The Child Protection Council lowa's Statewide Citizen Review Panel Annual Report

The Child Protection Council, Statewide Citizen Review Panel (CPC) meets on a bimonthly basis in Des Moines, Iowa. Council members also attend conferences and trainings throughout the year related to the work of the panel. The CPC seeks to encourage public outreach and input in assessing the impact of current Iowa Iaw, policy, and practice on families and the communities in which they live. All meetings are open to the public and a public notice is posted regarding the date, time, location, and agenda of the council meetings. In addition, the CPC Annual Report is posted on the IDHS website. Members of the public who are unable to attend meetings can direct any comments and/or questions to the Iowa Department of Human Services (IDHS) or to the State Coordinator though the IDHS website.

Summary of Panel Activities in SFY 2017

CPC meetings were scheduled and/or held during SFY 2017 (July 1, 2016 -June 30, 2017) on the following dates, from 10 am – 2 pm in Des Moines, Iowa:

Date	Presenters, Activities, and /or Topics Covered
07/12/2016	Face-to-face meeting:
	 Safe & Together Model & IDHS Implementation Leah Kinnaird, Domestic Violence Response Coordinator to IDHS Child Welfare Research and Training Project; Iowa State University Overview of HR2258 Changes to Iowa child abuse laws effective July 1, 2016: Sex Trafficking Sexual Abuse
	Group Discussions/Topics: DEC Workgroup 2016 CJA Project Updates
09/13/2016	Face-to-face meeting: Presentations:
	 Iowa's Managed Care Organizations (MHO) United Healthcare; Diane Johnson (Presentation and Q&A) AmeriHealth; Dr. Steven Sehr & Misti Johnson (Presentation and Q&A)

	Group Discussions/Topics:
	Recap of CJA Grantees Meeting
11/08/2016	Face-to-face meeting:
	Presentation:
	Early ACCESS, IDEA Part C Services
	Early Intervention Services in Iowa for Infants and Toddlers The Iowa Family Support Network, Kate Small
	Group Discussions/Topics:
	2017 CJA Projects & Initiatives
01/10/2017	Meeting Cancelled – Only required to meet four times per year
02/20/2017	Meeting w/ Coordinator and Chairperson
	 2017 – 2018 CJA Projects & Activities, CPC By-Laws & Membership terms
03/14/2017	Face-to-face meeting:
	Presentation:
	CARA & Iowa DEC Team
	Janee Harvey, IDHS Child Welfare Bureau Chief
	Group Discussions/Topics: • Review of CPC By-Laws
	CPC Memberships
	CJA Funding
	Future CJA Activities, Projects & Initiatives
05/09/2017	Face-to-face meeting:
	Presentation:Mason City Satellite Child Protection Center
	Mason City, Iowa
	Katie Strub, MA, LMHC, Supervisor/Forensic Interviewer Allen Child Protection Center, UnityPoint Health / Allen Hospital
	Group Discussions/Topics: • Election of Officers
	2017 Annual Report/Application Future C.I.A. Activities Projects & Initiatives
	Future CJA Activities, Projects & Initiatives

Annual Recommendations of the Child Protection Council

Recommendations of the Council are as follows:

Mandatory Reporter Training

Recommendation:

The Council is recommending that IDHS develop and maintain an online Mandatory Reporter curriculum for child and dependent adult abuse that includes a certification process upon completion of the course. Under this recommendation, IDHS would be responsible for the oversight and maintenance of the curriculum and as such, ensure that the content is current and that a certain level of understanding is attained and recorded.

In lowa, over 1,200 Mandatory Reporter curriculums are currently being offered online. As such, it is the responsibility of the individual or their respective agency that placed the curriculum online to ensure that it is updated and reflects lowa Code. Presently, there is no quality assurance mechanism in place to ensure this occurs, nor is there a mandated level of understanding requirement upon completion of a course.

The Child Protection Council has long recognized the challenges with Mandatory Reporter Training in Iowa. The Council, which also serves as Iowa's Task Force under the Children Justice Act (CJA) Grant, first noted their concerns in the 2009 CJA Report and again in the 2012 report. Recently, several Council members participated in a review of the Iowa's Department of Human Services (IDHS) Intake System. The findings from that review found that many of the concerns within that system stem from reporter's general misunderstandings and misconceptions about Iowa law as it relates to child abuse reporting and what must be present for an allegation to be accepted for a child protection assessment.

