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Child Support Hotline: 800-840-8757
Child Abuse and Neglect Hotline: 800-800-5556

September 5, 2012

Dear Senator Broden, Senator Lanane, Rep. Riecken and Rep. Summers,

Please find the information below in reply to your letter dated August 31, 2012. We appreciate your concern and interest in learning about the Indiana Child Abuse and Neglect Hotline and the Indiana child protection system. We all have the same goal in mind: to protect children. DCS looks forward to working with you in the coming months to evaluate how the system can be improved. Please feel free to contact myself or Brady Brookes, DCS Legislative Director, with any questions you may have.

Respectfully,

John Ryan
Chief of Staff
Indiana Department of Child Services

cc: DCS Interim Study Committee Members



Protecting our children, families and future

1. What is the total number of hotline calls for each month since its inception? Please provide subtotals by county.

DCS Response: The Hotline receives child abuse and neglect reports via a variety of methods, including phone calls, emails, faxes or mail. Please see **Attachment A** for a breakdown of the total number of reports received and the method used to submit those reports to DCS. DCS is currently gathering the information broken down by county and hopes to have the information available to the committee at the third meeting.

2. Although calls to the hotline are increasing, the number of investigations conducted as a result of hotline calls is decreasing. What accounts for that discrepancy?

DCS Response: DCS data shows that the number of assessments completed during the first 6 months of this year has increased over 2011 by 8,894 assessments.

- Assessments completed Jan. to Jun. 2011: 73,848
- Assessments completed Jan. to Jun. 2012: 82,832

3. How many calls to the hotline have not been answered because the caller hangs up before speaking to a staff person?

DCS Response: please see below chart. This information would not have been available prior to implementation of the Hotline.

Year	Answered	Abandoned	% of Total Calls Abandoned
2010	102,686	16,070	13.50%
2011	146,070	20,266	12.20%
2012*	104,978	14,309	12.00%

**2012 numbers reflect 1.1.12 through 9.4.12.*

4. What is the protocol for handling calls from front-line medical providers such as emergency room nurses?

DCS Response: The protocol that the Hotline family case manager intake specialists follow when they receive a report from emergency room doctors and nurses is as follows:

- The Hotline will not go through the entire intake guidance tool with these professionals. The questions that will be asked are the following:
 1. Who is the caller? (full name of the medical professional)
 2. What is a call back number?
 3. What hospital or location are they calling from?
 4. What is the situation (children involved)? What are the approximate ages of the children?

5. How many calls were received by the hotline but not referred for investigation? Please provide monthly subtotals by county since the hotline's inception.

DCS Response: When DCS receives a report of child abuse or neglect there are a number of actions that can be taken:

- **Assessment:** when a report meets the legal requirements of child abuse or neglect it will be sent to the DCS local office for assessment.
- **Information and Referral:** information sent to the local office regarding an open assessment, information to follow up on a case management issue, information on prevention services, etc.

- Service Referral: a request from another state for Indiana to do a check on their ward that is placed in Indiana to ensure the safety of the child(ren) while they are placed in Indiana.
- Non Assessment: when a report does not meet the legal requirement of child abuse and neglect and no action will be taken by DCS, the report is not recommended for assessment.

When evaluating the action on each assessment the decisions are broken down into the above categories. Please see **Attachment B** for the data. Please note when reviewing the data that the DCS Structured Decision Model (SDM) was implemented in April of 2012. DCS is currently working on compiling the information at the county level and hopes to have it available for the committee members by the third meeting.

**Prior to the Hotline this information would not have been collectively available across counties.*

6. Local offices do a review of cases the hotline has screened out as not needing an investigation. How much time can pass between the call to the time local staff conduct the hotline review?

DCS Response: As a part of the Hotline pilot project the local office can determine whether or not to review all reports not sent for assessment in their county. The amount of time between the reports and the time of review is determined by the local office.

- a. How many screened out cases do the local offices request for an investigation?

DCS Response: The local office can review reports (not cases) and reverse the decision made by the Hotline. The two types of decisions that the local office can make are:

1. The local office can review a report sent to the local office for assessment and ask that the report not be assessed.
2. The local office can review a report that did not meet the legal requirements for action to be taken and ask that the report be assigned for assessment by the local office.

Since implementation of the Hotline, over seventy percent of the reviews conducted by the local office have resulted in the local office requesting that a report sent to them from the Hotline not be assessed. See chart below for further detail.

