

# DCFS Weekly Update From the State Office

Friday, June 16, 2000

## A Personal Observation

*By Ken Patterson*

When I first consulted in Utah in 1995, the predominant question was, “is the Division of Child and Family Services capable of protecting children?” Today the question is, “can the Division support all the permanent adoptive placements it has made?”

While media turmoil about us remains a constant, the nature of the question has clearly changed. You should all feel success in changing the question. I would rather have the debate be about money than our competency in child safety.

## CPS Investigations—When We Have a Conflict

*By Ken Patterson*

Utah Code Annotated §62A-4a-409(5) requires another organization to conduct child protection investigations when DCFS has a “conflict” or potential conflict of interest. The most typical conflict is a report of maltreatment in a foster home. DCFS makes the placement and, in theory, might over-identify with the child or the foster parents were we to attempt to investigate. A less typical conflict is when the referral alleges child maltreatment by one of our employees or an employee of an agency with whom we work closely.

In late 1997, we began a contract with the Children’s Justice Division of the Attorney General’s Office to conduct these conflict investigations. The contract provided DCFS with some immediate relief, but failure to identify an investigative approach to be used lead to some negative experiences for foster parents. By the spring of 1999, enough concerns emerged that the contract was not renewed for fiscal year 2000. The DCFS Board, Craig Barlow from the Attorney General’s Office, Kit Hansen (President of the Foster Family Association), and others went to work last summer crafting a revised process that would work. The new contract has been developed and approved by the DCFS Board.

The Children’s Justice Division has been offered \$480,000 to conduct up to 160 “conflict investigations” per year over the next three years. During 1998 through 1999, DCFS averaged 135 “conflict cases” per year. The contract could start as early as July 1, 2000. If the Attorney General’s Office declines the offer, DCFS will issue a request for proposals on July 10, 2000 seeking proposals from other interested and qualified agencies.

Once a contract is in place, we will notify the regions and do an orientation for Intake and CPS staff on how to use the new contract.

## Practice Model—“Some people never learn anything because they understand everything too soon.”

(Alexander Pope)

*By Richard Anderson*

It's exciting, and we are on our way! We are becoming a learning organization. We are seeing the practice model principles and practice skills clearly being used as standards of our work. You are designing a legacy for those who come to our division.

The practice model training is requiring us to review and rehearse our basic skills. It seems natural that when information we have heard before is given again we may say, “hey, I've already been here before and there is no need to do this again.” This thinking may keep the good in us from becoming better. The consummate professional never stops learning and never stops practicing. Mark McQuire goes to batting practice; opera stars use basic exercises repeatedly to keep their voices strong; great thinkers may study the same old books to gain greater understanding; and concert musicians practice many of the same exercises over and over. We, too, need to be rigorous in practicing the foundational skills of our work.

The reference from Alexander Pope was selected to help us remember that we can get stuck in a belief or even hide behind thoughts that we already know things because we have heard them before or because we took the course. Knowing about something and being skilled are two different propositions. I am continually amazed at the high level of skill required to become a successful child welfare professional. A successful organization ensures that its representatives are skilled. Since we are committed to both professional and organizational competence, we must move from “tell me about your skills” to “show me your skills.” We expect this of the families we serve. Why not of ourselves? Our practice model training is about doing the things we learn. “The doer alone learneth.” (Friedrich Nietzsche)

## Adoption and Foster Care Analysis and Reporting System

*By Navina Forsythe*

People have commented on the huge amount of information stored in SAFE, and requests have been made to limit or remove information. A little known fact is that much of the information in SAFE is there for federal reporting requirements. We would like to start informing you of some of these requirements.

The Adoption and Foster Care Analysis and Reporting System (AFCARS) is a data file that is submitted to the federal government (Administration on Children and Families) twice a year for information on a six-month period of time. It was mandated by federal legislation in 1986, with the first data being submitted in May 1995. The purpose is to allow examination of summary data nationally and state-by-state. An additional intention is improvement of data collection and reporting, and attention to data interpretation. There are 65 data elements for each child in foster care, and 37 data elements for each child adopted during the six-month reporting period. Examples of data elements are the child's demographic information, removal/placement settings, reasons for removal, most recent case plan goal, parental rights termination, foster or

adoptive parent data, family structure, child and family characteristics, and discharge data.