Over the years, legislative action has included several committees charged with reviewing and making recommendations regarding the Mandatory Reporter program but to date; no substantial improvements have been made to the program. While the Council recognizes that this recommendation is not a solution to the larger issues within the Mandatory Reporter Training program but they do feel this would be a positive step in that direction.

IDHS Centralized Intake Unit

Recommendation:

The Child Protection Council is recommending that the IDHS Centralized Intake Unit (CSIU) be expanded to a 24/7 Call Center that is fully staffed with a designated number of IDHS intake workers and supervisors.

As referenced in the previous section, several Council members participated in a review of the Centralized Child Protection Intake system. While the review and resulting recommendations led to several positive changes in IDHS practice and in the automated Child Welfare Information System (CWIS), concerns remain regarding the Intake Unit. Currently, after/hour intake calls are being directed to another facility and are handled by part time operators at that location. These operators are not part of the CSIU staff and as such, their intake training and experience is limited in scope. The review found that afterhours intakes had a decided lack of information. The study indicated a lack of consistency regarding system lookups and inadequate and/or missing information on after hour intakes.

The Intake Review also showed a significant high volume of calls are received in the hours shortly after the phone lines are transferred at 4:30pm and right before they are switched back to CSIU at 8:00am The final report noted that these are times in which medical facilities and clinics, schools, etc. are often open for business thus indicating a need for expanding the hours of operation.

The Council supports expanding CSIU to a 24/7 call center staffed by IDHS intake workers and supervisors. This move would lead to greater consistency and the quality of intakes as the staff would be adequately trained in this area.

It should be noted that this recommendation has previously been submitted to IDHS but at that time, IDHS was unable to consider the recommendation due to Collective Bargaining Rules in Iowa. This year, legislation was passed that eliminated many of the restrictions under Collective Bargaining. Due to this legislative change, the Child Protection Council is again submitting a recommendation regarding a fully staffed 24/7 Intake Call Center for IDHS.

Multidisciplinary Teams (MDTs)

Recommendations:

• The Council recommends that IDHS appoint a MDT lead in each of the Service Areas to serve as a designated point of contact regarding IDHS MDTs.

lowa Code requires that IDHS have and utilize MDTs. Under lowa Code, there must be an MDT in every county or multicounty area in which more than 50 child abuse cases are received annually.

Several years ago the IDHS contracted with Iowa State University to review Iowa's Multidisciplinary Teams (MDTs) as they relate to protective assessments of children and/or dependent adults. Several Council members served on the MDT Stakeholder Workgroup that was part of this initiative. The project's final report (November 2014) included recommendations in the areas of practice and policy around MDTs. Several of the recommendations, including updating existing MDT forms and developing new ones to better support the MDT process have been completed and distributed. As the

Council continues to look for ways to support the use of Multidisciplinary Teams (MDTs) they would like to recommend an additional proposal that was highlighted in the review.

The Council would recommend that IDHS assign a lead in each of the Service Areas to serve as a designated point of contact regarding IDHS MDTs. Having an MDT lead in each Service Area will promote consistency between MDTs across the state. These individuals can provide direction and guidance to IDHS workers/supervisors and other MDT members regarding the structure of an MDT, member roles and expectations, use of MDT forms and confidentiality rules concerning child and dependent adult abuse laws. As the MDT lead, this individual would also be responsible for identifying and mobilizing local efforts to recruit professionals to participate in and sustain local MDTs which would reduce staff burden in this area. Ultimately, providing external support and technical assistance to local MDTs will better serve the needs of specific abuse cases.

Progress and Implementation of Prior Recommendations

Drug Endangered Children

As the statewide Citizen Review Panel, the Council took an active interest in the implementation of Iowa's Differential Response (DR) system which occurred in 2014. Once the program was up and running the Council was involved in an Intake evaluation related to the DR path that reported allegations take i.e. a "Family Assessment Response" (Iowa's DR approach) or a more traditional "Child Abuse Assessment".

