

**Citizen Review Panels (CAPTA panels):
Jackson, Multnomah and Malheur Counties**

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Citizen Review Panels or CAPTA Panels, as they are known in Oregon, work on local systemic issues related to child abuse and neglect within the three designated geographic areas (Jackson, Malheur and Multnomah counties) and provide feedback and recommendations to DHS.

DHS utilizes approximately 11% of the OCAN CAPTA Basic state grant to support the Citizen Review Panels (CAPTA) in Oregon. All three CAPTA panels held Community Child Neglect Summits sponsored by the Children’s Justice Act (CJA) Task Force during July 2007. More information on the Citizen Review Panels (CAPTA panels) is included in the section titled Citizen Review Panel Annual Reports.

Citizen Review Panel Overview

Purpose

The Child Abuse Prevention and Treatment Act (CAPTA) was originally enacted in 1974 to provide annual federal grants to states, based on the population of children under the age of eighteen, in order to improve the child protective services system. An amendment in 1996 added a new eligibility requirement for states to establish citizen review panels. CAPTA panel members are to be volunteers who broadly represent the community in which the panels were established. The mandate of the citizen review panels is to “evaluate the extent to which the agencies (state and local) are effectively discharging their child protection responsibilities.” The panels are required to examine policies, procedures, and where appropriate, specific cases handled by state and local agencies providing child protective services. The panels were also mandated to “prepare and make available to the public, on an annual basis, a report containing a summary of the activities of the panel.”

The act was most recently amended in June 2003 when “Keeping Children and Families Safe Act,” Public Law 108-36, was signed by the President. The law reauthorized CAPTA through federal fiscal year 2008. Public Law 108-36 revised citizen review panel duties to include: 1) requiring each panel to examine the

practices (in addition to policies and procedures) of the state and local child welfare agencies, 2) providing for public outreach and comment in order to assess the impact of current procedures and practices upon children and families in the community, and 3) requiring each panel to make recommendations to the state and public on improving the child protective services system. In addition, the appropriate state agency is required to respond in writing no later than six months after the panel recommendations are submitted. The state agency's response must include a description of whether or how the state will incorporate the recommendations of the panel (where appropriate) to make measurable progress in improving the state child protective services system.

Background/History

Citizen Review Panels were established in three counties in Oregon: Multnomah, Jackson, and Malheur. The counties were selected to reflect the demographic, economic, social and political conditions found in different areas of Oregon. Together the panels provide a significant depiction of the varied conditions of child protective services in Oregon. Technical assistance, guidance and coordination are available to the panels through the Grants Coordinator for Family Based Services, Children, Adults and Families (CAF). CAF has contracted with the child abuse intervention (assessment and advocacy) centers in each of the selected communities to provide facilitation and staff support for the panels.

Multnomah 2007 Annual Report

October 1, 2006 – September 30, 2007

Panel Members

Judy Brandel	Multnomah County Health Dept.
Kevin Dowling (facilitator)	CARES Northwest
Karen Gibbs	DHS
Miriam Green	DHS
Maggy Khilnani	Retired (Bradley-Angle House)
Shelley O'Brian (coordinator)	CARES Northwest
Sara Perkins	Multnomah ESD
Suzie Rush	Cascadia BHC
Christine Stoleberger	Parent Mentor
Ruth Taylor	Parents Anonymous, Morrison Center
Rod Underhill	Multnomah County DAs Office

Meetings

October 10, 2007; January 26, 2007; April 27, 2007; May 24, 2007; June 28, 2007; September 20, 2007. All meetings were held at Emanuel Hospital from 11:00 am – 1:00 pm.

Activities

Community Neglect Summit (July 23, 2007). The purpose of this interactive training was to increase community awareness of child neglect, educate the child-serving community about interventions that support families identified for concerns of neglect, and engage a wide variety of community stakeholders in action planning for vulnerable children and families. Evaluations were collected from attendees to determine if the following learning objectives related to child neglect were met: to increase knowledge, to learn about impact on children, to learn about programs that work and to make action plans for Multnomah county. Based on a scale of 1-5 (1= not at all, 3=somewhat, 5=completely), the training received an average score of 4.0. Approximately 86 people attended, including: Commissioner Dan Saltzman and Warren Fish from Commissioner Jeff Cogan's Office, Judge Paula Kurshner and Char Woods (DA's Office), 23 attendees from DHS, 2 parent mentors, 7 attendees from the Health Department, 7 attendees from CARES Northwest, 7 from the Health Department, 3 from Head Start, and approximately 16 other community organizations were represented.

Approximately 75% of attendees participated in the afternoon "action planning" session.

Groups were asked to consider the parents' voice as well as the issues of linguistic/cultural diversity and poverty as they generated their plans. Seven action plans were developed around the following topics:

- Community collaboration to identify families at risk of neglect before involvement with DHS.
- Improved communication and shared information between CYFC (including the Poverty Advisory Committee), Child Welfare Advisory Committee, CAPTA Panel and Self Sufficiency Advisory Group.
- Community collection of best strategies for Wrap Around Family Driven Services.
- Multidisciplinary teams for families at risk of or experiencing neglect.

- Starting with DHS data, determine characteristics of chronic neglect in Multnomah County to explore more population-based assessment options
- Community partners will help provide trainings to caseworkers and DHS will reciprocate.
- Increase preventative services to families receiving TANF.

