

ALASKA LEGISLATURE COMMITTEE FILES 1997-1998 8672

9132 HOUSE HEALTH EDUCATION & SOCIAL SERVICES

potential" with [the mother] because she would not be able to satisfy their needs for "structure and consistency."

Criminal Law Provisions

We generally believe that the proposed legislation takes a well-ordered, logical system of laws and changes them in an unwarranted way to make additional offenses based solely on the victim's status as a child. The sentencing laws already provide for punishment to be enhanced if the victim is "vulnerable," e.g. a child. The punishment for crimes against children or elderly, disabled, or otherwise vulnerable victims, can already be enhanced whenever it is appropriate. There is no need to make separate laws based solely on the victim's status as a child.

Because the law already takes into account vulnerable nature of children, we believe the changes are unnecessary.

AS 47.10.011

General Comments

This section of the legislation sets out the criteria which must be met before the state can take custody of a child. As noted above, PDA believes that the legislation is clearer and more concise than the previous version. Nevertheless, we believe that it does not correctly draw the difficult line between excessive and appropriate government intervention in the lives of Alaska's family's.

The proposed legislation sets out a number of instances of bad parental conduct which, in themselves, automatically make the child a child in need of aid whether or not the parental conduct has a bad effect on the child. For example, if a parent's substance abuse substantially impairs that parent's "ability to parent," the state can intervene.

The problem with this approach is that it fails to recognize the strengths of extended families to take care of their problems without the help of government. There are many families in Alaska in which one parent's abilities are impaired by substance abuse. In such cases, the other parent, or grandparent or aunt or uncle or brother or sister, steps in and takes over. If family or friends are there to take over when a parent stumbles, why should the state be involved at all? Clearly, the statute is overbroad if it allows the government to intervene in such situations.

Another example is where one parent abandons the child, but the other parent is still in the home and is able and willing to care for the child. It's difficult

to imagine the Dept. would take custody in such a situation, but, under Subsection 1, it could.

AS 47.10.011's Subsections

Subsection 1 of the new statute lists "abandonment" as one of the criteria. "Abandonment" is very broadly defined in a separate Section as "the conscious disregard ... of parental responsibility ... which threatens the parent-child relationship." Although the definition section goes on to list some specific criteria, this initial definition seems very broad. Another problem we noted is that in the current law, a child is not a Child In Need of Aid unless "both" parents abandon the child or a single parent abandons the child, when the other parent is not alive or has had his or her parental rights terminated.

Subsection 2 provides that if "a parent" is "incarcerated" for harm done to a child, the state can intervene. We think the rest of the statute picks up enough situations of abuse or neglect so that this subsection should only say: "... incarcerated or institutionalized [and the parent, guardian or custodian] has not arranged for safe and appropriate care ..."

Subsection 5 includes the term "emotional harm." As discussed above, we believe that the term gives too much power to the state to intervene in a family's life. AS 47.17.290(9) says that emotional harm or mental injury is evidenced by an "observable and substantial impairment." The "and substantial" is omitted and we think it should be in there.

Subsection 6 makes some significant changes to the current law. Currently, the statute allows intervention only when there has been "substantial" physical harm or if there is an "imminent and substantial risk" of such harm. The new statute omits the requirement of that the harm be "substantial" or the risk be "imminent." We think it's better to include these qualifiers.

Subsection 7 is similar to the current law, but includes a provision that makes leaving the child unsupervised with a person convicted of or being investigated for a sex offense prima facie evidence of substantial risk.

Subsection 8 deals with "emotional harm." This is discussed above.

Subsection 10 includes alcohol or controlled substance use as a separate grounds for intervention. This new section would allow the state to take custody if "habitual" drinking "substantially impair[s]" an "ability to parent." This is a collection of new terms that courts will have difficulty defining. If the terms are defined broadly, they will allow the state to intervene in homes with even the mildest of drinking problems. This section also apparently allows intervention where only one parent abuses alcohol or drugs. Even if one parent kicked the other

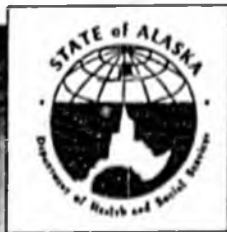
parent out of the home at the first sign of substance abuse, the state could still say the child was a child in need of aid based on the substantial impairment of the substance abusing parent's ability to parent.

Subsection 11 has problems from our point of view. What is "emotional illness"? "Mental illness" could include minor depression or minor adjustment disorders based on grief or situational stress. We think it should be restricted to major mental illnesses. What is "proper care" for the child? Also, the statute does not take into account a situation where a parent undergoing these difficulties makes appropriate provisions for a child, such as leaving a child with a close friend or relative. Furthermore, it does not address a situation where only one parent has the mental or emotional problem, but the other parent is fully able to care for the child and willing to do so.

The New Termination Statute AS 47.10.087

This section related to AS 47.10.C11. Parental rights can be terminated based on the CINA finding. If AS 47.10.011 is too broad, a parent could lose his or her parental rights for problems that do not make the parent unfit.

Thank you for considering these comments.



CHILD PROTECTION BRIEFING PAPER

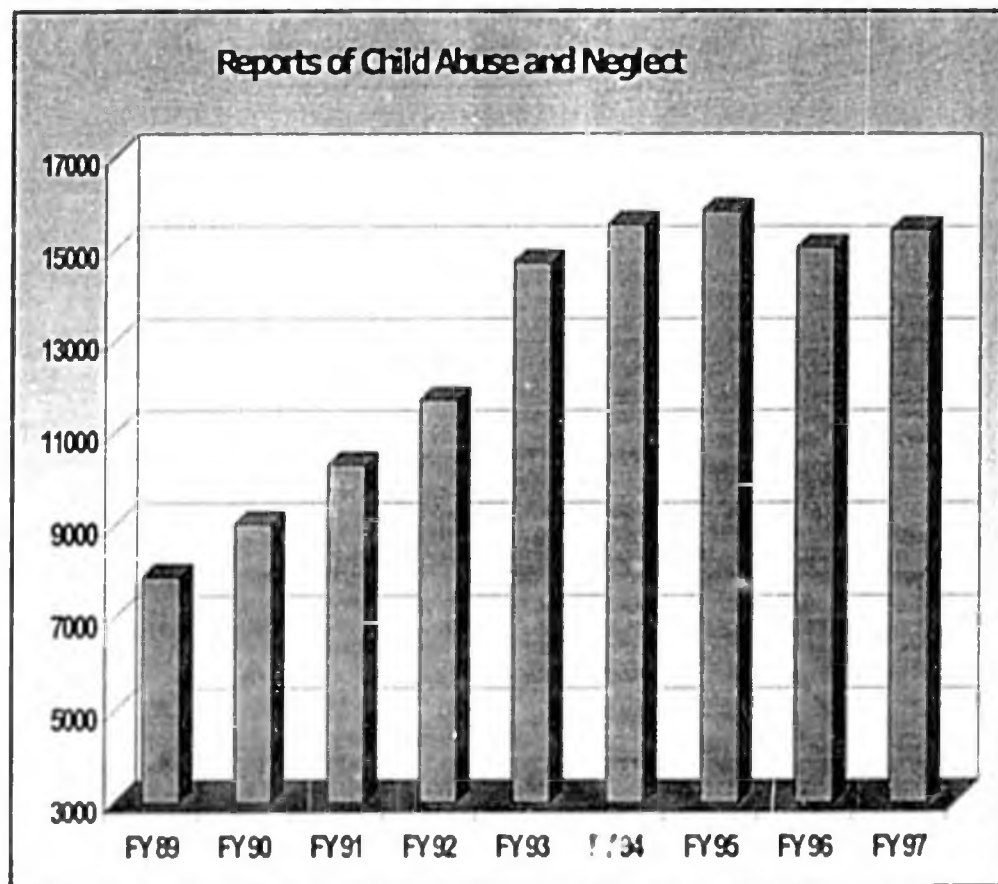
State of Alaska

Division of Family and Youth Services

Finding new solutions to old problems

Audits steer Alaska toward a better child protection system

Alaska must do a better job of protecting its children. During the past nine years, the number of reports of child abuse and neglect has nearly doubled with no increase in staff to respond. As a result, numerous reports of harm are never investigated. At-risk children are left too long in unsafe homes, and children who need a safe, permanent place to live often languish in state custody. Often-preventable substance abuse and domestic violence continue to ravage families, leaving the children with a shattered childhood and a future likely filled with continued abuse and neglect.



During the past six years, the Division of Family and Youth Services – Alaska’s lead child protection agency – has been the subject of several major audits and reviews. Most of these were internal audits prompted and conducted by the Department of Health and Social Services; some were independent reviews commissioned by the department. The Legislature also conducted an audit of its own in 1992.

The reviews identified key issues impacting the effectiveness of Alaska’s child protection system. Among these are lack of coordination between child protection agencies, insufficient access to critical information needed by child protection to support effective case work decisions, statutes that are unclear or inadequate to allow effective early intervention, outdated policies that do not provide clear guidance, inconsistent and insufficient social worker training, and a management structure that promotes inconsistency.

Every Child Counts, Every Day Matters

Aside from concerns raised in the audits and reviews, the department has identified other problems within DFYS. For instance, the division for years has experienced unacceptably high vacancy and turnover rates. This has compounded the division's troubles by contributing to already excessive child protection caseloads.

These and other problems must be confronted and fixed. The Knowles administration recognizes this fact and is committed to making sure DFYS and other state agencies have the resources and tools they need to protect Alaska's children from abuse and neglect.

This briefing paper will give a history of the DFYS audits and reviews, summarize the primary concerns raised in the reports, and then outline what the Department of Health and Social Services is doing internally to address those concerns.

Chronology of audits and reviews:

- 1992 – Legislative audit: DFYS, selected issues and concerns
- 1996 – Administrative review, DFYS Anchorage office
- 1996 – University of Washington full case-file audit of Anchorage office
- 1997 – Fairbanks Child Fatality Review, Departments of Law, Corrections, Public Safety and Health and Social Services
- 1997 – Child Protection Review Team report to Gov. Knowles
- 1997 – Review of five child protection cases, Kempe Children's Center
- 1997 – Statewide review of cases with multiple (6+) reports of harm, Department of Health and Social Services

What did we learn from the audits and reviews?

The reports found numerous things the Division of Family and Youth Services should be doing to assure Alaska's children are better protected. What follows is a summary of those findings and recommendations.

Management

- For much of the past decade, DFYS has been organized on a regional basis, instead of along program lines. This has resulted in:
 - blurred lines of accountability and reduced management effectiveness;
 - inconsistent policies and practices between regions;
 - reduced effectiveness of statewide program development;
 - decreased focus on child protection efforts;
 - reduced effectiveness of the agency training program.
- The division's business processes need to be re-examined and re-engineered to:
 - improve record-keeping and record management;
 - increase accessibility of key information to support fully-informed casework decisions;
 - increase effectiveness in carrying out mission-critical activities;
 - improve work flow across units;
 - improve efficiency and increase support for social workers.

'... The Department shall, for each report received, investigate and take action ... that may be necessary to prevent further harm to the child or to ensure the proper care and protection of the child.'

AS 47.17.030

Casework Practice

- Screening and investigations:
 - Alaska's statutory mandate to investigate all reports of harm is not being met – children are being left at risk.
 - Screening of reports to assess priority for investigation is inconsistent from region to region.
 - Investigative practices have been strongly influenced by the "family-preservation" policy that was implemented in 1991-92. The policy sought to minimize agency intervention and emphasized preservation of the family over focus on child safety. As a result, the minimum level of investigation necessary for a reliable assessment of risk too often does not occur.
 - Investigative practices have also been shaped by law and court decisions, resulting in a de-facto practice under which intervention occurs only after a report of harm has been substantiated. This often prevents effective early intervention.
 - Investigations too often focus on determination of a specific allegation rather than looking at cumulative of risk of harm – a "single-event" perspective in which reports tend to be viewed in isolation rather than comprehensively. This often prevents a full understanding of family circumstances and real risk to children.
- Case planning and follow-up services:
 - Inadequate training too frequently results in cases that lack a full assessment of family dynamics and the circumstances that underlie or present risks to children.
 - Case plans tend to be task-oriented, rather than outcome-oriented. Instead of focusing on demonstrated changes in behaviors or circumstances that eliminate risk of harm to children, case-plans too often focus on whether the specific tasks have been undertaken.
 - Case workers have too few direct contacts with families.
 - Concurrent planning – simultaneously developing plans for reunification and alternative placement – needs to start at the beginning of the case.

Supervision

- Supervisory responsibilities in casework decision making, quality assurance, training and staff development needs have been poorly defined. This limits the effectiveness and accountability of supervisors.
- Supervisory oversight and decisions need to be accurately and consistently documented in case files.
- DFYS lacks a standardized quality-assurance process for continuous case reviews by supervisors to ensure consistent adherence to practice standards by staff agency-wide and to make sure staff constantly identify and correct problems and improve casework.

Training

- Training has been inconsistent over time and across regions, which has diminished the quality and efficiency of casework.
- Efforts to develop an overall, competency-based education program for staff have been hampered by continuing shifts in administration, policy and funding.
- Key areas of training needs are:
 - investigation methods;
 - risk assessment;
 - outcome-based case planning and case management;
 - substance abuse assessment and treatment dynamics;
 - understanding the link between domestic violence and child abuse and improving planning skills to ensure the protection of child and mother in domestic violence situations.

Coordination and Collaboration

- Coordination among key agencies with child protection responsibilities must be improved through regular meetings, protocols for coordinated efforts, and informal cooperation at all levels.
- Increased sharing of information among agencies is critical to assure that key decisions made in child protection processes are sound and effective.
- Multidisciplinary teams – made up of officials from all agencies with a role in child protection – should be formed to improve decision making in particularly complex or difficult cases.

Policies

- Alaska's risk-assessment policies, tools and processes need to be revised to provide better guidance for social workers. Policies that determine the basis for intervention and case-planning decisions also should be strengthened.
- Investigation policies and guidelines need to be updated and improved. Policies and procedures have not been comprehensively updated in nearly 10 years. Many changes in law and practice have occurred and the framework guiding practice should be revised and formatted to be more useful for social workers.
- Child fatalities from abuse or neglect went undetected.