Year	# of Reports where the Local Office Reversed the Hotline's Decision	Breakdown # of Reports Where the Local Office Reversed Hotline Decision	
		Hotline Assigned for Assessment, but Local Office Reversed to Non Assessment	Hotline Determined Non Assessment, Local Office Reversed and Assigned for Assessment
2010	119	89	30
2011	523	387	146
2012*	492	355	137

**Data is for 1.1.12 through 9.4.12.*

- b. Does the hotline have veto power over the local review or is the final determination on whether to investigate up to the local supervisor?

- DCS Response: The DCS local office has the final decision; the Hotline does not have veto power.

7. Please list the staffing levels on the hotline, by week, for the month of August 2012. Please also provide the yearly average and median staffing levels for the hotline.

DCS Response: The Hotline technology allows DCS to evaluate what time of day calls are received. Please see below for the 2012 call distribution to date. Due to the distribution of calls, DCS staggers shifts at the Hotline to accommodate the peak call times. During August there were twenty different shifts at the Hotline, see below for a breakdown of those shift. For example at 1pm on a weekday there would be 48 individuals from ten different shifts at the Hotline.

Time Interval	2012 Call Distribution
12a-8a	5.2%
8a-12p	29.2%
12p-4p	39.2%
4p-8p	18.7%
8p-12a	7.7%

August 2012 Hotline Shifts

- Monday through Friday:
 1. 7am – 3pm: 4 employees
 2. 8am – 4pm: 7 employees
 3. 8:30am- 4:30 pm: 3 employees
 4. 9am – 5pm: 7 employees
 5. 9:30am – 5:30: 5 employees
 6. 10am- 6pm: 6 employees
 7. 10:30am- 6:30: 2 employees
 8. 11am- 7pm: 5 employees
 9. 12pm- 8pm: 6 employees
 10. 1pm- 9pm: 3 employees
 11. 3pm- 11pm: 6 employees
 12. 2pm- 10pm: 2 employees
- Overnights:
 1. Sunday to Wednesday 9:30pm to 8am: 4 employees
 2. Thursday to Saturday 9:30pm to 8am: 4 employees
- Weekend:
 1. 7am- 5:30pm: 1 employee
 2. 8am- 6:30pm: 1 employee
 3. 9am- 7:30pm: 1 employee
 4. 11am- 9:30pm: 2 employees
 5. 12pm- 10:30pm: 1 employee
 6. 1pm- 11:30pm: 4 employees

8. How many current hotline staff have field experience?

DCS Response: The Hotline currently employs 85 individuals; this includes the director, intake specialists, supervisors and administrative support. Of those 85 people, 36 have previous field experience. The previous employment experience of the other 49 individuals employed by the Hotline is as follows:

- Service provider: 25
- Probation/courts: 4
- Medical field: 3

▪ Law enforcement:	3
▪ Security:	2
▪ Child services in another states:	2
▪ Customer service:	2
▪ Education:	2
▪ Legal:	1
▪ Corrections:	1
▪ Legislative intern:	1

9. What other department functions are being considered for centralization?

DCS Response: None.

10. How does DCS prepare relative caregivers for issues related to trauma when a child is removed from their home and placed with that relative?

DCS Response: Relative caregivers participate in the DCS Resource and Adoptive Parent Training during the foster care licensing process, which provides information on the effects of abuse and neglect on children and their development. Additionally, DCS is able to put services in place for relatives and the children they care for to address the effects of trauma. DCS is in the process of releasing a request for proposal that will allow DCS to refer a "relative specialist" to all relative caregivers when a child is placed. The relative specialist will be a contracted worker who can assist the relative in accessing resources and assessing their needs, including training, therapeutic support, etc.

11. How often are providers who are involved in providing services to children encouraged to attend the family team meetings?

DCS Response: DCS encourages the family to include service providers on their Child and Family Team. However, the decision on who participates ultimately rests with the family.

12. What is the department's stance on fatality review teams being placed under the Indiana State Department of Health to better insure objectivity and an unbiased multidiscipline approach?

DCS Response: The Department only cares that fatality review teams are meeting to review child deaths, so that future child fatalities can be prevented.

13. Do judges hearing cases that involve changes to visitation agreements have access to police reports on runs to a non-custodial, biological parent who is asking for the visitation?

