

**Nevada Division of Child and Family Services (DCFS)
Differential Response Steering Committee Meeting
4126 Technology Way, Carson City, NV, 3rd Floor Video Conference Room
February 1, 2017**

FINAL Minutes

Videoconference Locations

4126 Technology Way, Carson City, NV
6171 W Charleston Bldg. 8, Conference Room B, Las Vegas
1010 Ruby Vista Drive #101, Elko (Phone-in due to video failure)

Attendees

Carson

John Bryant, Washoe County Social Services
Hayley Jarolimek, DCFS
Kristin Monibi, Washoe County
Marla Morris, DCFS
Patrick White, Children's Cabinet
Bruce Cole, DCFS, recorder

Las Vegas

Kristine Aviles, Hope Link
Ileana Delfaus, East Valley Family Services
Jennifer Dominguez, DCFS
Alma Spears, Boys & Girls Clubs of Southern Nevada
Laura Steeps, Olive Crest

Phone

John Bradtke, DCFS
Joyce Buckingham, Ron Wood Center
Edrie LaVoie, Lyon County
Kelli Weishaupt, DCFS

I. Call to Order, Welcome, Introductions

Marla Morris called the meeting to order at 9:06 and the roll was called.

II. Public Comment

None.

III. For Possible Action: Approval of November 2, 2016 Meeting Minutes

Alma moved approval of the minutes. Laura seconded. Minutes approved.

IV. For Possible Action: Monthly Reports/Data Collection Requirements

Marla introduced Jennifer as having taken over this task from Marko Markovic. Jennifer went over the numbers in the attachment sent to attendees regarding DR referrals, cases closed, cases returned, etc. John Bradtke noted that the number of cases referred to DR is down from the normal rate from past years. Edrie asked for thoughts as to why that might be. Hayley said the numbers from the South are the ones down; that Washoe and Rurals are at the usual rate. Clark had indicated at the last meeting that they were re-working their criteria for referral; that some inappropriate referrals had been screened to DR in the past, especially medical neglect and “lock-out” situations with families. These needed further investigation by Clark. Also, there were competency issues about identifying safety concerns and that with completion of safety training the numbers should go back up.

Jennifer requested that reports be submitted earlier than the 15th of the month; at least by the 7th, and no later than the 10th. This is especially important by the end of the quarter, when she must send further reports to the Director’s office. Edrie requested the DR email address be sent to her; Jennifer will send it to her.

V. For Possible Action: Safety Training for Differential Response Staff and Supervisors

Hayley announced that all DR supervisors and staff have received safety training provided by Action for Child Protection. DR supervisors will have to coordinate with CPS regarding new employees, and send them to CORE training as well.

John Bradtke wondered if everyone has the packet for safety training that Action created. Hayley said she will confirm with Action if she can distribute, and then will do so. John Bryant wondered if old Safety Assessment Tool will be replaced. Hayley answered that for now they must use Assessment Tool. She asked if everyone has access in UNITY to Safety Assessment windows. Edrie said they can put in information. Hayley said that if workers can complete the windows, and supervisors can sign off, that would be best. Patrick affirmed that Children’s Cabinet uses UNITY, as did Alma for Boys & Girls Clubs.

VI. For Possible Action: Training Needs Identification

Edrie says they have two new employees who are going through CORE currently, and a third who will go through the next CORE session.

John Bradtke said that in the subcommittee that was reviewing training, a need for more formal presentation by the State of DR 101 was felt by all participants and that need is still there. Hayley said that she thinks DR 101 is basically “orientation” and that is insufficient for safety training which is why a safety training was developed with Action. DR agencies have been confronted by family situations where safety issues arose which DR agencies shouldn’t have to deal with. The question, then, is what population should DR be serving?

Patrick asked, what was the training situation now? Hayley answered what Action did was based on the current model, with case-specific examples, and that Patrick and Kristin should continue to proceed with the current training model.

John Bryant asked if it was practical for DR workers to go through module 3 of the 101 training, which deals with identification of present and impending danger. Marla said that in the North DR workers go through the whole training, but that is not the situation in the South. Patrick said there can be a time-lag between hiring and training for some workers. Alma said when they had new workers hired mid-way during a training, they had CPS staff work directly with new workers on an individual on the basics of the training.

John Bradtke addressed the rural DR agencies directly, saying that some of the DCFS QA staff in the rural regions attended the Action training; QA staff has a role in training; when a need for training is identified by a DR agency, they should reach out to him or Betsey and they will link up the QA staff to provide training related to safety issues.