There are monetary penalties for missing or inaccurate information. This may include data that is not entered in a timely fashion. Each region has a data contact person who works with state office personnel to ensure data accuracy and integrity. While working on reporting, if any questions concerning data arise we may check with caseworkers about specifics on cases in an attempt to avoid any monetary penalties that could affect staff and service delivery. This is just one of many reasons why data accuracy and our SAFE system are so important to our agency.

## Feedback from Staff

*By Carol Miller*

A new feature of our weekly update is this section. We will quote feedback and provide information we receive from people regarding our weekly updates.

*“I wanted to let you know that the weekly updates that are being sent are a good idea. I feel more involved and we are hearing news from the source instead of workers in our office or rumors.”—Gail King, June 2, 2000.*

*“I am a FACT worker in the Manti office. I really appreciate the weekly update to clarify the rumors which prevail throughout the state. There is so much important work to be done with families that we need to use our time and resources to the ultimate good. Thanks for all you do.”—Barbara Cofer, June 5, 2000.*

*“Let me say how much I have enjoyed the informative nature of the weekly updates...and also make a suggestion. Why don't we do away with the “Link” (in light of the budget situation, maybe that has already happened?). It seems a waste in the age of electronic media to go to the effort and expense of a paper newsletter. There could still be the opportunity for Regions to submit items of general importance. In any event...keep the updates coming!”—Steven Grimshaw, June 9, 2000.*

Steven's suggestion is being taken under advisement, and the “Link” may be placed on the web site in the future.

*Barry Richards, June 12, 2000: “I am reading every word of ‘DCFS Weekly Update From the State Office’ and appreciating the content.*

*“Have received ‘feedback’ from Robin Arnold-Williams. I have also sent to her the accompanying attachment regarding the ‘...Unnecessary suffering of children after trauma.’*

*“Alain R. Lesage has said: ‘Facts are stubborn things’ and Morton Thompson has observed that ‘Patience defends the truth.’*

*“The book Sudden Trauma speaks facts and truth. Presuming that you would like to see how DCFS could benefit from its outlined strategy to spare needless suffering in children and their families, please allow me to make a copy available to you.*

*“Thank you. I look forward to your response.”*

Barry had attached a very informative article entitled, “Who Says ‘Time Heals All Wounds?’ There Are Children Who Suffer Unnecessarily After Trauma!” A copy of this article is attached.

A special thanks to all of you for your contributions and hard work! Please keep your ideas and comments coming.

Who Says, "Time Heals All Wounds?"  
*There Are Children Who Suffer Unnecessarily After Trauma!*  
By Barry M. Richards, Clinical Traumatologist

Those who are satisfied with what is currently being done for children impacted by the horrors of trauma won't be too interested in reading further. Enough is enough. However, for those concerned *enough* to help prevent needless pain and suffering, there is something better -- beyond what is typically made available.

Following the Columbine shootings there have been seven subsequent traumas that have all been attributed to the unresolved turmoil that has been experienced. According to a professional task force representative, "There's [still] a lot of pain in the community". So much so that a report has been sent to Governor Bill Owens to recommend the task force continue its work in order to deal with the ongoing turmoil. The aftermath "retraumatizations have extended the healing time and...demand for help is increasing" according to the professionals. They state it will take "three years" for the problems to decline in the wake of the tragedy.

However, a recent book, *Sudden Trauma, When Life Will Never Be The Same Again* says this doesn't have to be so. It provides its readers with clear and concise information and directions for ameliorating the prolonged aftermath of trauma. People like Leslie Miller, highly involved in the Columbine community, who recently said: "...this book will empower individuals [who are] still suffering to take control instead of being the victim". And an Oklahoma City resident who said: "This book is amazing; it literally opens the world of sudden trauma [recovery] to the reader. To say that I was moved by the book would be an understatement. Kudos to the author, Dr. Woolley."

