

(DRAFT) Progress on Implementation of Recommendations (DRAFT)
Governor’s Task Force on the Protection of Children

Cultural Considerations: All Recommendations from the Governor’s Task Force needs to incorporate a cultural consideration framework that, at a minimum, takes into consideration language, development of a diverse workforce, and data that attends to issues related to disproportionality and disparities.

■ Completed
 ■ In Progress and/or Plans to Address
 ■ Planned For 2017 Legislative Proposal
 □ Planning in Progress via Implementation Workgroup

Recommendation		Reason for Recommended Sequencing	If Completed, Where Addressed (e.g. statute, Guidelines, etc.) If Not Completed, What Category	Responsible Parties	Notes
1.	Revise the Public Policy statement which begins Minnesota’s Reporting of Maltreatment of Minors Act to include child safety as the paramount consideration for decision making.	<input checked="" type="checkbox"/> Deadline (1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> M.S. 626.556, subd. 1(a) 	DHS	
2.	The Minnesota Legislature should repeal the statutory provision barring consideration of screened out reports. The use of prior screened out reports when considering a new referral should be permitted and encouraged. The screening guidelines should be updated to reflect this change. It is recognized that prior history is an essential element in screening and assessing maltreatment reports. Records of screened out reports should be maintained for five years to make this change in practice effective.	<input checked="" type="checkbox"/> Deadline (1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> M.S. 626.556, subd. 7(b) Screening Guidelines (page 24 of Dec. ‘15 version) 	Screening Workgroup/Legislators	
3.	Make intake/screening decisions, whether a report is screened in or out, in consultation with a Multi-Disciplinary Team (MDT) or, minimally with a supervisor.	<input checked="" type="checkbox"/> Deadline (1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> Screening Guidelines (page 22 of Dec. ‘15 version) 	Screening Workgroup	<ul style="list-style-type: none"> MN.IT/SSIS improvements in process
4.	Review, revise and establish clear Child Protection Intake, Screening, and Track Assignment Guidelines a) Review and revise the Guidelines on an annual basis. The Guidelines should also include best practices for the treatment	<input checked="" type="checkbox"/> Deadline (1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> a) & c) - Screening Guidelines revised and published 10/1/15 & 1/1/16. 		<ul style="list-style-type: none">

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	<p>of reports from intake through track assignment. This process should include input from a cross-section of professionals involved with children and families, including law enforcement, mental health professionals and physicians. The screening review committee must seek significant input from counties, tribes and county attorneys. The reviewing committee, should at minimum, refer the Guidelines to the Minnesota County Attorney’s Association for review and comment as county attorneys are responsible for providing legal advice to social services during the screening and assessment process. Collaboration up front will help reduce conflicting interpretation.</p> <p>b) Require counties and tribes to use the Minnesota Guidelines for receiving and screening reports of children maltreatment as a baseline. The Guidelines should not be modified without written authority from DHS.</p> <p>c) Rewrite the Guidelines to supplement references to Minnesota statutes with plain and understandable language.</p>		<ul style="list-style-type: none"> • b) – M.S. 626.556, subd. 7a 		
5.	<p>DHS should provide additional guidance on screening as set forth below:</p> <p>a) Establish a required information standard for reports received at child protection services intake. This standard would specifically describe information that must be gathered, if obtainable, and documented in all cases. However, the inability of the reporter to provide this</p>	<p><input checked="" type="checkbox"/> Deadline (1/2016)</p> <p><input checked="" type="checkbox"/> Legislative Action (2015)</p> <p><input type="checkbox"/> Technology/Infrastructure</p> <p><input type="checkbox"/> Ease of Implementation</p>	<p>a) Screening Guidelines (pages 17-19 of Dec. ’15 version)</p>	<p>Screening Workgroup</p>	