Laws

- Alaska child protection laws lack clear statement of purpose and intent, leaving them open to broad and sometimes conflicting interpretation.
- Alaska laws are narrower than almost any other state in some respects, limiting intervention in neglect case to those in which physical harm has occurred.
- Current court interpretation of statutes make early intervention very difficult or impossible in cases of chronic neglect.
- State law does not set out clear schedules or time-limits that would move cases more quickly toward permanency and focus on the best interests of children.
- Current law does nothing to promote collaboration and effective coordination among various child protection agencies.

What are we doing to fix the problems and meet the recommendations?

By undertaking these extensive audits and reviews, the Department of Health and Social Services has taken the first step toward fixing Alaska's child protection system. But department officials recognize that the harder and more important work remains ahead.

Based on what was learned from the audits and reviews, the department has identified a number of actions that will make sure Alaska does a better job of protecting children from abuse and neglect. Some changes are already in place, and plans for numerous other fixes are in the works. Many of the solutions call for administrative changes that the department and other agencies can make on their own. But many more of the solutions will require help from the Legislature.

Following is a detailed list and brief description of the major changes that are being made or proposed by the department and the Division of Family and Youth Services.

Ensuring Alaska's children are as safe as they can be

- Develop a zero-tolerance policy toward reports of child abuse and neglect to assure an appropriate response to all reports of harm, as required by law. (Eliminate the policy and practice allowing no response to some reports -the division's "workload adjusting" procedure.) To make this possible, fill all existing social worker positions and add new social workers.

Office	Total Reports of Harm	Assigned for Investigation		Workload Adjusted	
		Number	Percentage	Number	Percentage
Bethel	1361	668	49%	482	35%
Anchorage	5725	5090	89%	589	10%
Kenai	881	669	76%	155	18%
Mat-Su	1052	343	33%	707	67%
Fairbanks	2534	990	39%	1403	55%
Juneau	752	393	52%	182	24%
Ketchikan	422	207	49%	108	26%
All Others	2820	2169	77%	114	4%
Statewide	15547	10529	68%	3739	24%

* Of the total Reports of Harm, 922 (6%) were screened out as non-child protection issues and 358 (2%) were screened out due to insufficient information.

To ensure the safety of our children, we must be able to respond appropriately to all reports of harm in an efficient and timely manner. A zero-tolerance policy, combined with a realistic approach to staffing and training needs, will get us there. It is important to remember that even existing social worker positions are not fully funded – despite large caseloads and a near universal cry to protect our children from harm.

- Establish permanent Child Fatality Review Team.

To prevent abuse- or neglect-related child deaths from going undetected, a review team has been established under the auspices of the State Medical Examiner. The team is made up of the medical examiner, head of the State Trooper Criminal Investigation Bureau, a prosecutor, a local law enforcement official and an experienced social worker. The team reviews all child deaths to assure that those caused by abuse or neglect are investigated and prosecuted – and to make sure surviving children are protected.

- Develop a pilot project that allows a community-based agency to respond to some low-risk reports.

Communities must be a part of the solution. In its FY 99 budget, the department proposes creating an innovative pilot project called triple-track that would promote community collaboration by funding private agencies in at least two pilot communities to provide initial risk assessment and support in low-priority reports of harm. If these assessments indicate a need for greater intervention, they would be returned to DFYS.

- Develop a pilot project to ensure supervised visitation to promote increased family involvement when children are in out of home care, to speed reunification whenever possible, and to identify early on families where reunification is not in the best interest of the children.
- Establish emergency child-care resources in Alaska's three largest cities.

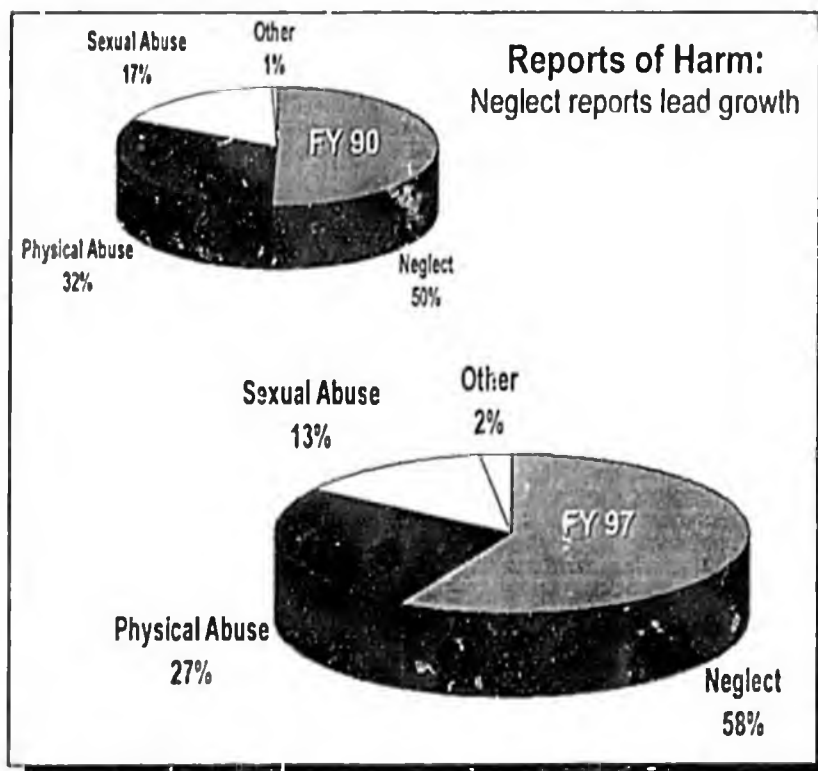
As part of the department's safety net of immediate assistance for children, three new five-bed emergency foster care group home units are planned for Anchorage, Juneau, and Fairbanks.

- Formalize and assure continuation of interdepartmental work by creating regional and community Multidisciplinary Child Protection Teams. These teams would help develop local response capacity to provide on-site, immediate assistance to child victims in rural communities that have few formal resources. The teams would also support community-based collaborative efforts in all Alaskan communities to ensure that responsibility for child protection needs are owned by all of us.

It is the goal of the department to have Multidisciplinary Child Protection Teams in all of Alaska's communities. While this effort will be initiated immediately, it will take some time to develop these community-based, inter-agency safety nets in Alaska's smaller towns and villages. These teams would include local law enforcement, social workers, community leaders, representatives of the court and legal system and other appropriate persons.

- Increase coordination and information exchange with law enforcement on high-risk cases.

Steps have already been taken to increase social worker access to criminal history and domestic violence information, improving their ability to identify and assess risk. Efforts are under way to make sure other crucial information is available to child protection workers. These include cross referencing



sex offender registries with child care licenses and analyzing technologies to increase information exchange within existing systems. A multi-agency effort will also be undertaken to analyze the feasibility, costs, and steps required to develop an integrated information system accessible by all agencies with child protection responsibilities. Work on this action item can begin immediately, but will take time to accomplish.

- Enhance capacity to provide substance abuse, domestic violence (consistent with requirements in the 1996 Domestic Violence Act) and mental health assessments and treatment targeted specifically to abusive/neglectful parents. This will assure problems causing harm can be identified and addressed early so children can remain in their own homes or return home quickly.

With a fully funded child protection team in place, multi-disciplinary teams in the community and a better working relationship among agencies, enhanced assessment and intervention is possible. Placing substance abuse treatment professionals and mental health clinicians in DFYS offices will make assessments and treatment referrals speedier and more accessible to families and consultations more accessible to DFYS staff to assist in case planning.

- Strengthen alcohol treatment services for women and children, and adopt policies that prioritize substance abuse treatment for all parents who are referred for treatment by DFYS workers. Increase domestic violence support services targeted to families in which domestic violence contributes to harm, abuse or neglect of children.

Breaking the cycle of harm requires providing protection for the child and the necessary services to ensure that the home is safe. Enhancing alcohol treatment and domestic violence support services will ensure that children are not returned to unsafe homes.

Building strong and stable families for Alaska's children

- Launch an aggressive foster- and adoptive-home recruitment campaign.

The department plans to offer small community grants to groups who understand the foster care system to immediately respond to prospective foster parents' inquiries of interest. These 25 grants – at an overall cost of \$107,000 – will help increase our foster system's capacity.

- Study relative care in Alaska, and explore different program models that would work best, including the closure of these cases with annual subsidy reviews (possibly through Title IV-E Kinship Care Waivers).

Increasing numbers of foster children find themselves living with their extended families. These foster parents must meet the obligations necessary to protect the child, but are usually ineligible for foster care funding. This study will help us determine the best way to ensure a strong continuity in our foster care system that includes relatives.

- Improve foster care reimbursement rates and provide additional respite care for foster parents.

Qualified foster parents are being driven from the system by a foster care reimbursement rate that has not changed since FY 92 and a lack of adequate funding for needed respite care. These rates must be increased and we must provide needed respite if we are to retain our foster families.

- Increase the support foster parents receive from DFYS.

With our new licensing regulations and a new foster care handbook, we have taken the first step to creating more effective support for foster care. We also plan to enhance the support services we provide through more social worker /foster parent contacts, communication, and training.

- Develop a comprehensive system of foster parent training.

By taking actions to increase access to federal dollars, DFYS has an opportunity to enhance training for staff and foster parents at no expense to the state.

- Adopt agreements with Alaska Native organizations that will enable these groups to receive federal funding for foster care placements made by tribes.

About half of the kids in the custody of DFYS are Alaska Native. Working more closely with this community will help provide a more consistent environment for Native Alaskan children and support tribes' efforts to protect children. Making federal funding accessible to support tribal placements will expand child protection resources at no cost to the state and may help prevent some children coming into state care.

- Help develop strong community-based foster care volunteer support networks.

Supporting foster care cannot be the state's responsibility alone. It is important to promote community-based volunteer efforts to assure that children at risk have full access to a strong foster care system.

- Provide increased funding individualized mental health services for children and youth at the next level below the Alaska Youth Initiative (AYI) program.

While supporting the wrap-around concept that AYI was founded upon, these services will divert lower-risk youth from AYI who were not intended to be served by that program.

- Provide a therapeutic foster care program for seriously emotionally disturbed (SED) children.

It is important to develop a better, community-based approach to providing therapeutic foster care. By contracting with a private non-profit agency, the department will be able to ensure recruitment and training of treatment foster parents who have the ability to serve SED children.

- Increase the availability of family preservation services and better focus these services on critical outcomes.

When possible – and safe for the child – we must seek ways to keep a family together. Expanding the availability of family preservation services can help families remedy conditions that put children at risk and prevent the need for removing children from their homes. Increasing the focus of these

services on achieving key outcomes will increase their effectiveness in achieving the results that are important to both child safety and maintaining families.

- ❑ Increase social work staffing to the level necessary to achieve permanent placements within twelve months of a child coming into custody and to reduce the time required for permanent placements for children already in custody. This includes implementing concurrent planning for every child.

Proposed social work staff increases will improve the effectiveness and speed of interventions and help move children through the system faster. While working to place a child back with their family, it is also important that we plan for situations when such placements fail. The faster a child can be placed in a permanent and stable home, the better that child's opportunity to succeed.

- ❑ Double the number of children placed in adoptive homes by FY 00 and increasing staff to a level necessary to achieve this.

Proposed staffing increases will help meet the backlog of adoption cases and help move cases through the legal process. We must evaluate the entire system to be sure that we understand the strengths and weaknesses in the continuum of care.

- ❑ Support the addition of assistant attorneys general, guardians ad litem, public defenders and support staff necessary to achieve timely and effective legal action to protect children and provide them with permanent, nurturing homes as quickly as possible.

Ensuring Alaska's Child Protection Team is the best it can be

- ❑ Work with the University of Alaska to found the Family Services Training Academy. Appoint a Training Advisory Board for DFYS to develop a comprehensive training system to ensure social workers have the knowledge and skills needed to be efficient and effective in making critical decisions. The academy will provide educational opportunities for current workers and supervisors, and the development of a future competent workforce.

The partnership with the University of Alaska will provide pre-employment practicum experience (an essential tool for recruitment); extensive worker training; and an option for child protection workers to return to school and enhance their ability to do their job. These training opportunities will also include a thorough orientation program for all new employees so they will be prepared before handling cases.

- ❑ Implement agency-wide training on intake and investigation procedures to improve accuracy and consistency in assessing reports and investigating abuse and neglect, identifying and assessing the risks presented by substance abuse and domestic violence in families, and identifying appropriate responses.

Practices for intake and investigation vary from region to region. We must implement agency-wide training to ensure consistent good practices in our approach to children and families.

- ❑ Maximize federal financial support by leveraging existing state resources to ensure continuity, quality, and consistency of training.

Improving methods for claiming federal training funds and the department's partnership with the university should allow us to draw new federal dollars into the state. This allows us to continue to broaden the scope and reach of our training efforts at little or no additional cost to the state.

- Examine, and if necessary, revise the minimum qualifications and job descriptions for all social worker positions.

Standards have not been improved since 1977. As part of our comprehensive approach to quality assurance, we must be sure our child protection team has the qualifications to do the job.

- Assign one personnel specialist in the department's Division of Administrative Services to assist DFYS.

Updating and rewriting job descriptions is a critical need in the division as it moves through its restructuring process.

- Maintain special opening of job registers or ensure that registers remain continuously open throughout the year to fill current vacancies. Propose a letter of agreement with the union to allow the department to use Workplace Alaska for all social work hires.

Maintaining a full work force to handle caseloads requires a strong commitment to flexible hiring practices. Keeping registers open and working through Workplace Alaska will help ensure that positions are filled with the most qualified applicants when vacancies occur – not months later.

- Delegate hiring authority for field positions to regional administrators.

A backlog of hiring decisions has been relieved simply by delegating this authority to regional administrators.

- Determine why workers do not stay with the division.

In addition to efforts to better train and recruit social workers, it is also important to know why child protection workers leave the system in the first place. A survey of present and past employees will help build a more stable system as we identify its strengths and weaknesses from the employee perspective.

- Implement a new agency structure that will provide more direct management focus on child protective efforts statewide and at the regional level.

The division has developed a new structure that places more responsibilities on statewide and regional managers to supervise and support line staff. Working as a more integrated team, our child protection system will do a better job of serving children and families.

