



## **Testimony of Diane DePanfilis**

### **Before the House Judiciary Committee in Support of House Bill 262**

**January 31, 2008**

I am Diane DePanfilis, Associate Dean for Research, and Director of the Ruth H. Young Center (RYC) for Families & Children at the University of Maryland School of Social Work. Over the past year, faculty and staff in the RYC have collaborated with the Department of Human Resources, Social Services Administration to plan for a Child Abuse and Neglect – Child Welfare Alternative Response System in Maryland. Our role in this process has been to design an outside, objective evaluation of the process, practice, and outcomes of this planned initiative. Because the Child Welfare Academy operates under the RYC, faculty and staff in the School of Social Work will also have a role in designing and implementing training to support the preparation of staff to implement the new practice approach outlined in HB 262.

Nationally, more than half of the states have implemented child welfare reforms that permit alternative responses to reports of child abuse and neglect. These alternative response models recognize the variation in the nature of child maltreatment reports and that one approach does not meet the needs of every case. The benefits of implementing alternative response systems have been documented in other states although there are many variations in place and questions remain unanswered about the optimal approach. Maryland's proposed implementation is quite different than models being implemented elsewhere. Recognizing the need to incrementally phase in a different model of practice, HB 262 only focuses on how Departments of Social Services would respond to reports of child abuse and neglect that local departments are already receiving. This bill does not propose that local departments screen or divert referrals to community agencies as part of the alternative response process.

This is the third legislative session during which the process of implementing an alternative response system in Maryland is being considered. Last year, DHR/SSA presented an implementation plan that called for a pilot phase. Since July 2007, RYC faculty members have participated with DHR and other stakeholders in a work group to consider whether a statewide roll-out of this practice is a better approach. Through this planning process, HB 262 proposes a state-wide plan to minimize the challenges associated with operating two different practice models at the same time. Through existing laws and policies, local DSS agencies are already mandated to respond to reports of child abuse and neglect. HB 262 simply proposes alternative ways of responding to these reports, depending on the nature and severity of the report.

The implementation of an alternative response system should be shaped by a strong objective evaluation because the new approach will require changes in the way that DSS caseworkers respond to some reports of child abuse and neglect. The RYC has agreed to collaborate with DHR/SSA via a new contract to implement a multi-level evaluation of this

system implementation. The evaluation will focus on the process, practice, and outcomes of this initiative. The process evaluation will describe the degree to which the alternative response system is implemented as intended. The practice evaluation will assess the quality of child welfare practice and decision-making (screening, risk assessment, and safety evaluation-management) comparing families served through the two tracks and comparing practice prior to implementation with practice post implementation. The outcome evaluation will assess whether there are changes in the safety of vulnerable children who remain at home and in the pattern of placements of children into out-of-home care. A procedure called, propensity score matching will permit comparisons of the practice and outcomes before and after implementation of this new initiative.

Data available in MD CHESSIE (including information regarding reports, risk assessment, safety evaluations, service plan goals, service plan progress, types and amounts of services provided, and placements in out-of-home care) will be supplemented with data collected using other methods (*e.g.* surveys or interviews with CPS administrators, supervisors, workers, and community providers; and, optimally, computer assisted interviews with family members).

We are aware of the skepticism about the implementation of the CHESSIE system but it is our understanding through regular participation on the CHESSIE Tiger team and from conversations with personnel at DHR/SSA that the investigation and assessment information in CHESSIE is currently well populated. Ongoing processes to improve the completeness and accuracy of the CHESSIE data system to allow foster care payments to be linked to the CHESSIE system will further insure that CHESSIE contains consistent, accurate information on children referred to the child welfare system. Current CPS practice depends on the continuous improvement of the CHESSIE system. Future CPS practice via an alternative response practice model will also depend on the support of a well functioning case management system. We believe that procedures are in place to make that happen.

In summary, if the state proceeds with implementing an alternative response system as proposed in HB 262, we are prepared to design and implement a comprehensive objective evaluation using a combination of methods to understand how well the system is implemented; to describe the quality of child protective services practice (*e.g.*, risk assessment, safety evaluation and management); and to evaluate the degree to which child safety and permanency outcomes are achieved before and after implementation of the proposed alternative response approach.