Hayley said the Action training cost almost \$30,000, which cannot be repeated; DR agencies and CPS will need to build up the capacity for quarterly meetings to meet training and reporting requirements.

John Bryant wanted to know what non-rural agencies might be able to have access to for new hires when training is not immediately available. John Bradtke said QA staff could walk through the Action training with new hires in that case, as well as keeping non-rural agencies aware of when training opportunities are coming up. Marla suggested phoning in on these trainings.

VII. For Possible Action: CAPTA Requirements for Notification of Allegations

John Bradtke has spoken with Wisconsin about how they conduct DR. It is very different there, and is housed in Child Welfare. The model is the NIA model, minus substantiation. When first contact is made with alleged mal-treaters or abusers, they are informed of the allegation, and told that substantiation decision has not been made. The person(s) against whom the allegations are made are always visited, whether or not they live in the household.

VIII. For Possible Action: Technical Assistance from Capacity Building Center for States Update

Hayley said they continue to meet with Ida of the Capacity Building Center. Ida provided feedback (preserving confidentiality) re her contacts with DR agencies in Nevada. Some of her recommendations were to update policy, which everyone recognizes anyway; cleaner screening criteria; better definition of who is the population served; deciding if DR is to make assessments and provide services, or just provide assessments. Current NIA model is set up for impending or present danger. That leaves moderate or low-risk families out of service provision. Ida recommended that transfer be made to NIA model. The response of Action to this was that NIA model does not really fit DR because, again, needs of low to moderate risk families are not met.

Edrie asked if this model meant a transition of DR from community agencies to DCFS. John Bradtke said he wanted to "nip that in the bud." There are good relations between DCFS and the community agencies, and he wants that to continue. Edrie said she appreciated that. Patrick said that he thinks CPS looks to DR to providing services after CPS referral. Hayley said the problem of population that is not being served remains. John Bradtke said most states allow "flipping" of cases both ways between DR and Child Welfare, but not in Nevada. Patrick wondered if in some it does, with CPS closing a case but telling families about DR agencies. Alma said that in her experience that has not been happening.

Hayley summarized by saying that DR in Nevada is something of an anomaly because their sources of funding are different. Edrie said that the various agencies are somewhat different in their structures, as well. Their agency, for instance, has services other than DR, and they receive referrals in that manner.

IX. For Possible Action: Rural Case Review Update

John Bradtke said the case review was finished this week. They did 38 cases, all rural cases, from October 2015 to September 2016. Analysis will take place over the next couple months. Generally, the Federal tool was not the most useful, but that is what they have to use. This was a paper review, and did not include interviews of DR managers. Safety Items regarding response and assessments were always relevant to the cases. Items dealing with education, mental and physical health needs of children were not always relevant if those were not included in the original reasons for involvement. In general, outcomes were positive for families which did not have a deep history with CPS or safety issues. On the other hand, some families were well-known to the agencies, had moderate risk factors, in some cases there was no contact with alleged victims. Two very different populations being served: one with little history with CPS and not at risk; the other the opposite. They split just about half-and-half in the cases reviewed. At the next DR meeting, John will have hard numbers from the review to share with the committee. He will also brief rural DR agencies in a separate meeting from today's.

Hayley said this supports what can be read in the literature: that families that benefit are ones that do not have a CPS history. Conversely, is it appropriate to attempt to apply a "prevention" model to families which already have removals, court orders, lots of past investigations, etc?

X. Discussion Item: Program Updates

Edrie: Anna had her baby. Patrick from Children's Cabinet will be mentoring Edrie during this period. There are three existing staff and one vacancy; two staff are in CORE right now, and there will be advertising for the fourth vacancy.

Patrick: Jackie Moses has taken a promotion, and is transitioning out, and another worker is transitioning in.

Hayley asked for help from the agencies to track employees in DR. Fiscal is interested because VPNs for workers are billable.

Alma, Laura, and Kristine all reported low case-loads, though with increases in last month or so.

Ileana: Jessica had her baby. There is one new employee who is in training. There are currently three full-time and one part-time. Shannon is in Pahrump two days full time each week.

Hayley said it is up to Clark County to schedule a DR quarterly meeting in the South.

XI. Discussion Item: Public Comment

None.

XII. Discussion Item: Adjournment

The next meeting will be May 3. The agenda will have the meeting from 9-11 am (previously put at 11:30).
The meeting was adjourned at 10:20.