In addition to the implementation of DR and its outcomes, the Council has also followed the formation of the Drug Endangered Children's (DEC) workgroup in 2016 through updates provided at Council meetings. This group was formed in response to a legislative directive as part of a continuing improvement follow up to DR. The purpose of the workgroup was to review the impact of DR on the health and safety of drug endangered child and to make policy recommendations. Recommendations included a proposed definition of a "drug-endangered child" and changes in Iowa Code that added to the list of dangerous substances for which a child in need of assistance case would be assigned to the child abuse pathway instead of the family assessment pathway.

This group also assisted IDHS in proposing changes in Iowa Code that were required in order to implement the federal amendments to CAPTA made by P.L. 114-198, the Comprehensive Addiction and Recovery Act of 2016 (CARA). On April 20, 2017 House File 543 was signed into law. This law will become effective on July 1, 2017. The law mandates that health care providers involved in the delivery or care of an infant (under the age of one) affected by any substance abuse, or withdrawal symptoms resulting from prenatal drug exposure or Fetal Alcohol Spectrum Disorder are required to notify IDHS. Prior to these law only infants born positive for an illegal substance in the child body were required to be reported. Federal law also mandates a Safe Plan of Care to ensure that the infant's and the family's needs are met. As part of this mandate IDHS will now be collecting annual data regarding the number children being reported, Safe

Plan of Cares and the services provided. Going forward the Council is interesting in viewing this data and closely watching the outcomes related to this law change.

Multidisciplinary Teams

The Council and the IDHS recognize that in order to respond adequately to reports of suspected child abuse and neglect a collaborative, multidisciplinary approach is needed. The Council has been very supportive of the efforts that IDHS has made to enhance multidisciplinary approaches to child protective assessments, through both policy and practice changes, as well as in their relationships with key partners, such as lowa's Child Advocacy Centers that provide critical forensic interviewing and medical services during the course of child abuse assessments.

In 2016 IDHS updated their Memorandums of Understanding (MOUs) with each of the six Child Advocacy Centers in Iowa. The MOUs now require Child Advocacy Centers to reach out to each of the counties within their assigned IDHS service area to assist with a multidisciplinary approach to child abuse investigations/assessments. The MOUs included Interagency County Agreements to be completed for all of Iowa's 99 counties. Signatures on the Interagency Agreements are to include at minimum; the Child Advocacy Center, IDHS, the County Attorney's Office and county/municipal law enforcement.

The Council will continue to support this initiative as they view it as a critical piece in building and sustaining MDTs throughout the state.

Interdisciplinary Trainings

The Child Protection Council believes that an effective way to support MDTs is through multidisciplinary training. As such, the Council continues to be actively involved in the development and implementation of numerous interdisciplinary trainings throughout the state. Over the past year (SFY 2016 – 2017) Council members have worked closely with IDHS staff and community partners to continue to offer learning opportunities. The CJA Mini-Grant project which is a collaborative effort with Iowa's Child Advocacy Centers provides interdisciplinary trainings for child protective assessment workers and their local partners involved in child protective services. This project began in FFY 2016. In the first year of this initiative, attendance was strong and the trainings were well received. The year the Council will again offer and support these trainings provided through the Child Advocacy Centers.

This project and the trainings are described in greater detail in Iowa's 2017 Children's Justice Act submission.

Future Direction and Focus of the Child Protection Council

The Child Protection Council, Statewide Citizen Review Panel intends to be actively involved in child welfare system reform efforts in the coming year. Iowa's statewide CFSR review is scheduled for 2018. As part of this statewide review process, the

Council will be asked to participate in a case analysis project involving the re-abuse of children. This will consist of a review of data gathered from IDHS child abuse and neglect cases and identifying factors that contribute to re-abuse. A number of Council members will also be asked to serve on one or more of the stakeholders groups that will be forming in response to lowa's CFSR.

As this Council serves as the Statewide Citizen Review Panel and as Iowa's Statewide Task Force under the Children's Justice Act Grant (CJA) this Council will also be involved in Iowa's Three Year Assessment under the CJA grant. This Assessment is also scheduled to occur in 2018. Under this review, Council members will be asked to form subcommittees to review Iowa's past progress and achievements under the CJA grant and to identify future activities and initiatives going forward.