

**A Social Work Perspective on the  
Current Crisis in Child Welfare**

**NASW-NYC Child Abuse Task Force**

**June, 2006**

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## **BACKGROUND**

The National Association of Social Workers is the largest organization representing professional social workers in the world, with over 150,000 members. The New York City Chapter (NASW-NYC) represents 10,000 social workers within the five boroughs who primarily hold advanced degrees and work in every area of service delivery. The members of NASW-NYC work in direct service, training, administration, policy, planning, education, and program evaluation and research.

Following the deaths of Nixzmary Brown and several other children known to ACS, the NASW-NYC Board of Directors convened the NASW-NYC Child Abuse Task Force to examine the systemic issues underlying these tragic deaths, to respond to the proposed changes being put forth by the Mayor and the city administration, and to make recommendations that address the long term requirements for systemic change. The Task Force is comprised of social workers who are recognized experts in both the public and voluntary child welfare system, as well as leading social workers in health care, mental health, addictions services, and public schools.

The recommendations that are proposed below reflect the vast experience of the members of the Task Force as well as the experience of current workers in the field who shared their observations with the staff of NASW-NYC.

## **INTRODUCTION**

The NASW-NYC supports the positive steps that have been taken by the Administration for Children's Services over the past decade to improve services to our City's most vulnerable children and families. Recent child fatalities are regrettable but should not result in "crisis-driven solutions," rather ACS should continue its efforts to build a network of services to serve children and families in their communities when it is safe to do so. Investments must be made in Child Protective Services, Foster Care and Preventive Services, as well as the public sector, because they operate in tandem. When one segment fails, the entire system is affected.

We agree with the Commissioner's view that "a strong child protective network comprises government, community and family." In that regard, it is important to state our

concern that while the Plans outlined by ACS and the Deputy Mayor for Health and Human Services address many of the problems in the government Child Protective arena, they do not adequately address family and community. They do not include initiatives to strengthen the network of voluntary community-based services.

The recent fatalities highlighted some critical gaps that require attention. The lack of interagency coordination was glaring and the Mayor's Action Plan will address some of these problems. The creation of an Interagency Task Force and a new office of Family Services Coordinator, as well as the initiative to develop protocols to guide interagency interactions, should reduce the errors caused by inadequate coordination. We especially applaud the initiatives to increase the effectiveness of the partnerships between child welfare and school; child welfare and law enforcement; child welfare and the medical field/hospitals as well as the Family Court.

The recent tragedies also brought to the fore, once again, the fact that rates of child abuse reports and "indicated" cases, like many other negative social indicators, are disproportionately concentrated in low income communities of color. The Mayor has allocated \$16 million for a series of Child Safety initiatives; \$9 million of which is to be invested in "enhanced preventive services" in high need areas. This is an important first step and we urge additional targeted investments in these areas.

To achieve positive outcomes in child protection, investments are needed in family-centered, culturally-competent services that integrate resources from key systems: education, health, mental health, substance abuse, domestic violence, developmental disabilities, law enforcement and the courts, public benefits, child care and housing. Furthermore, service investments should not be limited to "children at risk of placement" but must be available to families and children who need them. It is axiomatic to state that most families in high-risk, low-resourced communities are fragile, and need "support services" to enhance their family life.

In order for the child welfare and school partnership to work effectively, additional personnel must be available to the schools, therefore we support City Council Speaker Quinn's proposal to add social workers to an additional 21 schools as part of the 2006/07 Budget. We also support the plan to designate a precinct coordinator for child abuse matters at the precinct level.

## **PRACTICE ISSUES AND RECOMMENDATIONS**

The success or failure of the child welfare system depends, in large part, on the professional judgments made by those on the front lines. Reports and testimony presented by CPS workers highlight a disconnect between the directions espoused by the administration and "what happens on the front lines." They also highlight critical problems in providing or arranging for services, and breakdowns in communications with service providers. The recommendations below are designed to address these problems:

## 1. SUSTAIN AND BUILD A QUALITY WORKFORCE IN CHILD PROTECTION

ACS should develop a comprehensive Child Protection Workforce Plan that projects the optimal mix of child welfare staffing, within Children's Services and in foster care and preventive services agencies. A mechanism to monitor, evaluate, and update this comprehensive workforce plan, as it is implemented, is also essential. The plan also should address the need to inoculate child protective services from future budget cuts and hiring freezes. The NASW-NYC Child Abuse Task Force recommends the following components as key in building and sustaining a quality workforce:

- a) **Address Issues of Personal Safety.** New York City's workforce plan should include indicators on staff safety. Staff should be provided the resources and equipment they need to work effectively and efficiently. These should include transportation and police escort when needed, and cell phones to allow staff to maintain a line of communication while they are out of the office.
- b) **Maintain a Social Work Orientation in Children's Services.** The 1996 Reform Plan placed a priority on recruitment of professionally trained social workers in child protection work. It appears, however, that many individuals selected for entry positions in child protection have backgrounds in areas other than helping services. ACS needs to assure that Children's Services maintains a "social work" orientation by targeting their recruitment efforts to BSWs and MSWs.
- c) **Focus on Language and Cultural Competency.** ACS needs to assure that its staff, and contract agency staff, adequately reflects the population they serve. They should have sufficient capacity to communicate effectively with families whose primary language is not English, and that staff at all levels are trained in culturally-competent methods of service delivery. The diverse cultural and language needs of families must also be considered in the provision of contract agency support services.
- d) **Maintain an Agreed Upon CPS Caseload.** ACS should adhere to its proposal to maintain a caseload size at 12 family cases per worker and to address other critical factors that dramatically affect workloads, such as the number of children in a family and their physical locations, as well as the seriousness, persistence and multiple natures of problems facing family members.
- e) **Monitor Staff Turn Over.** Staff retention is as important as the hiring of new staff. The loss of trained and experienced staff carries high administrative costs and high costs to children and families. The NASW-NYC Child Abuse Task Force urges ACS to include in the proposed ChildStat performance indicators that track staff turnover and develop strategies to reduce the loss of trained staff.

- f) **Recommit to Professional Development.** Programs that support ACS and contract agency staff as they acquire graduate degrees in social work hold a great deal of promise for advancing professionalism in child welfare services; however, funding and support for these programs has declined sharply. ACS needs to reaffirm its commitment to professional staff development programs, within the public and voluntary sector, and restore critical funding and administrative support.
- g) **Proposed Leadership Academy.** The proposed New York City Leadership Academy for Child Safety should operate as an adjunct to professional education, and should be linked with the existing ACS training institute.

## 2. ADDRESS SERVICE GAPS

The Commissioner’s Plan to hire 250 workers to increase the number of families provided with oversight when removal is not warranted is a step toward filling a major service gap. In addition, we recommend the following:

- a) **Re-align Homemaking Services to Prevent Child Abuse and Neglect.** ACS should re-examine and re-align the mission and expand the funding allocation for Homemaking Services to meet the real-time needs of all families caring for children at risk of child abuse and maltreatment, particularly infants and toddlers.
- b) **Create a Network of Therapeutic Crisis and Respite Care Centers.** ACS should allocate sufficient levels of funding to establish therapeutic crisis and respite care centers in every community district in New York City
- c) **Increase Nurse Family Partnerships to Assure Universal Infant Safety Visits.** ACS should collaborate with NYC’s Health Department to develop an expansion plan for the Nurse Family Partnerships to assure that all families with a newborn infant, who reside in the five boroughs, receive at least one Infant Safety Home Visit, and continuing periodic visits for families at high and moderate risk for child abuse and maltreatment during the first two years of the infant’s life.

## 3. IMPROVE RISK ASSESSMENT AND OUTCOME MEASURES

- a) **Expand use of ACS Family Team Conferences to Improve Risk Assessment.** ACS should extend the use of Family Team Conferences to all children in designated “high risk” child protection cases, and allocate resources to assure that Child Protective Family Team Conferences are held no later than 72 hours from receipt of the reported “high risk” allegations.

- b) **Include Outcome Measures that Center on Benefits to Children and Families.** ACS should include performance indicators and outcome measures in ChildStat that show benefits and changes directly affecting the circumstances of families and children.
- c) **Streamline Data Collection and Accountability Measures, and Obtain Reliable Technology.** As ChildStat is instituted, ACS must make every effort to correct problems with Connections, obtain reliable software and hardware, and avoid duplication in data collection, entry, and application of performance indicators and measures. Staff should also be provided the computer resources and equipment they need to work effectively and efficiently.

#### **4. IMPLEMENT SUCCESSFUL DEMONSTRATION PROGRAMS AT FULL SCALE**

- a) New York City's Children's Services plan should include short-term and long-term investment strategies to bring to full-scale the successful and effective programs that have been launched as "models". These include the Therapeutic Crisis and Respite Centers, and Nurse Family Partnerships.
- b) Two other model programs, Bridge-Builders in Highbridge, Bronx, and Project Engage in Community District 10 Manhattan that are successful in using Parent Advocates should be replicated in every borough.

#### **5. ENGAGE THE COMMUNITY IN CREATING BETTER OUTCOMES FOR CHILDREN**

Many community residents do not report their suspicions about child abuse and neglect because they are unsure about what happens to children and families once ACS becomes involved. ACS must develop a plan to address these problems. They should be assured that children are removed from their families only when their safety is in jeopardy, and that in most situations, children should remain at home, safely, with support services.

**NASW-NYC Child Abuse Task Force – 2006**

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