- Develop new supervisory standards, including ongoing quality assurance audits. Implement regular, senior level staff meetings to ensure that knowledge of the agency mission and actions is consistent throughout the regions.

To do their part, supervisors also need orientation and training as well as clear standards. With an improved knowledge base, they will be able to adequately monitor and support case practices.

- Contract with the Child Welfare League of America to:
 - Assist in developing a supervisory case-review system;
 - Develop a description of the supervisory role in quality assurance and of related expectations of supervisors;
 - Develop a case-review instrument, a supervisory case-review procedural manual, and a training curriculum for the supervisory case-review process.

This recently implemented contract provides the necessary expertise to comprehensively review our training, orientation, and quality assurance efforts. When complete, there will be clear standards, procedures, and training curriculum to meet ongoing child protection needs.

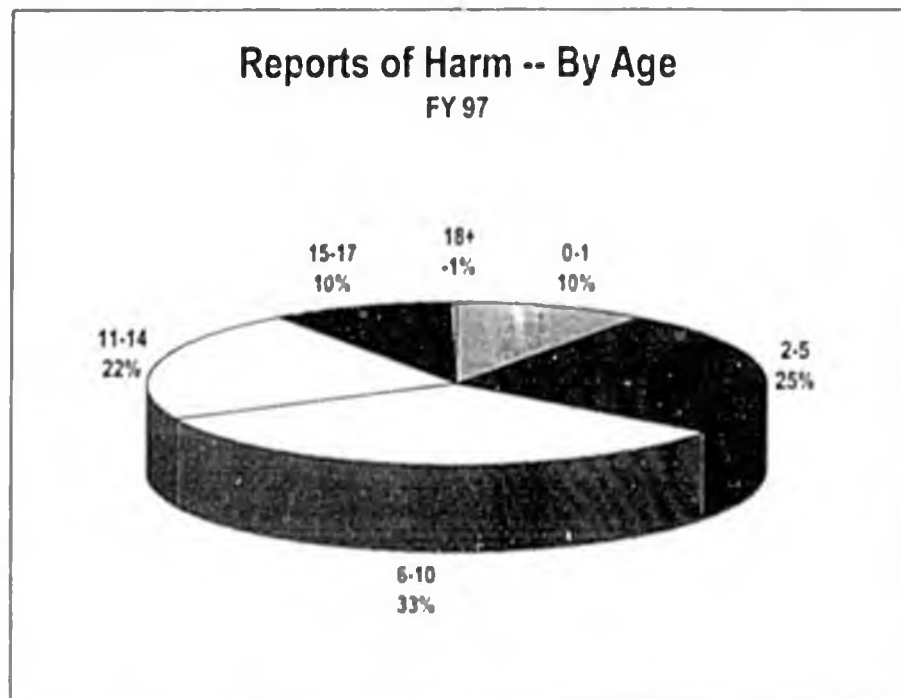
Making laws that work for children

- Develop a comprehensive revision to Alaska's child protection laws to increase the ability to intervene early to protect children and ensure their speedy placement in a safe, permanent home.

Alaska's child protection laws are largely unchanged since the last major revision in 1977. Court decisions in the intervening years have limited the effectiveness of the laws in supporting early intervention and permanent homes for children.

Circumstances in child protection cases have changed significantly in complexity and difficulty over the last 20 years and much has been learned about the impact of abuse and neglect on children and of failure to achieve early permanency and bonding. There is a need to revise our laws to reflect these changes in a number of ways.

- Define "reasonable effort" requirements in state law to eliminate this as a barrier to early permanent placement of children.



The definition of "reasonable effort" to return the child to the home is a floating target, subject to interpretation. These murky definitions threaten a child's transition to a permanent and safe home, often allowing for unreasonable delays.

- Eliminate the current problem regarding termination of parental rights when parents are "willing but unable" to care properly for their children.

Under current law, a parent who is willing but unable to care for their child may still retain parental rights even if there is no prospect for improvement. Without this necessary change, children suffer by not being allowed an opportunity for a permanent and safe placement.

- Establish a clear standard and/or quicker timelines for decisions on termination of parental rights when very young children are involved.

Young children are our most vulnerable and most salvageable. We must be sure that they are quickly moved to safe, permanent homes before they suffer lasting damage in temporary or unstable settings.

- Include provisions that would change permanency planning hearings from eighteen to twelve months.

All children deserve a quick hearing and a quick decision. Combined with concurrent planning, this provision would speed up the process of providing a child with a strong and stable home.

- Authorize a "foster care waiver" to allow the use of foster care funds to support in-home services as an alternative to out-of-home placements.

A child kept in a home – as long it is a safe home – is likely to do better than one who remains in temporary care for a long period of time. Finding creative incentives to help sustain the family is one way of addressing this concern. DFYS interventions must not be limited to removal of children. Social workers must have the ability to provide real assistance to families so children are not removed from home only because services to keep the family together cannot be provided.

- Eliminate legal and/or policy barriers to using kinship care as permanent placement alternatives for children.

With 40 percent of DFYS children in the care of relatives, it just makes sense to be able to offer incentives to maintain these placements.

- Increase monitoring and prosecution of sexual predators who victimize children.

The damage done to a child by a sexual predator makes transition to adulthood much more difficult. We must ensure that offenders are aware that we will not tolerate their behavior – especially when it is directed to our most vulnerable citizens.

- Pursue fast-track prosecutions in all cases where harm to children involves a crime.

A parent who commits a crime in the presence of or against a child should suffer greater consequences. Just as the use of a weapon in a crime increases the risk to society, so does the victimization of a child who, traumatized by the crime they have witnessed, may have difficulty

adjusting to society and exhibit anti-social behaviors that hurt all of us. Creating stiffer penalties underscores a zero-tolerance policy toward child abuse that will help protect children in the long run.

- Develop new policies to ensure that those who are required by law to make reports of harm hear back from social worker staff within a specific minimum amount of time. (The department also plans to review a California state law that mandates a "reporting back" policy.)

Mandatory reporters often do not know the outcomes of the reports of harm they have made. When a child that they have reported to DFYS comes under their care again, they may not be informed of how the case was dealt with and what actions were taken. To ensure that they provide the best possible service to the child, they should know the outcome of their reports of harm.

- Seek legislation to allow foster or adoptive parents to be at all case staffings or hearings relating to the child.

Foster or adoptive parents should be fully informed about the children they care for and should have the opportunity to share their knowledge of the child to assure decisions made about the child are fully informed. This serves the best interests of the child and their new families.

- Propose legislation to broaden the definition of "neglect" to ensure that children suffering from from emotional and mental neglect are also protected.

A recent court hearing narrowed the definition of "neglect," potentially leaving children at risk. We must strengthen the definition to ensure that children are not needlessly placed at risk.

- Commit \$2.3 million from the General Fund to maintain the current level of funding for the Healthy Families Program and to establish six new program sites.

Healthy Families programs provide necessary pre- and post-natal care, intense home visitation, and parenting training. Together, they ensure that high-risk families have the resources and support they need to raise healthy children.

- Develop a statewide home-visiting service under the Medicaid Program.

This proposal would allow use of Medicaid funds to extend Healthy Families-like programs to Alaska's smaller, rural, predominantly Alaska Native communities.

- Implement a campaign to increase public awareness and understanding of child abuse and neglect and its impact on children. Such a campaign would promote individual and community actions that prevent and help reduce child abuse and neglect.

The public must understand the full extent of our child abuse and neglect problem and they must be engaged in efforts to improve child welfare. Community action underscores the most important message: we are all partners in protecting our children, and we are all responsible when children are harmed.

TALLY SHEET FOR SUPPLEMENTAL PROBER DATA REGARDING ADOPTION, PERMANENCY PLANS FOR CHILDRENT IN THE CUSTODY OF THE DIVISION OF FAMILY AND YOUTH SERVICES

TALLY SHEET FOR: TALLY SHEET FOR SUPPLEMENTAL DATA

- OFFICE
- GOAL:
- A. ADOPTION
- B. GUARDIANSHIP
- C. PENDING ADOPTION
- D. PENDING GUARDIANSHIP
- TIME IN CUSTODY
- SPECIAL NEEDS

1. . Physical disability:
 2. . Mental disability:
 3. . Emotional disturbance:
 4. . Recognized high risk of physical or mental disease:
 5. . Membership in sibling group:
 6. . Racial or ethnic factors:
 7. . Hearing/visually impaired
 8. . Other:
- BARRIERS.

9. . Court Delay
10. . AG delay
11. . Permanency Plan staffing needed
12. . Multiple Workers, Case transfers
13. . Other case work demands
14. . Lack of honest
15. . Late Interventior (3rd parties)
16. . Locating absent parent
17. . No Placement for Child
18. . Other

Date/Goal. Date goal was changed to adoption or guardianship

In P PLM'T. Indicates the child is in a permanent placement or not

C3 or C4 Indicates that one (C3) or both parents (C4) rights have been terminated

OFFICE Galena FS

a.	17	Y	93	2 (disassociative disorder)	13, 18 (disrupting sa.	n/a	N	N
b.	10	Y	1,914	3	13, 18 disrupted	11/1/93	N	N
a	7	Y	1011	2,4, FAE	9 13, 17, 18 disrupt	8/2/95	Y	N
b.	16	N	574	2 SEC	13, 17, 18 disrupt	12/5/96	N	N
b.	7	Y	1914	3, ADHD, 4, drug	13, 17, 18 disrupt	4/28/94	N	N
b.	12	Y	130	3, ADHD, anger, Depres	13, 17, 18 disrupt	5/13/96	Y	N

OFFICE McGRATH

GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	IN P PLM'T	C3 or C4
A	4	Y	1563	1	13	4/23/96	N	N
A	13	Y	1843	0	13	10/2/96	N	N
A	11	y	1843	5	13	10/2/96	n	N
A	9	Y	1843	5	13	10/2/96	N	N
E	17	y	2024	0	13	9/4/96	N	N
A	7	Y	2172	0	13	10/2/96	N	Y

OFFICE Dillingham FS

GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	IN P PLM'T	C3,4
c.	8	y	356	5 (4 sibs)	11, 12 pp 11/97	5/28/90	N	N
c.	2	Y	356	5 (4 sibs)	11, 12 pp 11/978/26/95	N	N	N
d.	11	Y	461	5 (3 sibs)	9, 14 pp?	8/12/94	Y	N
d.	2	Y	461	5 (3 sibs)	9, 14 pp?	10/25/95	Y	N
c.	7	Y	431	5 (4 sibs)	11, 12 pp11/97	6/3/96	N	N
c.	5	Y	431	4, FAS, 5 (4 sibs)	11, 12 pp11/97	6/3/96	N	N
c.	8	Y	431	3. behavior, 5 (4 sibs)	11, 12 pp11/97	6/3/96	N	N
c.	9	Y	1,560	5 (4sibs)	11, 12 pp11/97	6/3/96	N	N
c.	11	Y	507		11, 12	5/22/92	Y	1/2

OFFICE PETERSBURG FS

GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	IN P PLM'T	C3,4
*c.	12	Y	1952	1,3,4, ADHD, drug exp.	18. Tribe supports FC	12/20/96	Y N	
c.	2	Y	484	5, 4 sibs.	11, 18	4/5/96	U	N
c.	7	Y	484	5, 4 sibs	11, 18	4/5/96	U	N
c.	5	Y	484	5, 4 sibs	11, 18	4/5/96	U	N

c.	13	Y	484	5. 4 sibs	11, 18	4/5/96	U	N
OFFICE KETCHIKAN								
GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	IN P PLM'T	C3,4
a.	9	n	2166	2,3,4, SED, ADHD	17	10/23/95	N	Y
b.	15	n	362	2,3, 5 runner, Neur diso	18 behaviors	8/7/96	N	N
KETCHIKAN cont								
GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	IN P PLM'T	C3,4
b.	9	n	1570	none	18, 15 return home	1/794	Y w/Dad	NA
d.	16	Y	683	2 PTSD	11	9/19/95	N	N
c.	8 mos	Y	117	4 M-FAS F-Alcohol	9, 11	9/19/95	N	N
c.	9	Y	687		11	5/16/97	U	N
d.	15	n	683	2,3,8, Severe behaviors	11	9/15/96	U	N
c.	16	n	299	3	11	9/19/95	Y	N
e.	13	y	2524	1,2,3, OpDefi, FAE	17	9/12/96	U	N
c.	7	y	1227	2,4 FAE	11	9/1791	PFC	N
c.	5	y	1227	1,3 FAE	11, 12	3/24/94	Y	N
c.	4	y	1227	1, 4 FAE	11, 17	3/24/94	J	N
d.	11	y	2123	1,2,4 DD/LD/FAE	11	3/24/94	N	N
c.	13	n	807	2,3 ADHD, SED	18, 16 Guardfiled	10/29/93	Y	N
c.	4	y	597	1 DD	11, 12	10/19/93	U	N
c.	9	y	597	8 multiple placements	11, 12	9/10/93	U	N
c.	13	Y	597		11,12, 16	8/30/93	U	N
a.	10	N	2,242		Adopted	8/11/93	Y	Y
OFFICE UNALASKA								
GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	IN P PLM'T	C3,4
a.	13	Y	1780	1,2,3,6, hrg imp. FARND	13,18 discr plc5/96		U	N
a	8	Y	457	4, FAS, 5	16	5/2/96	Y	N
e	10	Y	457	3.PSTD, 4 FAS	13,17	11/5/96	N	N