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	<p>minimal information should not be decisive to whether a report is screened in. This information should minimally include:</p> <ul style="list-style-type: none"> • Description of allegations • Child’s injury/condition as a result of the alleged maltreatment • Information that the child may be of American Indian heritage • Description of the child’s current location, functioning, special needs and vulnerability • Description of threats to child safety • Name, age, gender, race, ethnicity of all members of the household and their relationships to each other, address, phone numbers, places of employment, child’s school, daycare, or child care • Presence of domestic violence • How the family may respond to intervention • Reporter’s name, if given, relationship to the family, and source of information • Consideration of the safety of all children in the household and all children of the alleged offender, whether the offender’s children reside in the household or elsewhere. 		<p>b) Screening Guidelines (page 19 of Dec. ’15 version) Quality of information documented in reports reviewed through CQI Screening Reviews</p> <p>c) Examples in Screening Guidelines</p> <p>d) Screening Guidelines</p> <ul style="list-style-type: none"> • Bullets 1 & 2 - page 48 of Dec ’15 version (physical abuse) • Bullet 3 – pg 24 prenatal exposure to AOD, pg 25 “reports involving AOD” section (Dec. ’15 version) 		<p>b) Needs SSIS work</p>
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	<p>b) Ensure county and tribal agencies are recording reports received, reports screened in, and reports screened out. This will permit future evaluation and use of prior screened out reports. It will also permit a true measure of the number of reports screened by county and tribal agencies. The documentation should also identify referrals to early intervention services and/or pertinent community services and resources.</p> <p>c) Consider additional nonexclusive examples in the guidelines of what may be considered when making screening decisions, even when the report is made by someone other than a police officer or health care provider, including but not limited to:</p> <ul style="list-style-type: none"> • Reports of driving under the influence with children present • Medical neglect reports • Mental and emotional harm reports. <p>d) Provide additional guidance on criteria for screening in a report of child maltreatment to include:</p> <ul style="list-style-type: none"> • A description of behavior or an action that a reasonable person would conclude may have resulted in maltreatment of a child • Injuries to or a condition of the child that a reasonable person would construe to be a result of maltreatment 		<ul style="list-style-type: none"> • Bullet 4 - page 45 & 46 of Dec. '15 version <p>e) Screening Guidelines (page 56 & 57 of Dec. '15 version)</p>		
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	<ul style="list-style-type: none"> Guidance on screening cases involving parental drug/alcohol use and factors for consideration including the age of the child, the type of drug involved, drug use in the home regardless of whether the children are present, prior services to the parent for chemical use concerns. Educational neglect and truancy. The Guidelines must be amended to reflect that school absences are often the symptom or indicator of another problem such as mental health issues involving the child or within the family, chemical use of the child or within the family, physical or sexual abuse, and/or other expressions of neglect. <p>e) Guidance as to limiting pathway response assignment to Differential Response where similar issues/concerns and/or the same family unit as received a previous child protection services response.</p>				
6.	<p>Require the professional receiving and documenting the report of child maltreatment to be a child welfare professional with a minimum of a bachelor’s level degree and someone who has completed training specific to child maltreatment intake provided by DHS. If a county lacks capacity and need based on minimum volume of maltreatment reports, the county could consider establishing multi-county collaborative models for screening and accepting reports of child maltreatment.</p>	<input checked="" type="checkbox"/> Deadline (1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> 2nd paragraph: Screening Guidelines – page 22 & 23 	Screening Workgroup	<ul style="list-style-type: none"> First paragraph – DHS in support of this; would require legislation. Training will be incorporated into training academy Need better structure in SSIS to document work force demographics/characteristics

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	<p>The professional receiving and documenting the report should not be the only professional making the final screening or pathway decision on that report. In the absence of a team-based screening, the screening decisions must be confirmed by the Social Work Supervisor or the Social Work Supervisor’s designee. Input from other professionals, such as law enforcement, mental health professionals and physicians can strengthen decisions and should be encouraged. DHS should work with counties to form models to implement a multi-disciplinary approach to screening. Screeners and/or supervisors should consult with the County Attorney’s Office when there is ambiguity regarding whether a case should be screened in or out, and on all agency policies implementing screening decisions.</p>				
7.	<p>Screen new reports in as duplicate reports when they include the same allegations that are currently receiving a child protection response. When a new report is received that contains different allegations than what are currently being responded to, the new report will be screened and assigned based on the new allegations.</p>	<p><input checked="" type="checkbox"/>Deadline (1/2016) <input checked="" type="checkbox"/>Legislative Action (2015) <input type="checkbox"/>Technology/Infrastructure <input type="checkbox"/>Ease of Implementation</p>	<ul style="list-style-type: none"> • Screening Guidelines – pg 19, 20 & 21 	<p>Screening Workgroup</p>	<ul style="list-style-type: none"> • Pending MN.IT/SSIS action
8.	<p>Require local county and tribal child welfare agencies to take a report even if that county/tribal agency is not responsible for the screening of a particular report because of jurisdictional issues. This ensures the information is received and does not require additional action by the reporter. The receiving county/tribal agency must then immediately refer the report to the jurisdictionally appropriate county/tribal agency of screening responsibility. The Social</p>	<p><input checked="" type="checkbox"/>Deadline (1/2016) <input checked="" type="checkbox"/>Legislative Action(2015) <input type="checkbox"/>Technology/Infrastructure <input type="checkbox"/>Ease of Implementation</p>	<ul style="list-style-type: none"> • Screening Guidelines – pg. 27 	<p>Screening Workgroup</p>	<ul style="list-style-type: none"> • Pending MN.IT/SSIS action