Subcommittees

N/A

Future Plans/Next Steps

The Multnomah County CAPTA Panel will monitor progress made on the action plans developed at the Community Neglect Summit and report back to the community stakeholders.

Recommendations

1. We recommend DHS establish a working definition of “chronic neglect”. Efforts to identify, understand and successfully intervene in cases of chronic neglect are hampered by the lack of a clear definition.
2. We recommend DHS improve practice and outcomes regarding chronic neglect cases by utilizing the principles in the Oregon Safety Model such as identifying protective and diminished parental capacity, child vulnerability, and the impending danger inherent in chronic neglect cases.
3. We recommend DHS involve community partners in addressing cases of chronic neglect to facilitate sustained change for families with the acknowledgment that efforts involve a substantial commitment of time and resources.

Looking Ahead

At their first meeting in 2008, Panel members plan to review the past year’s activities focusing on child neglect, hear updates from the various subcommittees formed after the July 2007 Neglect Summit, and discuss our focus for the next year.

Acknowledgements

The CAPTA Panel would like to thank Commissioner Dan Saltzman for his time and commitment to the Community Child Neglect Summit.

MULTNOMAH COUNTY CITIZEN REVIEW (CAPTA) PANEL RECOMMENDATIONS AND DHS RESPONSES

From CAPTA Panel Reports 10/06-09/07

These are all excellent recommendations and areas in which the Oregon Department of Human Services staff strives to create the best possible situation for children and youth.

Multnomah County CAPTA Panel

Recommendation 1

We recommend DHS establish a working definition of “chronic neglect”. Efforts to identify, understand and successfully intervene in cases of chronic neglect are hampered by the lack of a clear definition.

DHS Response 1

DHS Child Welfare developed a workgroup to review the definition of “chronic neglect.” A workgroup member attended a training presentation by Dee Wilson concerning chronic neglect. Currently, the workgroup is exploring various definitions of chronic neglect and the surrounding issues involved with identifying, understanding and successfully intervening in cases of chronic neglect.

Recommendation 2

We recommend DHS improve practice and outcomes regarding chronic neglect cases by utilizing the principles in the Oregon Safety Model such as identifying protective and diminished parental capacity, child vulnerability, and the impending danger inherent in chronic neglect cases.

Clarification: Some members of the community and CAPTA Panel expressed concern that the Oregon Safety Model would lead to neglect cases not being assigned or followed up on by DHS. In looking more closely at the model, however, we recognized it provided very helpful questions and guidelines to assist caseworkers in evaluating the safety of children exposed to chronic neglect. It also provided a useful framework to generate recommendations for follow-up.

Recommendation #2 arose from our understanding that training on the Oregon Safety Model was just beginning, and did not necessarily highlight the model’s usefulness in working through the complicated and sometimes overwhelming

nature of chronic neglect assessments. We wanted to emphasize the model's applicability in addressing chronic neglect, and encourage DHS to emphasize this as well.

DHS Response 2

DHS continues to provide training and consultation to the CAPTA panels to clarify how the Oregon Safety Model and CPS assessment are more comprehensive and more responsive to child neglect issues.

Recommendation 3

We recommend DHS involve community partners in addressing cases of chronic neglect to facilitate sustained change for families with the acknowledgment that efforts involve a substantial commitment of time and resources.

Clarification: Discussion from CAPTA meetings and the Neglect Summit consistently highlighted the chronic and pervasive nature of neglect. It was clear through case examples that collaboration and coordination with various community agencies was essential to sustained change, and that successful intervention often took years. This recommendation grew out of the realization that, for chronic neglect cases involving DHS, caseworkers often do not have the time needed to accomplish these goals. We support any efforts by DHS to provide the time and resources necessary to help caseworkers address these complicated cases. For example, one idea generated from our meetings was for a DHS branch to establish a team of caseworkers, and perhaps include multidisciplinary partners and representatives from community agencies, who specialized in cases of chronic neglect.

DHS Response 3

DHS is working with other state agencies to develop a wraparound and process for providing services that would provide a more comprehensive response to neglect cases.

It is the goal of DHS to reduce the risk of exploitation and/or abuse of children entrusted in the care of or receiving services from DHS. Therefore, DHS conducts criminal offender information background checks as described in DHS Oregon Administrative Rules (OAR: 413-120-0400 thru 0470) dated July 25, 2005. The rules can be found at the following URL:

(http://www.dhs.state.or.us/policy/childwelfare/manual_1/i-g14.pdf).

The rules establish procedures by which DHS obtains criminal offender information on subject individuals who are seeking to provide relative, foster or adoptive care to children in DHS custody under rules of CAF program and policy administration, and how DHS uses criminal offender information to determine the suitability of the subject individual to provide relative, foster or adoptive care.

The rules provide guidelines on the procedures DHS will use when DHS receives requests to conduct criminal offender information record checks from licensed private agencies who are studying adoptive families for placement of children in the custody of DHS under rules of CAF program and policy administration.

The rules provide guidelines on the procedures DHS will use granting exceptions for subject individuals convicted of certain felony and misdemeanor crimes to provide relative, foster or adoptive care if an exception is permitted under these rules.