OFFICE NOME								
<i>GOAL</i>	<i>AGE</i>	<i>ICWA</i>	<i>TIME</i>	<i>SPECIAL NEEDS</i>	<i>BARRIERS</i>	<i>DATE/GOAL</i>	<i>IN P PLM'T</i>	<i>C3,4</i>
a.	6	Y	674	1, med fragile/complex	18, family needS	5/6/97	Y	N
A	6	y	936	5	9, 10	5/8/92	Y	Y
A	3	y	936	5	9,10	1/9/95	Y	Y
a.	13	Y	610	6	18 Child reluctant	10/23/96	Y	N
b.	13	Y	530	0	18 mom delays	10/12/95	Y	Y
OFFICE JUNEAU								
<i>GOAL</i>	<i>AGE</i>	<i>ICWA</i>	<i>TIME</i>	<i>SPECIAL NEEDS</i>	<i>BARRIERS</i>	<i>DATE/GOAL</i>	<i>IN P PLM'T</i>	<i>C4</i>
a.	3.	Y	915	5	12,18 adopt mom health	1/30/95	Y	Y
a.	4	Y	915	5	12, 18 adopt mom health	"	Y	Y
a.	8	N	2005	3,4,5	9 on appeal	4/26/95	Y	Y
a.	5	N	1544	1,2,3,4.5 DD	9 on appeal	4/26/95	Y	Y
a.	3	N	848	0	16 recent location of f.	5/11/95	Y	N
a.	11	Y	1773	3,4,5 fail plm/ts	12,17 wkr has 7 terms	10/3/92	N	N
a.	10	Y	1773	2,3,4 DD,	12, 17 "	10/3/92	N	N
b.	15	Y	732	2,3,4,8 sev.sa	17	8/1/95	N	N
a.	7	Y	915	5, 8 gm sep from sibs	15, 12 tribal in	1/30/95	U	Y
a.	6	N	647	3,5 loss, PTSD	10, (open adopt plan)	11/1/96	Y	N
a.	4	N	563	3, 5 loss	10	11/1/96	Y	N
a.	5	N	871	2,3,4,5 DD	15 tribal intv	9/21/94	Y	N
a.	4	Y	871	3,4,5 behaviors	15	9/21/94?	Y	N
b.	17	Y	543	3, grief, abandonment	15	2/796	N	N
a.	10	Y	818	2, 5	17	2/12/97	N	N
a.	4	N	939	4,5	17, failed	1/6/95	N	N
a.	3	N	939	4,5	17 failed	1/6/95	N	N
a.	10	N	2577	3,5 loss, abuse	9 2nd appeal	2/22/91	Y	Y
a.	7	N	2577	3,5	9 " "	"	Y	Y
a.	3	N	969	4	18 divorce	5/30/94	Y	Y
b.	14	N	365	4,5	18 rela decision	8/23/96	Y	N

b.	15	Y	365	5	18	8/23/96	Y	N	
a.	5	Y	577	3,5	18	unk	Y	N	
a.	7	Y	577	3,5	18	" "	Y	N	
a.	12	Y	2427	1,2,3,4, FAE, Loss	9,13	Fappeal den. 3/11/94	Y	Y	
a.	8	Y	2427	1,2,3,4, FAE loss	9,13	" 3/11/94	Y	Y	
OFFICE FAIRBANKS									
GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	IN P	PLM'T	C4
a.	2	Y	991	1,2,4	8, 16	3/30/95	Y	Y	Y
b.	14	N	520	4,5,6, abused Black	13,14	2/6/97	Y	N	N
b.	16	N	520	1,3,4,5,6	" 13,14	2/6/97	Y	N	N
b.	16	Y	544	5,6	14,15	1/30/97	N	N	N
b.	13	Y	543	4,5,6, multi plc	16,17	1/20/97	N	N	N
b	17	Y	1010	1,4,5, neurofibramatosis	9, 16	1/26/95	N	N	N
a.	1	Y	292	4,5 abuse, negl.	9,17	5/7/97	N	N	N
a.	6	N	1291	1,2,4, FAS, DD, ADHD	17	10/27/94	N	Y	Y
a.	14	N	1214	1,4,5,	11,	10/27/94	N	Y	Y
a.	7	N	607	6 rela search	12,14	10/8/96	N	Y	Y
b.	15	Y	439	4,5, abuse, sa	12, 17	12/10/96	N	N	N
a.	7	Y	2033	1,2,4,5, FAE, SED	9, 12	appeal 12/16/93	Y	Y	Y
a.	6	Y	2033	1,2,4,5, FAS, SED	9, 12	appeal 12/16/93	Y	Y	Y
a.	8	Y	2033	1,2,4,5 FAS, SED	9, 12	appeal 12/16/93	Y	Y	Y
a.	3	Y	1052	1, FAS, DD	12, 18	10/27/94	Y	Y	Y
a.*	6	Y	1243	4,6 abuse, sa, negl	9, 14	5/25/95 tpr pend	Y	N	N
a.*	7	Y	1243	1,4,"	9, 14	5/25/95	Y	N	N
a.	0	N	342	1, DD FAE?	12, 18	hrq 11/97 1/2/07	Y	N	N
a.	6	Y	635	1, 4, ADD,	9,16	pet file 5/13/97	Y	N	N
a.	0	N	228	1,4 DD? exposed	12	pet file 6/12/97	Y	N	N
a.	10	Y	437	3,4,5 negl	12,13	12/10/96	N	N	N

b.	10	N	477	4,5	negl	13,14	7/31/97	Y	N
b.	12	N	477	4,5	"	13, 14	7/31/97	N	N
b.	7	N	477	3,4,5,	sa	13, 14	7/31/97	Y	N
a.	0	N	256	1, 4	cocaine	18, hrg 10/97	5/8/97	N	N
a.	2	N	822	1, 4	cocaine	16	12/27/95	Y	N
FAIRBANKS cont									
GOAL	AGE	ICWA	TIME	SPECIAL NEEDS		BARRIERS	DATE/GOAL	IN P PLM'T	C4
d.	14	N	687	4, mom sub a		11 OCT	9/15/95	Y	N
a.	4.	N	1285	1,3,4 expo DD, Hyper		12,18	3/22/95	Y	Y
a.	1	y	545	1, 4 EXPO, FAE		12,14	5/7/97	y	N
b.	15	Y	200	1,3,4, FAS, ADHD,DD		12,17	3/18/84	N	N
a.	11	N	810	3,5 abuse,negl		9, 12,14	4/17/96	Y	N
a	12	N	1479	3,4,		9, 12,	6/27/96	N	Y
a.	1	N	553	1,4, cocaine		9, 12	6/17/97	Y	Y
a.	7	N	810	3, 5 w/2 sibs		9, 14	4/17/96	Y	N
a.	8	N	810	3,5 w/2 sibs		9,14	4/17/96	Y	N
a.	6	N	810	3,5 w/2 sibs		9, 14	4/17/96	Y	N
b.	10	N	1002	3,4,5, w/1 sib		9, 14	8/7/97	ICPC	N
b.	12	N	1002	3,4,5, w/1 sib		9, 14	8/7/97	ICPC	N
a.	8	Y	1460	1,4, FAE negl w/1sib		13, 14	5/12/94	Y	Y
a.	7	Y	1460	1,4, FAE ADHD w/1sib		13,14	5/12/94	Y	Y
a.	3	N	1144	1,4 cocaine, asthma		9, 12	7/5/94	Y	Y
b.	17	y	584	1,3 sub abuse		18 guard. in trmt	2/1/96	Y	N
a.	10	N	830	1,2,4, SED, loss		12,16	4/17/97	Y	N
a.	9	N	830	3,4, SED,abused		12,16	4/17/97	Y	N
b.	15	N	660	3,5 SED 1 sib		12, 16	5/1/96	U	N
a.	8	N	1214	5, w/2 sibs		13, 12 ICPC	10/27/94	Y	Y
a.	5	N	1214	1,5 FAS w/2 sibs		13,12 "	"	Y	N

a.	7	N	1214	1,4,5 sickle cell w/2	13,12 "	"	Y	N
b.	17	Y	1067	3,4, 5 w	18 guard in txmt	2/1/96	Y	N
b.	10	Y	584	3,5, w/2sib	18 "	"	Y	N
a.	8	Y	1002	1,3,4,5 FAE,SED	18 multiple plc	6/30/97	U	N
a.	9	Y	1002	1,3,4,5 FAE,SED	18 "	"	U	N
a.	11	Y	1002	1,3,4,5 FAE,SED	18 "	"	U	N

FAIRBANKS cont

GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	IN P PLM'T	C4
a.	3	Y	1275	1,4, ADHD, FAE?	9 m-tpr D-hrg	2/98 5/7/97	Y	C3.
a.	14	Y	1010	4,5 abused	16,18 late file pet	4/2/97	U	N
a.	11	N	843	1,4 ADHD, sub ab	12,14	6/19/97	Y	N
a.	0	N	166	1, 4 DD multi sub	9, 16	8/14/97	U	N
a.	2	N	865	1,4 DD mom DD	9, 16	2/695	U	C3
a.	2	Y	737	4, sib MenIII, sub a	14,18 delays	10/26/95	Y	C3

OFFICE DELTA

GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	IN P PLM'T	C4
a.	6	Y	1135	5 w/1 sib	14,16	7/13/95	Y	N
a.	7	Y	1135	5 w/1 sib	14,16 tpr	12/8/97 1/11/96	Y	N
a.	3	Y	1135	1, 5 w/1 sib, med	12 m reling	8/97 7/2/97	Y	C3
b.	13	Y	772	3, sex a., abandon	23,1	8/13/97	U	N

OFFICE KODIAK

GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	IN P PLM'T	C4
b.	12	N	808	0	18 change guard	5/17/95	Y	N
a/b	3	Y	1104	0	11,10	7/25/94	U	Y
a/b	9	Y	555	5 w/1 twin	11, 13	8/19/93	Y	N
a/b	9	Y	555	5 w/1 twin	11, 13	8/19/93	Y	N
a/b	8	Y	555	5 w/twin	11, 13	8/19/93	Y	N
a/b	8	Y	555	5 w/twin	11, 13	8/19/93	Y	N
a/b	1	y	675	2,4, FAE twin	13, 14	9/27/95	Y	N

a/b	1	Y	675	2,4 FAE, twin	13, 14	9/27/95	Y	N
OFFICE HOMER								
<i>GOAL</i>	<i>AGE</i>	<i>ICWA</i>	<i>TIME</i>	<i>SPECIAL NEEDS</i>	<i>BARRIERS</i>	<i>DATE/GOAL</i>	<i>IN P PLM'T</i>	<i>C4</i>
a.	11	U	372	2,3, LD, SEC, PTSD	16	8/27/97	U	N
a.	14	N	799	1,3,4, FAS	17, 14	8/27/97	N	N
HOMER cont.								
<i>GOAL</i>	<i>AGE</i>	<i>ICWA</i>	<i>TIME</i>	<i>SPECIAL NEEDS</i>	<i>BARRIERS</i>	<i>DATE/GOAL</i>	<i>IN P PLM'T</i>	<i>C4</i>
b.	13	N	519	3, mom dead, depres	16	8/27/97	Y	N
b.	16	n	687	1,3, sed, perpetrator	17	8/27/97	N	N
OFFICE SEWARD								
<i>GOAL</i>	<i>AGE</i>	<i>ICWA</i>	<i>TIME</i>	<i>SPECIAL NEEDS</i>	<i>BARRIERS</i>	<i>DATE/GOAL</i>	<i>IN P PLM'T</i>	<i>C4</i>
*e.	12	Y	2,178	4	16, 18 lack \$	4/12/93	Y	N
*e.	4	N	1573	4	16, 18 lack fu \$	4/12/93	Y	N
a.	9	Y	2549	3,4 sib	18 F-aids M-reap	3/12/94	U	N
*e.	15	Y	854	4,6 racial id imp.	18 " "	2/18/94	U	N
*e.	12	Y	2549	4, 6 "	18 " "	2/18/94	U	N
a/b	10	Y	674	1,3,4 FAS,DD	17,18	10/3/95	N	N
*e	10	N	1025	4	16	10/12/94	U	N
a.	6	Y	790	0	14	6/5/95	Y icpc	N
a.	17	Y	3287		17	8/2/88	N will age out	
*e.	15	N	2488	4	18 no \$ to adop	6/15/91	Y	N
*e.	16	N	2488	4	18 "	6/15/91	Y	N
OFFICE ANIAK								
<i>GOAL</i>	<i>AGE</i>	<i>ICWA</i>	<i>TIME</i>	<i>SPECIAL NEEDS</i>	<i>BARRIERS</i>	<i>DATE/GOAL</i>	<i>IN P PLM'T</i>	<i>C4</i>
a.	7	Y	452	4 FAE	13, 14,17	7/15/97	N	N
a.	12	Y	1108	8 open adopt	13,10,16	7/7/95	Y	Y C3
OFFICE MAT-SU								

GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	IN P PLM'T	C4
b.	14	N	795	3, PTSD	9	8/7/92	Y	N
a.	11	N	911	3,4, SED 4 sibs	18 psychi.hosp	7/27/96	N	N
a.	8	N	911	3,4 " "	18 "	"	N	N
a.	10	N	911	3,4, " "	18 "	"	N	N
a.	12	N	911	3,4, " "18 "	:	"	N	N
a.	14	N	911	3,4,	13	7/24/96	N	N
a.	9	N	215	3,4	13,14	6/15/97	N	N
OFFICE SITKA								
GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	IN P PLM'T	C4
a.	2	Y	737	1, build thumbs	18 delay for sub	xxx	Y	Y
OFFICE BARROW								
GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	IN P PLM'T	C4
A.	6	y	1554	1,4, alco ex	9,13	1/26/93	Y	Y
a.	9	Y	593	1,4,5 2/sibs FAE	593	9/30/96	N	N
a.	3	Y	814	1,4, alco	9, 13	9/23/96	N	YC3
a.	7	Y	593	1,4,5 2/sibs FAE	9, 13	9/30/96	U	N
a.	10	Y	593	1,3,4,5 2/sibs	9,13	9/30/96	N	N
a.	10	Y	1106	4,5 1 of 5 sibs	16,10,12,14	11/21/96	Y	N
a.	4	Y	1236	2,3,4,5	12, 18	1/27/97	Y	N
a.	14	Y	1106	2,3,4,5 1of 5 sib	10, 16	11/21/96	Y	N
a/	13	Y	1106	1,2,3,4,5 "	11,10	11/21/96	Y	N
a.	15	Y	1106	1,2,3,4,5 5 sibs	10, 16	11/21/96	Y	N
a.	5	Y	1106	1,2,3,4,5, 5 sibs	10,15	11/21/96	Y	N
OFFICE BETHEL								
GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	IN P PLM'T	C4
b.	16	y	4206	2,3,	18 MEDICAID	1/22/97	Y	N
a.	11	Y	828	3,4 sib/1	10, 12	4/30/96	Y	N
a.	13	Y	828	3, 4 sib/1	10,12	4/30/95	N	N
a.	0	Y	303	1, alco seizures	10	1/14/97	Y	N

a.	13	Y	828	3,4, depres SED	11, 20	4/30/96	Y	N
a.	8	Y	641	4	18 to comp	1/14/97	Y	N
a.	4	Y	1310	4	9,12,18	11/20/95	Y	N
<i>GOAL</i>	<i>AGE</i>	<i>ICWA</i>	<i>TIME</i>	<i>SPECIAL NEEDS</i>	<i>BARRIERS</i>	<i>DATE/GOAL</i>	<i>IN P PLM'T</i>	<i>C4</i>
a.	6	y	1052	2,4 4SIBS	11,	12/1/95	Y	N
a	9	Y	1052	3, 4sibs	11	12/1/95	Y	N
	A.	1	N 616	4 4 sibs	11	12/1/95	Y	N
a.	5	Y	1052	4 4 sibs	11	12/1/95	Y	N
a.	10	Y	1052	3,4 4sibs	11	12/1/95	Y	N
a.	9	Y	2127	2, 4 1 sib	18 process delay	9/13/95	Y	Y
a.	13	Y	2127	3,4,5 1 sib	18 "	"	Y	Y
a.	4	Y	677	3	12	10/15/96	Y	YC3
a.	8	Y	2587	3	18 IV-E elig	10/7/94	Y	Y
a.	6	Y	1382	5 2sibs	11,13,14	6/11/97	N	N
a.	6	Y	2227	1,4	18 process delay	5/30/93	Y	Y
a.	6	Y	1426	1,5 2 sibs, DD, CPI	17, 18	4/2/96	N	Y
a.	13	Y	2025	1,3, ADHD	18 wait consent	11/20/95	Y	YC3
a/	3	Y	1071	1, 5 FAS 1sib	18 "	1/12/96	Y	Y
*e.	17	Y	4036	3,4, suicidal	17, 18	7/2/97	to long term foster care	
a.	12	Y	4036	2,3, loss, DD	12,17	3/6/95	Y	Y
a.	11	Y	1766	0	11,15, may go home	1/7/95	N	N
a.	7	Y	1882	5 2sibs	13	6/11/97	N	N
	a.	7	Y 1882	5 2 sibs	13,14	6/11/97	N	N
b.	15	Y	1591	age	11	11/13/93	N	N
b/	14	Y	5294	3.4. SED	18 wait stable	4/10/95	N	N
a.	9	Y	1644	0	16	1/12/96	Y	N
a.	8	Y	1766	4	11, 15	2/7/95	N	N
a.	12	Y	1766	0	11,15	2/7/95	N	N
a.	7	Y	1766	0	13,10	7/18/94	Y	N

a.	7	Y	913	1,2,4 braincancer	12, 18	tribe approval	6/4/97	Y	N	
a.	11	Y	337	3,4	17		5/21/97	N	N	
a.	6	Y	1892	0	10,14		2/15/96	N	N	
a.	11	Y	828	3,5 SED 1sib	10		4/30/96	N	N	
a.	13	Y	828	3,5 SED 1 sib	10		4/30/96	N	N	
a.	9	Y	2132	0	10, 14		11/22/94	N	N	
a.	8	Y	2130	0	10,14, 16		11/22/94	N	N	
a.	11	Y	2132	2,3 SED, DD	10		11/22/94	N	N	
a.	11	y	1453	3,4 many 1/2 sib	10, 14		2/2/96	N	N	
*e.	15	Y	2648	0 listed	0 listed		6/18/97	goal changed to perm fc		
b.	13	Y	666	3,4 SED, sniffer	11		4/30/96	N	N	
a.	4	Y	1309	5	18 icpc		6/10/94	Y	N	
OFFICE KENAI										
<i>GOAL</i>	<i>AGE</i>	<i>ICWA</i>	<i>TIME</i>	<i>SPECIAL NEEDS</i>	<i>BARRIERS</i>		<i>DATE/GOAL</i>	<i>I</i>	<i>N P PLM'T</i>	<i>C4</i>
a.	9	N	2955	3,4,5 attachment	12		12/22/92	N	Y	
a.	11	N	2955	3,4,5, "	12		12/22/82	N	Y	
a.	8	N	1879	3 4,5 SED	13,14		1/27/96	U	N	
a.	5	N	1879	3,4,5 SED	13,14		4/18/95	U	N	
a.	8	N	1536	1,3,5 3sibs SED	9,10		5/19/93	U	N	
b.	15	N	505	3, SED loss, 24hr	11, 17		3/15/96	N	N	
a.	7	N	1536	1,3,5 3sibs	9		5/19/93	U	N	
a.	12	N	1536	1,2,3,5 SED 24	9,10		5/19/93	U	N	
a.	6	N	2333	3,4,5	13,14		2/15/94	U	N	
a.	4	N	1262	1,3,4,5 SED	13,14		11/4/94	U	Y	
a.	6	N	722	6 child black	13,14,16		8/11/95	Y	N	
b.	2	N	554	4,	11,14		1/26/96	Y	N	
a.	9	N	1536	1,2,3,5 3sibs	9		5/19/93	N	N	
a.	1	N	610	1,2,3,4, FAS	9, 13		12/1/95	Y	N	
b.	15	N	418	3,age SED	11,14		6/10/96	N	N	

a.	2	N	722	1,4,, FAS/FAE	13,14,16	8/11/95	Y	N	
a.	14	N	3410	1,3,5 depress 2sibs	11,13,12,17	9/17/94	N	Y	
a.	5	Y	1689	0	13,12,16	2/13/93	Y	N	
c/d	15	Y	228	5 lsib	11,13	6/10/96	N	N	
c/d	15	N	4097	5 2sibs	11,12,13	6/8/94	N	N	
c/d	13	N	4097	5, 2 sibs	11,12,13	9/22/92	N	N	
c/d	8	N	736	1,3, ADHD, PTSD	11,13	11/15/96	N	N	
c/d	7	N	725	5 3sibs	11	8/7/95	N	N	
c/d	7	N	101	5, 1 sib	11,14, relative sea	4/23/97	N	N	
c/d	5	N	101	1,2,3,5 1 sib	11,14, "	4/23/97	N	N	
*e	2	Y	950	1,2,4,5 2sibs	11,16	12/7/95	Y	N	
d.	16	N	850	3,5, 3sibs mdead	11	9/27/95	Y	N	
c.	4	N	604	3,5,1sib	11,18 mom h/c	12/7/95	Y	N	
c/d	6	N	639	2,5 3sibs	11, 14	11/20/91?	Y	N	
c/d	3	N	639	5 3sibs	11,14	11/2/95	Y	N	
e	7	N	781	4, poss.FAS/FAE	13	4/15/96	Y	NA	
e	3	Y	781	1,cocaine4,FAS?	13	6/15/95	Y	NA	
e	2	Y	780	1,cocaine,4,FAS	13	6/14/95	Y	NA	
e	6	Y	781	4 FAS/FAE 5	13	4/15/96	Y	NA	
office McGRATH									
<i>GOAL</i>	<i>AGE</i>	<i>ICWA</i>	<i>TIME</i>	<i>SPECIAL NEEDS</i>	<i>BARRIERS</i>	<i>DATE/GOAL</i>	<i>I</i>	<i>N P PLM'T</i>	<i>C4</i>
A.	4	Y	1563	4,5, FAE	9,13, 10 DIF.FINDP	4/23/96		Y	N
Office ANCHORAGE									
<i>GOAL</i>	<i>AGE</i>	<i>ICWA</i>	<i>TIME</i>	<i>SPECIAL NEEDS</i>	<i>BARRIERS</i>	<i>DATE/GOAL</i>	<i>I</i>	<i>N P PLM'T</i>	<i>C4</i>
a.	5	N	830	3,4,5,6,	8 adopt fam conc	4/25/95		Y	U
a	7	N	830	3,4,5,6,	8 above	4/25/95		Y	U
a	7	Y	2734	3,4,fetal hydantoin	9 court delay	3/5/94		N	Y
ANCHORAGE									

GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	I	N P PLM'T	C4
a	7	Y	743	4, FAS, 5	n/a	7/21/95		Y	Y
a.	6	Y	743	4, FAE, 5	n/a	7/21/95		Y	Y
a.	8	N	1079	o	12	9/1/94		U	C3
a.	0	N	290	4	9	10/16/96		U	N
a.	4	Y	1432	4	12,18 wrk delay	3/32/94		Y	Y
a.	0	N	186	4	13	2/297		Y	C3
a.	5	Y	1130	4	scheduled adopt 11/97	6/29/94		Y	Y
a.	1	Y	589	4	9	4/30/97		Y	N
a	3	Y	667	4	scheduled 10/23	10/29/96		Y	Y
b	15	Y	1647	2,3,8 behaviors	0	10/15/93		U	N/a
a	4	N	1347	4	est pat, out state	1/30/95		U	N
b	9	N	1366	3, SED,t	13	11/10/93		Y	C3
a	0	U	177	6	13	2/7/97		U	N
a	5	Y	551	3,6	13	9/21/93		U	C3
a	1	Y	478	4, FAS	13	12/19/96		U	C3
a	13	Y	1177	0	0	5/12/95		U	Y
b	15	Y	1177	3, SED	13 lost oppo for adopt	5/12/95		U	Rights Reins
a.	3	Y	738	4 FAE	9, 13	8/17/95		U	N
b	2	Y	738	4 SED	9, 13, 17	8/17/95		U	N
g	9	Y	738	4 SED	9, 13, 17	8/17/85		U	N
a.	1	Y	513	0	13	3/7/96		U	N
b	11	N	2617	3, PSTD	9,10,13 Complexcase	2/23/96		U	N
a	13	N	1140	3 SED	13	6/19/94		Y	Y
a	9	N	1096	3 SED	13,17	8/2/94		N	Y
a	1	N	668	4 drug exp	13, 18 trial post t	4/30/97		Y	N
a	2	Y	549	4 FAE	13	1/31/96		Y	Y
b	8	Y	738	3 SED	9, 13 17	8/17/95		N	N

ANCHORAGE continued

GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	I	N P PLM'T	C4
a	5	Y	738	3,4FAE, 6	9,13,17	8/17/95		N	N
b	16	Y	814	6	13	5/31/91		Y	NA
a	5	N	497	6	13	4/3/96		N	N
a	4	N	497	6	13	3/23/96		U	N
a	6	Y	497	6	13	3/23/96		U	N
a	5	Y	1460	6	13	4/11/96		U	?
a.	7	N	2262	6	13	1/6/96		U	C3
a	8	N	1460	6	13	1/6/96		U	C3
a	4	Y	810	3	13 not time find home	1/8/97		Y	Y
b	13	Y	3382	3 SED	13	9/3/93		U	NA
a	1	Y	425	2,FAE,3,4, Asthma	17 no place	6/9/97		N	N
a	1	Y	634	2,DD,4	15 Tribe	12/5/96		U	Y
a	8	N	540	2,3 ADHD Condu	12,18 trial plc	2/12/96		Y	Y
a	2	N	821	2,4, FAS/FAE	13 TWIN	6/6/97		Y	N
a	2	N	821	2,4 FAs/FAE	13 twins	6/6/97		y	n
b	15	N	638	3 PTSD	18 fail guard	5/9/97		N	NA
a	13	N	1633	0	12, 13	11/16/95		Y	Y
a	2	Y	872	0	18 GAL op GM	6/28/97		Y	Y
a	10	Y	2833	3 SED	18 entry Casey	5/24/94		N in hosp	Y
a	13	Y	1912	4	9,18 need good c	6/3/92		Y	Y
a	15	Y	1912	4	9,18 "	6/3/92		Y	Y
a	9	Y	1912	4	9,18"	5/25/92		Y	Y
a	7	Y	1912	4	9,18 "	5/26/92		Y	Y
a	7	Y	1115	1,4 neurofibro	10	7/28/94		U	N
a	6	Y	1115	1,2,4	10	7/28/94		U	N
a	9	Y	1115	1,4,6	10	7/28/94		U	N

ANCHORAGE continued

GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	I	IN P PLM'T	C4
b	14	Y	1228	3, SA alcohol	17,18 residential	6/6/91		N	Y
a	3	N	1115	0	12	12/21/95		Y	Y
a	0	N	316	4 parents DD	18 mom rel, d.dead	2/11/97		Y	N
a	1	Y	558	4	10, 18 GAL delay	6/3/97		Y	N
a	2	Y	726	6	10, 18 GAL delay	6/3/97		Y	N
a	11	n	1208	6, sed	17, fail a plc	4/12/94		N	Y
a	1	Y	610	1, HIV, 4	10, 16	12/1/95		N	C3
a	5	N	193	3, SA, nightmare	10, 16	1/21/97		U	N
a	4	N	913	4	10, 18	2/15/94		Y	C3
a	5	Y	1110	6	9,10,13,15	8/1/94		Y	N
a	1	N	540	1,4,twin	16, 18	2/9/96		U	Y
a	1	N	540	1,4 twin	16,18	2/9/96		U	Y
a	10	n	1054	3	14,16	7/2/95		Y	Npend
a	1	N	549	4	10, 18 AAG&GAL	12/14/96		N	N
a.	4	Y	1344	4, FAE, DD 6	18 mom tried	4/25/97		Y	N
a	6	Y	1344	4 FAS/FAE 6	18 "	2/22/94		y	N
a	5	Y	1344	4 FAS/FAE 6	18 "	4/25/97		Y	N
a	7	N	1654	2, SED, ADHD SA	17 failed 3 a plc	2/11/94		N	Y
a	12	Y	568	3, PA severe	17, 18 residential	1/2/96		N	N
a	3	Y	909	1, torticollis	18 mom tried	2/2/96		Y	C3
a	5	Y	780	1,4, malnourish	18 "	6/14/95		Y	C3
a	5	N	1152	2,3, odd persona	13.	7/7/94		Y	N
a	10	N	1208	2, mental ill, SA	17 child unstable	11/2/94		N	Y
a	7	Y	1054	6	9,12, 16l, 15, 18	9/19/94		Y	Npend
a	12	N	1654	3 SED 6	17	2/17/94		N	Y
b	10	N	676	3,4, SED	15 Dad	9/26/95		N	N