So why are children (and their parents) suffering unnecessarily in the aftermath of trauma? What isn't being done, and how can the problem be remedied more effectively? The Latin American proverb probably says it best: "Victims make good witnesses". For all those whose real life-stories are detailed in the *Sudden Trauma* book, the answers to the questions are undeniable and absolute.

From a hostage survivor: "Where was this help when we needed it most"; from a near drowning survivor, "...with the right information the terrible weight I had been carrying could have been relieved"; from a victim of child abuse: "...the help offered by my sister was a turning point", and from the driver of a fatal bus-child/pedestrian accident, "...support from my family and the family of the deceased turned the whole experience from something seriously adverse into something uplifting and good."

Sadly, very few are as fortunate. After reading the book, one colleague (supervisor) who works in child protection services stated: "You can't push a rope...getting this message to the top and seeing it successfully implemented in a way to protect children may take a career. I've been here many years and have seen the best of ideas come and go. I commend your efforts but don't get too excited."

Imagine what it would be like for children and parents of abuse and trauma to learn what is necessary when it would make the most difference? Imagine them learning that caring professionals *prioritize* relief from their suffering. And, imagine their progressive recovery well-being (after trauma) guided by healthcare professionals who had the tools and expertise to do the job right.

Fortunately, it is possible to spare suffering; by a simple change. It is possible for abused and traumatized children and their parents to suffer less, and for family, friends, relatives and bystanders to benefit sooner than later. It is even possible for the hard-crusted and callous cynics of society to help, even though they often feel helpless to prevent the suffering they see.

But how impotent are they, really? Which professional would be unwilling to help if they only knew how and were given the tools they needed? When would the "walking wounded" have to suffer in silence if there was adequate competence and compassion in response to their needs; via precise directions in a strategy that worked? Wouldn't that be an incentive to do the job better, to enjoy the rewards and stay with a career longer?

Every example in *Sudden Trauma* lifts and inspires the reader with plain and simple applications of principles and truth. It teaches the reader how to surmount the obstacles to recovery wellbeing. And, it provides directions for THRIVING instead of merely surviving. *Sudden Trauma* presents a proven strategy for enabling caregivers, clinicians and other healthcare professionals to help survivors achieve positive and productive levels of life-activity in the aftermath of trauma and tragedy.

Now it is possible to get enthusiastic about an alternative to the status-quo. Now it is possible to find out how to continue forward from where Rabbi Harold Kushner left off in his bestseller, *When Bad Things Happen To Good People*; and now it is possible to appreciate it along with the message of Viktor Frankl's in *Man's Search For Meaning*. *Sudden Trauma* is a book of reality for our times. A book like none other; not anywhere else available.

But why read it now? What is the rush, and how will you benefit? In America today an accident, horrifying crime, or mass casualty calamity is occurring approximately every 4-seconds. Annually that results in over \$200 billion in medical expenses alone; not counting the mangled bodies, scarred minds, lost careers, broken friendships and destroyed marriages and families. And children suffer the most!

No one knows how to calculate the overall negative impact; but it costs us painfully. Excessive welfare services costs; spiraling medical costs and insurance premiums, and escalating criminal activity that threatens all of us. In the wake of trauma confused, suffering and frustrated survivors---uncertain about the future. And the children bear the brunt of this.

Yet it need not be so. Learning means less suffering and the sooner knowledge is acquired the more quickly can complete recovery be anticipated. The contents of *Sudden Trauma* are for all those who want to help parents and others---help children the most. It is for anyone who really cares about survivors. It replaces the wait-and-see consequences of today's managed care systems. That's why John M. Nelson of the American Medical Association Board of Trustees has said: "*This book, Sudden Trauma, may be a godsend to survivors of trauma. And for the caregiver, there is now a place to turn.*"

*Sudden Trauma* provides a light at the end of the tunnel. It can produce a "win-win-win" outcome for all those who care for the victims of trauma---WHEN LIFE WILL NEVER BE THE SAME AGAIN. In the words of Victor Hugo: "*There is nothing as powerful as an idea whose time has come.*"