investments thus far, including but not limited to the following:

- Life Skills Coaches / Home Visitors: Provides similar services as Navigators. (Umatilla, Josephine, Multnomah, Coos)
- Reconnecting Families: Specialists used to engage families and conduct relative searches for additional familial resources/placements. (Josephine, Jackson, Coos)
- Trauma Services and therapeutic services: Intensive services to trauma affected families and children. (Multnomah, Clackamas, Jackson)
- Family visitation that is different from our traditional family visitation: (Josephine, Jackson, Umatilla)
- Mentoring: Youth Transition Mentoring for youth not eligible for DHS Independent Living Program (Malheur)
- Intensive In-home Services: 24/7 availability, crisis prevention/intervention, medication management, skill building, therapeutic services. (Multnomah)



SB 964 – Strengthening, Preserving, and Reunifying Families

- Navigators: Specialists to help navigate social service agencies. (Multnomah, Clackamas, Coos)
- Parenting: Father, Culturally Specific, and Intensive parenting classes. (Multnomah)
- Parent Mentoring/Education: In-home, bi-lingual, available after work hours. Specialists to reinforce parenting behaviors, supportive services. (Clackamas, Umatilla, Josephine, Jackson, Multnomah, Coos)
- Relief Nursery: Daycare, parenting, support services. (Umatilla, Jackson, Coos, Malheur, Clackamas)
- A&D Treatment: Inpatient/Outpatient services that focus on multi-dimensional issues such as parenting, DV services, and a relief nursery. (Umatilla, Clackamas, Jackson)
- Housing: Short-term & Emergency Housing services. (Umatilla, Josephine, Jackson, Multnomah, Malheur, Clackamas, Coos)
- Front End Interventions: Specialists (Alcohol and Drug, Mental Health, Domestic Violence, and human service generalists) responding with CPS workers. (Clackamas, Umatilla, Josephine, Jackson, Malheur)



Oregon Safety Model

Work effort to improve practice; supporting Oregon Safety Model

Oregon Safety Model

- Working with the National Resource Center for Child Protective Services
- Piloting training followed up by intensive field consultation to reinforce consistent application in 6 counties
- Plans underway to expand training and intensive field consultation statewide

In conclusion.....

DHS continues to work to achieve community support for an alternate response. Much of that work began in 2008 with its Safe and Equitable Foster Care Reduction goals and our Casey Partnerships that include the communities and the Courts. That work will need to evolve and continue throughout implementation of SB 964 and Differential Response.

SB 964 implementation will significantly address the issue of community-capacity for service delivery, together with other existing CW investments in in-home services. The budget working through the ways and means process includes statewide roll-out of SB 964. Per direction from the 2011 Legislature, a Differential Response Design Team has been working to develop draft DR model design and tools, and Portland State University will be engaged in the development of training for CW staff and community partners to ensure consistent application of protocols and the tools.

The initial budget that is moving through the ways and means process for CW programs includes staffing levels up to 75%, which will allow for a staged roll-out of the enhanced practice model. (The GRB recommended staffing at 80%.)