ANCHORAGE continued

GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	I	IN P PLM'T	C4
a	14	N	838	2, SpecED behav	12,13	3/13/95		N	N
a	10	N	577	6	12,13	5/18/96		N	N
a	13	Y	179	3, behavior	12,13	4/1/91		N	N
b	9	N	457	2 ADHD,3 Aband	18 contest G	5/2/96		Y	NA
d	14	N	585	3 SA	11	12/26/95		Y	NA
a	8	N	679	3 ADHD 6	9	10/97		U	N
a	6	N	679	3 ADHD in fantasy	9	10/97		U	N
a	5	N	679	1,3 ADHD	9	10/97		U	N
b	15	Y	2124	3 ADHD	16 17	4/20/94		N	N
b	16	N	869	1,2,3 ADHD, DD	13	11/23/92		N	NA
a	7	N	101	2 SED attachment	3	4/23/97		N hosp	N
a	14	N	1348	3 attachment		11/14/94		N MYC	Y
a	8	N	2745	0	18 ICPC refusal	7/18/91		Y	C3
a	10	N	2745	0	18 ICPC refusal	7/18/91		Y	C3
b	13	N	694	0	11	4/30/93		U	NA
b	12	N	694	0	11	4/30/93		U	NA
b	9	N	694	0	11	4/30/93		U	NA
a	7	Y	753	3 SED attach	11	8/2/95		N	N
b	7	N	878	0	11	3/14/95		N	NA
b	4	N	878	0	11	3/14/95		N	NA
a	7	N	2745	0	18 ICPC refusal	7/18/91		Y	C3
a	3	N	968	0	13 need TP wkup	8/10/97		N	N
a	10	Y	253	0	13 "	8/26/97		N	N
a	14	Y	255	2,3. SED	13 "	8/26/97		N	N
A	1	Y	590	0	13 T/P workup	12/10/96		N	N
A	3	N	674	3, sep. anxiety	10	6/25/96		N	N
A	8	N	968	0	13, 14	8/10/97		U	N

ANCHORAGE continued

GOAL	AGE	ICWA	TIME	SPECIAL NEEDS	BARRIERS	DATE/GOAL	I	IN P PLM'T	C4
B	9	Y	659	0	9, 16	5/27/97		N	N
A	3	Y	957	3 sep anxiety	9	1/26/97		N	N
b	14	Y	659	0	16	5/27/97		N	NA
b	12	Y	659	0	16	5/27/97		N	NA
b	9	Y	539	2,3, SED	16	2/24/97		N	N
a	3	N	1079	4	12	4/8/96		N	N
a	4	Y	774	2,3,4 SED FAS/FAE	16 parents reling slowly	3/15/96		N	N
a	3	Y	774	3,4 lang delay	16	3/15/96		N	N
a	1	Y	425	2,3,4, FAS asthma	17,13	6/9/97		N	N
a	3	Y	425	2,3,4 FAS	9	6/9/97		N	N
a	4	N	674	3, depression anxiety	10	6/25/96		N	N
a	0	N	309	2,4, drug	0	5/4/97		U	N
b	12	Y	3302	6	14,16,	7/22/97		U	NA
a	5	N	572	2, ADD	15, 12	12/3/96		U	N
a	6	N	572	2 ADD	12, 15	12/3/96		U	N
a	4	N	572	2 ADD	12, 15	12/3/96		U	N
a	8	Y	1105	2,3,5 SED	10, 16	9/9/97		N	N
a	7	Y	1105	2 SED	10 16	9/9/97		N	N
b	4	N	409	5	0	1/6/97		N	NA
a	2	Y	787	1,2,5 Head inj. DD	17, 18	12/9/96		N	N
a	8	N	1207	5	16, 18 failed plcmt	12/20/93		N	N
c	1	U	536	1, med Frq2, DD	9,11,13	2/13/96		N	N
c	0	Y	236	4,5	11,13,14	12/9/96		N	N

Reports of Harm

Total Reports: 15,547

Children: 10,638

Families: 6,349

Screening

Cases Assigned: 10,529

Screened out: 1,279

Workload Adjusted: 3,739

Custody

New children in out-of-home care: 845

New adoptions, guardianships:

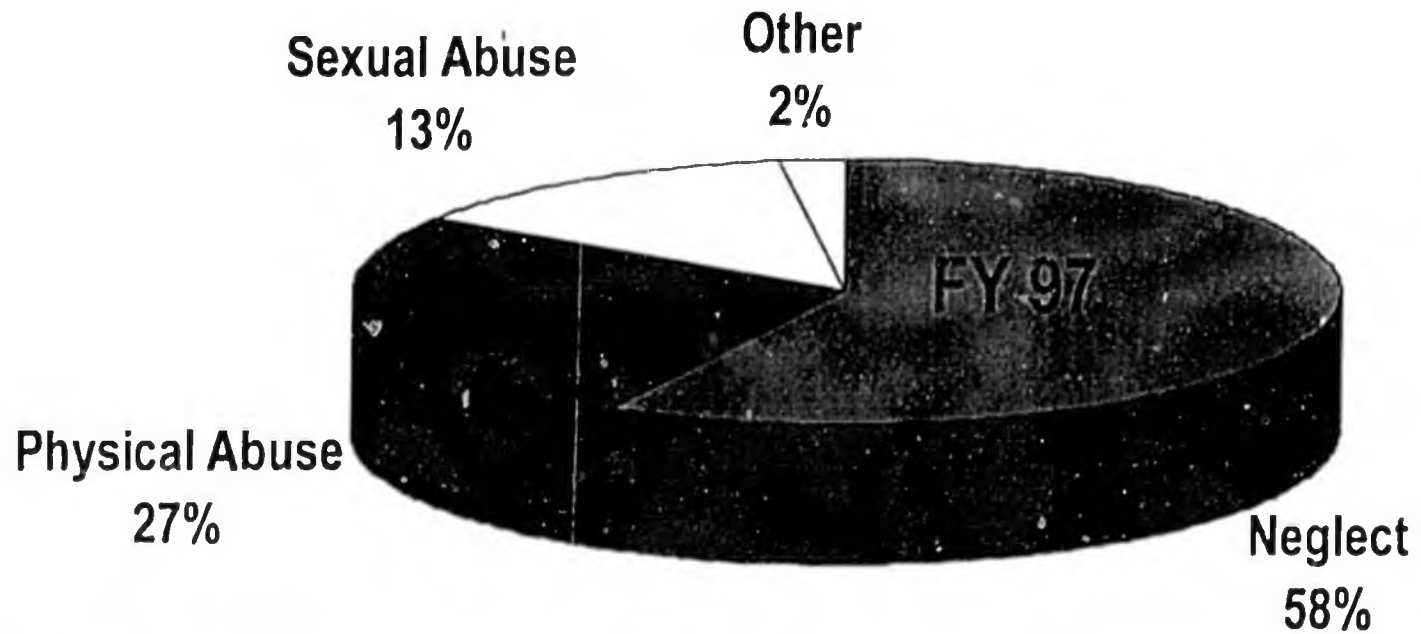
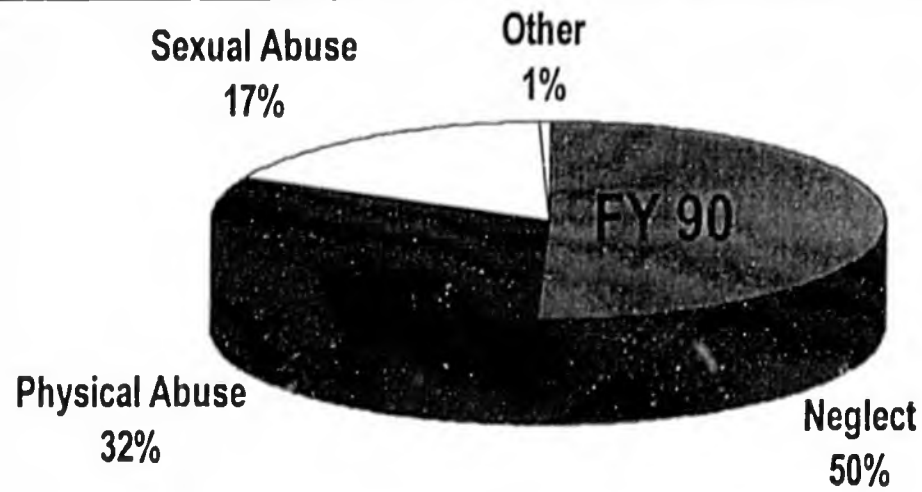
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Child Protection in Alaska

A snapshot of FY 97

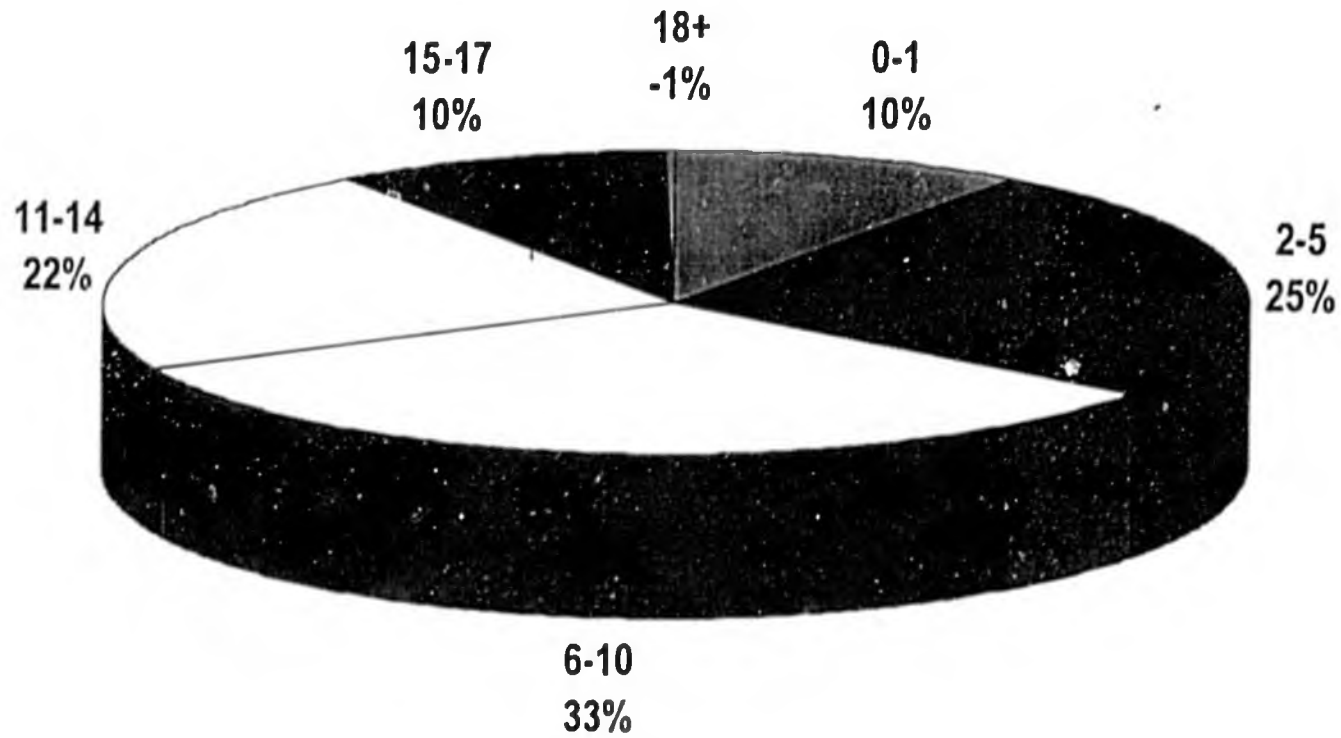
Reports of Harm:

Neglect reports lead growth



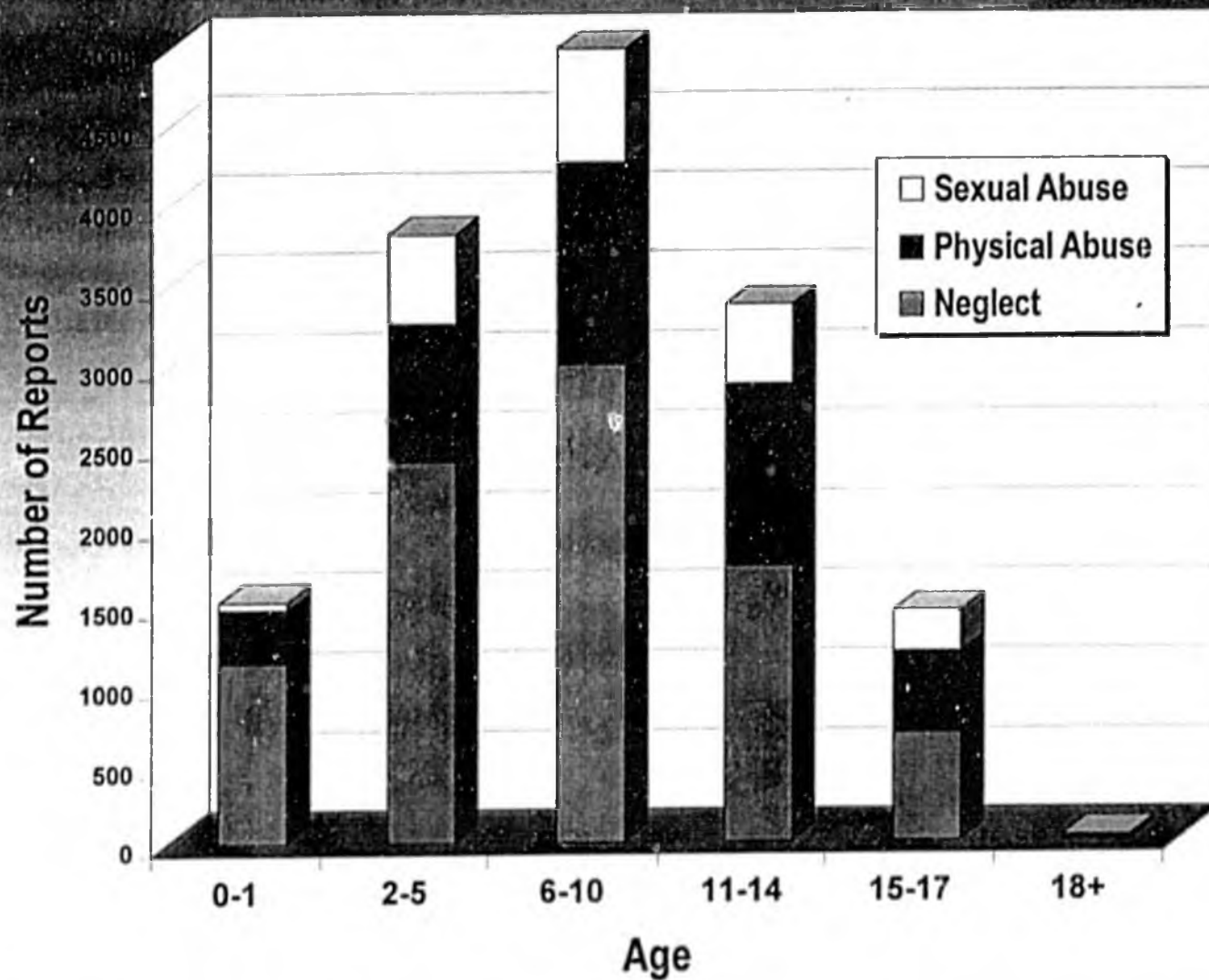
Reports of Harm -- By Age

FY 97

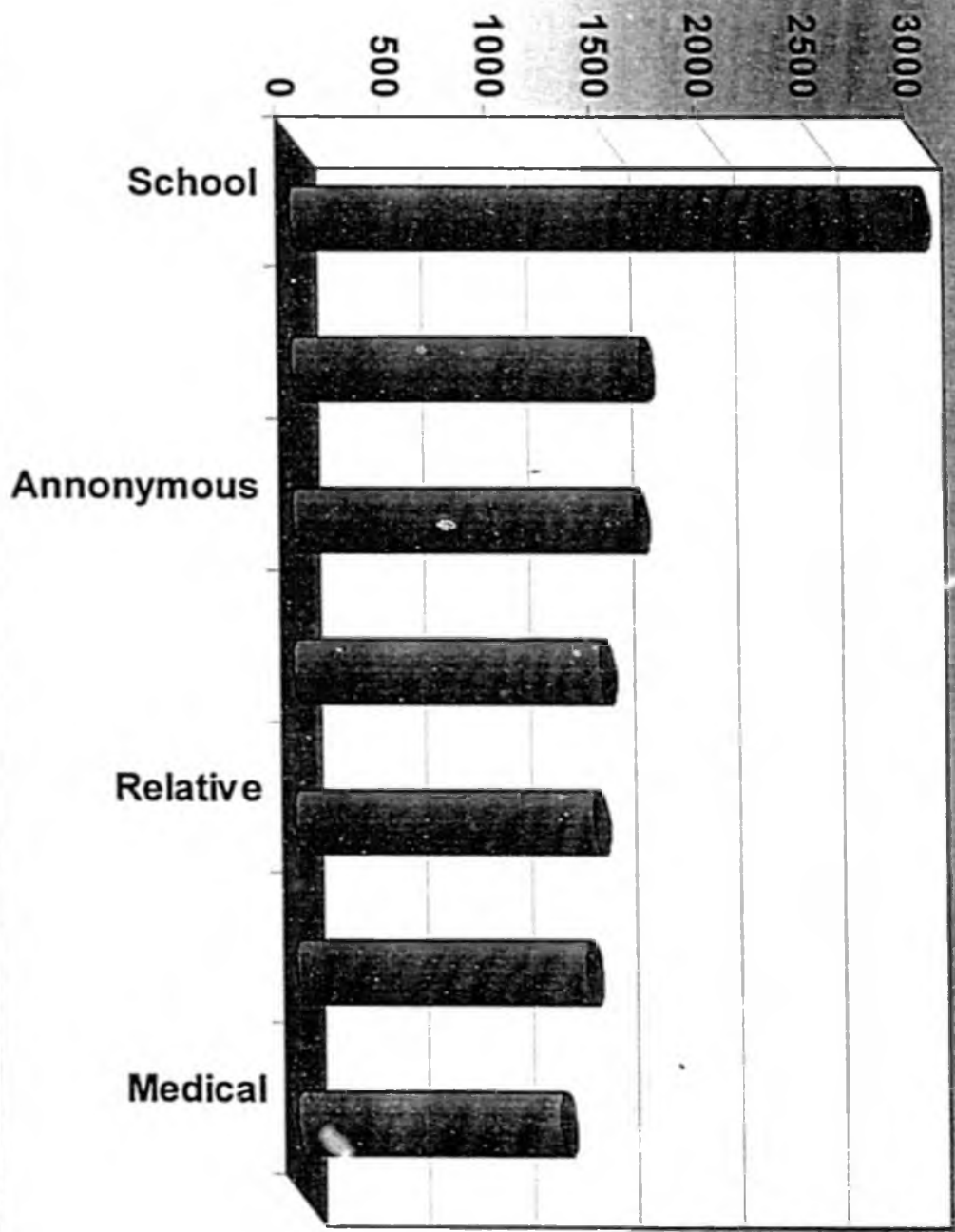


Nearly 70 percent of all reports involve children under 10 years old

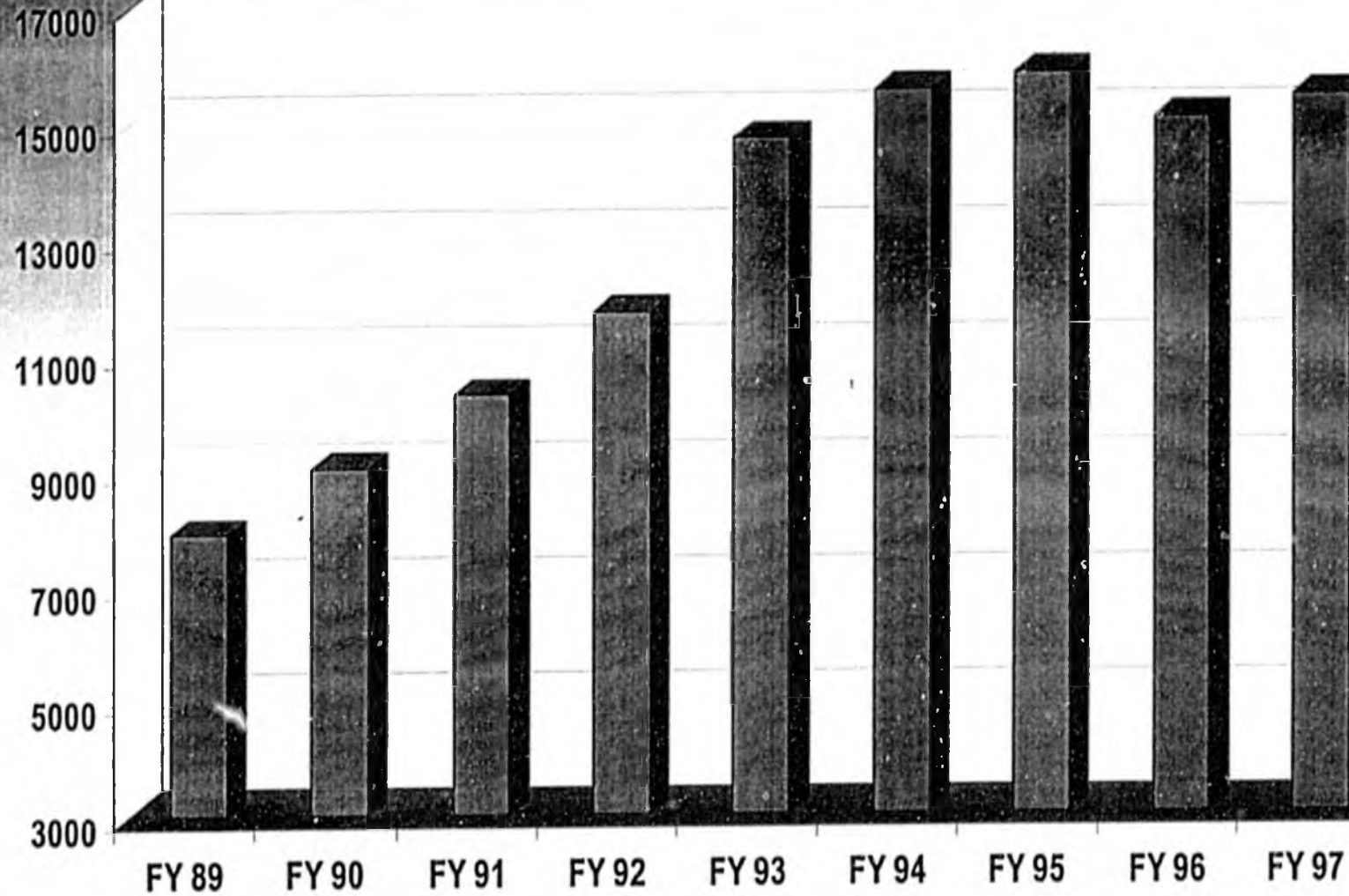
FY 97 Reports of Harm -- By Type and Age



Top Reporters of Harm -- 1997



Reports of Child Abuse and Neglect



So far in FY 98...

- ❑ 13 percent increase in reports of abuse and neglect
- ❑ 60 percent increase in custody petitions
- ❑ Total children in custody tops 1,600
- ❑ 1,655 reports that should have been investigated were screened out due to workload
- ❑ DFYS down to 12 social worker vacancies statewide

Building a better child protection system.

Finding new solutions to old problems

- 1992 -- Legislative Audit criticizes DFYS reorganization

- 1996 -- Commissioner establishes DFYS Evaluation, Research and Development Unit

- Over the next two years, commissioner orders five separate internal audits of DFYS

History of internal audits

- Administrative review of DFYS Anchorage office
- University of Washington full case-file audit of Anchorage office
- Fairbanks child fatality review
- Kempe Center review of five DFYS cases
- Statewide audit of cases involving multiple (6+) reports of harm

What did we learn from the audits?

Our statewide audit of cases with multiple (6+) reports of harm asked some basic questions:

- ***Are children safe?***
- ***Did DFYS accurately assess each report of harm?***
- ***Was appropriate action taken to assure the safety of the children?***

The audit covered 475 family case records involving approximately 838 children.

- 78 cases involving 131 children were referred back to DFYS for further investigation
- As a result, children in six of the cases were taken into state custody
- The audit also shed light on some of our most disturbing problems:
 - Too many reports of harm are never investigated
 - Substance abuse is a factor in more than 80 percent of child abuse or neglect cases
 - Domestic violence is a factor in nearly 60 percent of the cases

Of cases reviewed, 20 percent were 'workload adjusted'

Screening Outcomes by Region and Type

Cases with 6 or more reports of harm between July 1994 and Sept. 1997

	Total Reports	Assigned for Investigation		Workload Adjusted		Non-CPS		Insufficient Information	
Region		Number	Percent	Number	Percent	Number	Percent	Number	Percent
Northern	3235	1725	53%	880	27%	439	14%	191	6%
Southeast	675	345	51%	4	1%	314	47%	12	2%
Totals	6600	4277	65%	1315	20%	788	12%	220	3%

Screening Outcome of all Reports of Harm -- FY 97

Office	Total Reports of Harm	Assigned for Investigation		Workload Adjusted	
		Number	Percentage	Number	Percentage
Bethel	1361	668	49%	482	35%
Anchorage	5725	5090	89%	589	10%
Kenai	881	669	76%	155	18%
Mat-Su	1052	343	33%	707	67%
Fairbanks	2534	990	39%	1403	55%
Juneau	752	393	52%	182	24%
Ketchikan	422	207	49%	108	26%
All Ohters	2820	2169	77%	114	4%
Statewide	15547	10529	68%	3739	24%

* *Of the total Reports of Harm, 922 (6%) were screened out as non-child protection issues and 358 (2%) were screened out due to insufficient information.*

‘...The Department shall, for each report received, investigate and take action ... that may be necessary to prevent further harm to the child or ensure the proper care and protection of the child.’

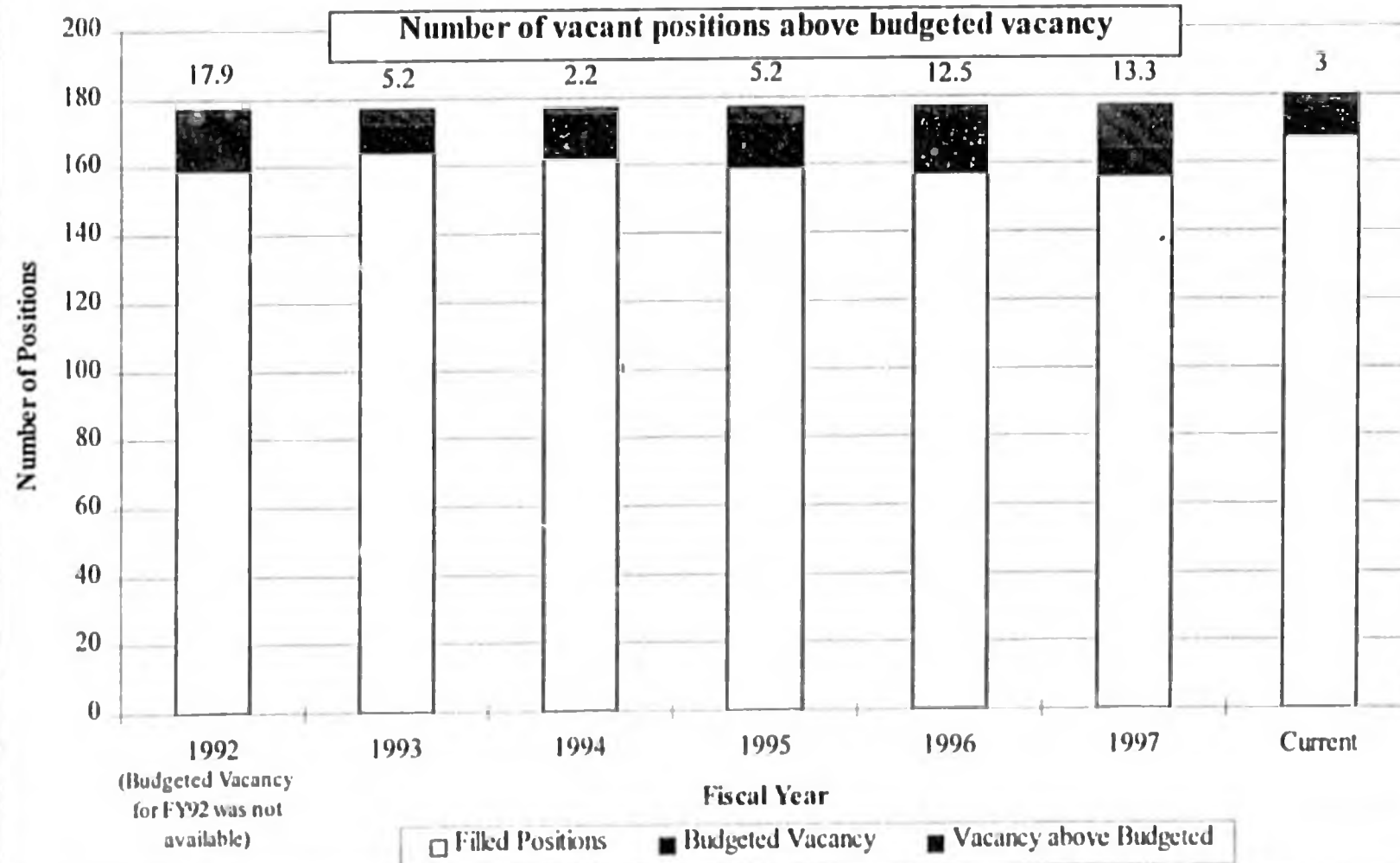
-- AS 47.17.030 (emphasis added)

What did we learn from the audits?