DCS Response: DCS can only speak to those cases where the Department is a party to the case, which only includes CHINS proceedings. DCS has no legal authority to interfere in private custody, visitation or paternity case. This question would need to be answered by the courts and law enforcement.

a. If not, what changes can be made in the system to protect the child and ensure all involved entities are communicating critical information?

DCS Response: In CHINS cases DCS has developed relationships with law enforcement in which DCS, if it has a report of abuse or neglect, an open assessment, or an ongoing case, can ask and receive information from law enforcement. DCS has had a longstanding policy and practice of referring reports which describe potentially criminal conduct to law enforcement.

b. Should DCS mandate that the courts be notified when guardianships are dissolved after a prior CHINS case?

DCS Response: Only courts can create, modify, dissolve or terminate guardianships or other custody arrangements. However, in 2011 DCS sought changes to IC 29-3-8-9 to require courts to notify DCS in the event a guardianship was created, modified or terminated for a child who had been a CHINS, or who is the subject of

an open Informal Adjustment (IA). DCS, upon receiving notice from the court, is allowed to participate in such cases. It should be noted that this change can only be applied to those guardianships created after the law went into effect on July 1, 2011.

- c. Does DCS have any responsibilities with a family after a case is closed?

DCS Response: DCS has no legal requirements with a family after a case is closed. However, DCS does provide referrals to families upon case closure and has recently announced that funds would be reallocated to establish a new program to provide services to families meeting certain requirements for six months after their DCS case is closed. The details of this new program are not yet available.

Attachment A: Indiana Child Abuse and Neglect Hotline
Breakdown of Reports by Method Received

Date	Total Reports	Method Reports Were Received by Hotline			
		Phone		Fax, Email or Mail	
		Number	Percent	Number	Percent
Oct- 10*	12,998	11,906	92%	1092	8%
Nov- 10*	12,520	11,526	92%	994	8%
Dec- 2010*	11,073	10,198	92%	875	8%
Jan-11	12,389	11,300	92%	1089	8%
Feb-11	11,226	10,654	95%	572	5%
Mar-11	14,576	13,192	91%	1312	9%
April 2011	13,684	12,606	92%	1078	8%
May-11	14,155	12,923	91%	1232	9%
Jun-11	12,578	11,429	91%	1149	9%
Jul-11	12,501	11,346	91%	1155	9%
Aug-11	13,251	11,956	90%	1295	10%
Sep-11	12,504	11,337	91%	1167	9%
Oct-11	11,670	10,675	91%	995	9%
Nov-11	11,931	10,942	92%	989	8%
Dec-11	11,026	10,079	91%	947	9%
Jan-12	12,078	11,065	92%	1013	8%
Feb-12	13,085	11,952	91%	1133	9%
Mar-12	15,426	14,290	93%	1136	7%
Apr-12	14,288	13,305	93%	983	7%
May-12	16,104	14,992	93%	1,112	7%
Jun-12	13,452	12,536	93%	916	7%

**The data for 2010 was captured during roll out of the Hotline and does not reflect all counties.*

Attachment B: Indiana Child Abuse and Neglect Reports by Action Type

Date	Total # of Reports	Reports with Action Taken						Reports with No Action Taken	
		Assess		Information & Referral		Service Referral		Non-Assessment	
		#	%	#	%	#	%	#	%
Oct- 10*	12,998	6351	49%	1822	14%	37	--	4788	37%
Nov- 10*	12,520	6221	50%	1892	15%	31	---	4375	35%
Dec- 2010*	11,073	5482	50%	1821	17%	45	---	3675	33%
Jan-11	12,389	6165	50%	1702	14%	68	---	4454	36%
Feb-11	11,226	5325	47%	1531	14%	75	---	4295	38%
Mar-11	14,576	7095	49%	1908	13%	94	---	5479	38%
April 2011	13,684	6721	49%	1678	12%	76	---	5209	38%
May-11	14,155	7110	50%	1807	13%	81	---	5157	36%
Jun-11	12,578	6142	49%	1938	15%	100	---	4398	35%
Jul-11	12,501	5975	48%	2000	16%	99	---	4427	35%
Aug-11	13,251	7005	53%	1082	8%	113	---	5051	38%
Sep-11	12,504	6775	54%	788	6%	85	---	4856	39%
Oct-11	11,670	6048	52%	834	7%	74	---	4714	40%
Nov-11	11,931	6414	54%	739	6%	87	---	4691	39%
Dec-11	11,026	5967	54%	803	7%	73	---	4183	38%
Jan-12	12,078	6734	56%	787	7%	105	---	4452	37%
Feb-12	13,085	6957	53%	1457	11%	62	---	4609	35%
Mar-12	15,426	8213	53%	3425	22%	157	---	3631	24%
Apr-12	14,288	8126	57%	3101	22%	86	---	2975	21%
May-12	16,104	8707	54%	3752	23%	84	---	3561	22%
Jun-12	13,452	6823	51%	3633	27%	85	---	2911	22%
Total Since Hotline Implementation	121,024	63,614	51.5%	21,690	13.8%	692	---	34,977	34.3 %