Casework Practice:

- ❑ Lack of consistent practices between regions
- ❑ Poor record keeping, case documentation
- ❑ Lack of coordination between agencies
- ❑ 'Single event' approach to child protection
- ❑ Overlap of substance abuse, domestic violence

Department of Health & Social Services Social Worker Positions, FY92-97 Averages and Current



What did we learn from the audits?

Staff issues:

- ❑ Caseloads exceed recommended national standard
- ❑ Inadequate training and education opportunities
- ❑ In the past, high turnover and vacancy rates
- ❑ Expectations of supervisors not clearly defined
- ❑ Inadequate safety and support for social workers

What did we learn from the audits?

Placement:

- ❑ Shortage of foster homes, other residential care
- ❑ Inadequate foster parent training and respite care
- ❑ Poor communication with foster parents
- ❑ Delays prevent timely adoptions

What other problems have we identified?

- ❑ At-risk kids are left in homes too long, or returned home too soon
- ❑ Children languish in foster care
- ❑ Reasonable efforts must be made to help families with chronic and difficult problems
- ❑ Some child fatalities caused by neglect or abuse are not detected or investigated

*"When you have a hammer,
every problem looks like a
nail."*

What are we doing to fix the problems?

- Established permanent Child Fatality Review Team to review all child deaths
- Will help assure that all deaths caused by neglect or abuse are investigated and prosecuted
- Child Fatality Review Team includes:
 - State medical examiner
 - State Trooper and local law enforcement officer
 - Prosecutor and experienced social worker

What are we doing to fix the problems?

- Restructuring DFYS to improve accountability
- Zero Tolerance -- all reports of harm checked out
 - Triple-track pilot projects turn some low-risk cases over to community-based groups
 - Additional social workers to better protect kids
- Working with Child Welfare League of America to create detailed quality-assurance program

What are we doing to fix the problems?

- Improving Alaska's child protection work force
 - Family Services Training Academy
 - Increasing minimum qualifications for social workers
 - Reducing vacancies to below budgeted levels
- Improving teamwork by creating multi-agency teams to oversee child-protection issues
- Better, faster access to criminal records and family abuse histories

What are we doing to fix the problems?

- Foster care improvements
 - Increase reimbursement rates and respite care
 - Aggressive recruitment program
 - Emphasis on foster parent training
 - Formal role for foster parents

- Greater efforts to tackle substance abuse
 - Treatment priority for DFYS clients
 - Additional substance abuse screeners
 - FY 99 budget expands treatment programs

What are we doing to fix the problems?

- Improving response to mental health issues
 - Additional clinicians in DFYS offices
 - Regional meetings of Mental Health, Developmental Disabilities, Substance Abuse and DFYS staffs
 - Increase therapeutic foster care and community-based funds

- Faster adoptions
 - Contract with private adoption agencies
 - Special legal resources to speed termination

“Alaska statutes are more narrowly drawn in certain respects than those of almost any other state.”

Kempe Children’s Center, December 1997

Under current state law, the harm is often done before the state can intervene:

AS 47.10.010 defines an abused child as one “having suffered substantial physical harm or if there is an imminent and substantial risk that the child will suffer such harm.”

What are we doing to fix the problems?

HB 375 -- Omnibus Child Protection Bill

- Increases penalties for homicides of children
- Tightens sex offender registration requirements
- Allows early intervention in cases of abuse and neglect
- Assure faster transition to permanent, safe homes
- Gives caregivers access to child welfare hearings
- Confidentiality fixes improve teamwork, accountability

Reports of Harm

Total Reports: 15,547

Children: 10,638

Families: 6,349

Screening

Cases Assigned: 10,529

Screened out: 1,279

Workload Adjusted: 3,739

Custody

New children in out-
of-home care: 845

New adoptions,
guardianships:

161

Child Protection in Alaska

A snapshot of FY 97

Custody and Foster Care

Children in out-of-home care: 1,607

Living with relative: 515

In foster care: 891

In residential care: 78

In other setting: 123

Guardianship & Adoption

Children in line for adoption or
alternative placement: 416

Termination

Children with at least
one parent's rights
terminated: 202

Total adoption
& guardianship
subsidies: 933

Child Protection in Alaska

Ongoing care -- As of 2/1/98



Alaska State Legislature

Please enter into the record my testimony to the HHES
committee name

committee on HB 375, dated 3-5-98
bill # / subject

3 PGS ATTACHED

Signed: Cindy Houser
Testifier
Foster Parents Kenai area
Representing (Optional)
HC 2 Box 596 Kaslof Ak. 99616
Address
907-262-7937
Phone number

Cindy Houser

~~For~~ Treas

Voice for the Children

Some of the problems I see

are:

(1) Children given back to parents,
just to be taken back into custody.

I have had Social workers
say to me that they know
they will have to pull them again
in a few weeks, after putting
them back with parent.

(2) Parents lying about jobs
& situations & doing just enough
of the case plan at the last
minute and getting the child back
without having anything changed in
the situation they had been taken
out of in the first place.

This causes children to be
placed numerous times & ending
up in numerous foster homes for years.

These are some of mess up hard to
place teenagers we have in care now.

2

(3) I have a real problem with D.F.Y.S. social workers etc. Not being held liable or accountable but we as Foster Parents are held liable. If they aren't liable then we as Foster Parents should have the same protection. We shouldn't be accountable for something a foster child has done. Who has custody of this child? the state right. Fine starter

Solution:

- (1) Automatic Termination of Parental rights on having children taken away for the second time or if the child was severely abused, tortured or sexually abuse. That would keep children from going back & forth numerous times, ending up ruined in the process.
- (2) Have Judges, D.F.Y.S. Social ^{Supervisor} workers etc held accountable for the children

3

They send back to questionable parents.

(3) Supplying our G.A.'s with an attorney to help them fight for the best interest of the children.

(4) Foster Parents need to have a say in all hearings & in court. We are the ones that know the children.

(5) Foster Parents need to be protected from liability. You would keep your Foster Parent without the large turn over you have now.

(6) D.F.Y.S. workers all should have a yearly drug test (hair or) All Foster Parent should have one to get their licenses & before each renewal.

Does it DEAL with Children?
HB 375 to many loop holes goes against Foster Parents SHOULD NOT BE PASSED!!



NASW

ALASKA CHAPTER

**NATIONAL ASSOCIATION OF SOCIAL WORKERS
ALASKA CHAPTER**

318 4th Street, Juneau AK 99801
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naswak@alaska.net

Testimony Regarding

HB 375 - CHILD PROTECTION AND FOSTER CARE

Before the
**HEALTH EDUCATION AND SOCIAL SERVICES COMMITTEE
ALASKA HOUSE OF REPRESENTATIVES**
March 11, 1998

Presented by
Angela M. Salerno, ACSW
Executive Director,
National Association of Social Workers Alaska Chapter



NATIONAL ASSOCIATION OF SOCIAL WORKERS ALASKA CHAPTER

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ALASKA CHAPTER

The National Association of Social Workers (NASW) is the world's largest organization of professional social workers. NASW's 155,000 members nationwide and 460 in Alaska work in a wide range of settings at all levels in the public and private sectors. Professional social workers focus on vulnerable populations and promote state and federal policies which enhance the lives of the clients we serve.

NASW supports HB 375 and urges its passage.

Families are the first caregivers for children. Families have the first responsibility for the physical and emotional well-being of children. Families also have a right to care for their children free from state interference in basic decisions about child-rearing practices. But we believe that parental rights derive from parental obligations. And when these obligations are unfulfilled, the corresponding rights may be abrogated. This is the basis for the state's role in child protection. Each year, thousands of Alaskan children are subjected to abuse and neglect at the hands of their caregivers. When a child is harmed by his or her caregiver, the state must provide the child with some assurance of outside protection and support.

HB 375 begins the process of improving child protection services in Alaska by making changes in law which better protect the rights of abused and neglected children. The changes proposed will assist the Division of Family and Youth Services fulfill its mandate to protect abused children from further maltreatment and to alleviate the consequences of maltreatment. Child protection workers will be able to intervene earlier in cases of neglect and perhaps prevent more severe consequences. Parents will find new motivation imposed by enforced timelines for fulfilling their parental obligations. And there will be no confusion about the basis for decisions made by child protection workers - safety, permanence and the best interests of the child.

While we support the provisions of HB 375, we want to bring to your attention the social work profession's historic commitment to child protection through comprehensive efforts to ensure the safety and healthy development of children. In promotion of these efforts, NASW supports the following principles:

- Sufficient public and private funding, staff and resources should be provided to meet the needs of abused and neglected children and their families. The state of Alaska is guilty of "collective neglect" when it fails to staff child protection adequately and over 3500 cases of neglect go uninvestigated. More serious may be the institutional maltreatment experienced by foster children now languishing in long-term foster care.
- Public and private agencies and systems that serve children and families should work collaboratively to maximize their resources and effectiveness in preventing child abuse and neglect and effectively treating victims and their families. Such a collaborative network would include child protective services, courts and law enforcement agencies, and medical, education, and mental health providers.
- A comprehensive approach to the prevention of child abuse and neglect should include increased public awareness and availability of family support services, parenting education, and training for staff in the identification of risk factors for children and families. A comprehensive approach to prevention must also address the stressors that precipitate family violence. Community-based services to enhance and support healthy family life include child care, counseling, case management, job training, health, mental health and substance abuse services and adequate financial support for families.
- Public policy and resource allocation to protect children should support specialized law enforcement, child abuse investigative units, child advocacy services, mandatory reporting of suspected child neglect and abuse, continued professional training of staff working with children and families, and community-based efforts toward identification and early intervention in situations of suspected child abuse and neglect.

FACSIMILE COVER PAGE

To : Con Bunde, Chai HESS COMMITTEE

From :

Sent : 3/12/1998 at 11:47:18 AM

Pages : 4 (including Cover)

Subject : Written Testimon On HB 375

Please accept the attached written testimony opposing HB 375 from Advocates For Children, Inc.

ADVOCATES FOR CHILDREN INCORPORATED

310 West 76th Street, No. C
Anchorage, Alaska 99518
advocate@ptialaska.net
(907) 522-9268

Karen L. Leonard

Chairman and CEO

WRITTEN TESTIMONY HOUSE BILL 375 March 13, 1998

A. **Advisory Legal Committee.** HB 375 attempts to address issues of legitimate concern regarding child welfare. However, drafting and interpreting the ramifications of the statutory language, as well as opinions regarding the mandatory versus permissive requirements of the new federal requirements under PL 105-89, have been left entirely up to the Office of the Attorney General and the Department. The result has been an unbalanced piece of legislation that lacks clearly reflects the best interests of the DFYS but contributes very little to the best interests of *children or the general public*.¹ It is clear that both the legislators and the Department need the advice of attorneys who have been in the trenches, but from a team composed of both sides of the, instead of only the state AG's office. I strongly urge legislators to place HB 375 on hold and form a committee of state attorneys and private attorneys to: (1) review Public Law 105-89 and determine the minimum mandatory requirements, and (2) draft balanced statutory language that implements those requirements. Scrap the balance of the bill and take the next year to do it right. In the event such a committee is formed, I request the opportunity to submit the names of private attorneys for appointment who have substantial criminal and CINA experience. In the event that the bill is not placed on hold and a committee is not formed, I very strongly urge the Committee to kill HB 375 in its entirety in committee - the public wishes.

Administrative Reform. House Bill 375 and its companion, Senate Bill 272, puts the proverbial "cart before the horse." Common sense dictates that we must first identify and correct the administrative and system failures within the agency itself that have caused it to inadequately perform its existing mandates for protecting children. For that purpose, the Legislative Budget and Audit Committee properly undertaken the considerable expenditure of DFYS performance and financial audits. These audits will produce information that is *critical* to enabling legislators to make informed, quality decisions regarding reform. Then, in response to those audits, it will take *considerable time* for administrators to implement decisions and programs to cure the faults disclosed by the audits. To rush into a "quick fix" based upon the emotions of the moment would be imprudent, and can and will result only in *increasing* the types of tragedies that have

¹ The Dept and the AG's office see the worst of human behavior that *none of us* want to deal with. Some of the most horrendous examples of human behavior are observed by them, and may be the hardest to prosecute effectively. We cannot, however, overreact by providing such a broad extension of the state's authority to intrude into the family in an attempt to make it easier to prosecute the few without disastrous affects upon the majority of families who will (for right or wrong reasons) encounter intrusion by the state into their families. We cannot sacrifice the majority for the minority.