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STATE OF INDIANA
HOUSE OF REPRESENTATIVES

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COMMITTEES:
FAMILY, CHILDREN AND HUMAN AFFAIRS
FINANCIAL INSTITUTIONS
VETERANS AFFAIRS AND PUBLIC SAFETY

August 31, 2012

James W. Payne, Judge, Director, Department of Child Services
State Senator Travis Holdman
State Representative Cindy Noe

Despite lengthy testimony at the August 22, 2012, meeting of the Department of Child Services (DCS) Interim Study Committee, many important questions remained unanswered. A child died at the hands of an abuser as we were meeting last week. Today the details of another recent death were reported in the Indianapolis Star. Both children had contact with either DCS or a medical professional that could likely have prevented these tragedies.

This is an urgent matter. The safety of Hoosier children is at stake, and the public should accept nothing less than a forthright discussion about the reality of a system that allows these tragedies to occur - and how it can be fixed.

Our intent is to learn as much as we can about current flaws in the system and to identify the best possible solutions to ensure more children don't fall through the cracks. We are hoping to engage the DCS staff in a discussion about tangible solutions that will help create an effective child welfare system that is centrally focused on the best interest of children.

To facilitate that discussion, please consider this letter our official request for the following information to be presented by DCS to the committee at our September 5, 2012, meeting.

- 1) What is the total number of hotline calls for each month since its inception? Please provide subtotals by county.
- 2) Although calls to the hotline are increasing, the number of investigations conducted as a result of hotline calls is decreasing. What accounts for this discrepancy?
- 3) How many calls to the hotline have not been answered because the caller hangs up before speaking to a staff person?
- 4) What is the protocol for handling calls from front-line medical providers such as emergency room nurses?
- 5) How many calls were received by the hotline but not referred for investigation? Please provide monthly subtotals by county since the hotline's inception.
- 6) Local offices do a review of cases the hotline has screened out as not needing an investigation. How much time can pass between the call to the time local staff conduct the hotline review?
 - a. How many screened out cases do the local offices request for an investigation?
 - b. Does the hotline have veto power over the local review or is the final determination on whether to investigate up to the local supervisor?
- 7) Please list the staffing levels on the hotline, by week, for the month of August 2012. Please also provide the yearly average and median staffing levels for the hotline.
- 8) How many of the current hotline staff have field experience?
- 9) What other department functions are being considered for centralization?
- 10) How does DCS prepare relative caregivers for issues related to trauma when a child is removed from their home and placed with that relative?

- 11) How often are providers who are involved in providing services to children encouraged to attend the family team meetings?
- 12) What is the department's stance on fatality review teams being placed under the Indiana State Department of Health to better insure objectivity and an unbiased multidiscipline approach?
- 13) Do judges hearing cases that involve changes to visitation agreements have access to police reports on runs to a non-custodial, biological parent who is asking for the visitation?
 - a. If not, what changes can be made in the system to protect the child and ensure all involved entities are communicating critical information?
 - b. Should DCS mandate that the courts be notified when guardianships are dissolved after a prior CHINS case?
 - c. Does DCS have any responsibilities with a family after a case is closed?

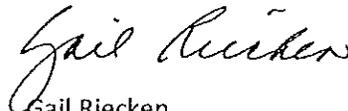
In addition to the above, we request that two of the previously scheduled committee meetings be held in locations outside Marion County. We think it is important to hear the unique perspectives of Hoosiers from all over the state, including those who are unable to attend meetings in Indianapolis. We look forward to hearing from you to discuss possible locations for these meetings.

Thank you for your attention to these matters.

Respectfully,



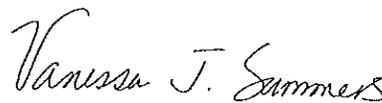
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State Representative
District 77



Tim Lanane
State Senator
District 25



Vanessa Summers
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