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	Service Information System (SSIS) system should be modified to create a drop down selection for “transfer” to reflect the protocol for the processing of these referrals.				
9.	DHS should make Information Technology (IT) changes necessary to ensure accessibility across the state system to maltreatment reports, including narrative justification for screening decisions and other pertinent records across counties. These changes must allow screeners to gather information about prior or current social service involvement when evaluating a new report. It should include information about specific services offered/completed/refused/failed, as well as prior court involvement. The planning process to include tribal social service reports should begin as well.	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation		DHS	<ul style="list-style-type: none"> In process with MN.IT/SSIS; moving forward
10.	DHS should coordinate with the State Court Administrator to require reporting of Orders for Protection (OFP) and Harassment Restraining Orders (HRO) where a child was present, or dismissals of the same.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2017) <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- Domestic Violence Response model) <input checked="" type="checkbox"/> Ease of Implementation (Difficult)	•	Domestic Violence Workgroup	<ul style="list-style-type: none"> Domestic Violence Work Group convened in March Domestic Violence Work group meetings have ended. Summaries of their work and/or practice guidance is currently being developed. Upon completion of draft(s), next step is for information to be reviewed by Recommendations Implementation Work group and others. (11/14/16)
11.	DHS should further develop practice models to not close cases where an OFP or HRO has been filed due to the high number of dismissals of these actions shortly after filed and reunification of the victim and perpetrator.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2017) <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- Domestic Violence Response model) <input checked="" type="checkbox"/> Ease of Implementation (Difficult)	•	Domestic Violence Workgroup	<ul style="list-style-type: none"> Domestic Violence Work Group convened in March Domestic Violence Work group meetings have ended. Summaries of their work and/or practice guidance is currently being developed. Upon completion of draft(s), next step is for information to be reviewed by

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					Recommendations Implementation Work group and others. (11/14/16)
12.	Complete, at intake, a search of a family’s pertinent Child Protective Services (CPS) and Child Welfare records as well as CPS records of any person named by report as a suspected offender. This should include, at minimum, a complete records review of the electronic Minnesota Public Access Court Records system. DHS should work with the Judicial Branch to ensure access to all relevant court records, not just those publically accessible, when it would be helpful to enhance child protection. Additionally, data practices must be amended to allow the agency access to Statewide Supervision System by the individual assigned to complete the child protection Traditional and/or Differential Response. DHS should work with the Department of Corrections to ensure access to all statewide supervision records for purposes of completing a child protection services response.	<input checked="" type="checkbox"/> Deadline (1/2016 for 1 st half of recommendations) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input checked="" type="checkbox"/> Ease of Implementation (Difficult- tied to recommendations #47 & #48)	Category: Child Protection Practice <ul style="list-style-type: none"> 1st half in Guidelines - pg. 38 Links to Recommendation #47 & #48	Screening Workgroup- 1 st half of recommendations. DHS/Implementation Workgroup 2 nd half of recommendations.	<ul style="list-style-type: none"> 2nd half requires statutory amendment and consultation with DOC; CP should not have access to their database/system Sealed records- juvenile records- levels of predatory offenders CCWIS Requirements: connect to other data systems DOC database- what does research tell us for screening determinations. What are criminal variables that contribute to child abuse/neglect Committee to focus on data- sharing- access- would legislators permit this- requires legislation We have better access through electronic filing- OFP’s, etc... Use collateral contacts- call law enforcement How and when it will be used and at what decision points. Best Practice around partnerships & MDT decision making.
13.	Send all reports of maltreatment to law enforcement, regardless of whether the report is screened in or screened out.	<input checked="" type="checkbox"/> Deadline (1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> Screening Guidelines – pg. 31 	Screening Workgroup	<ul style="list-style-type: none">
14.	Amend the mandated reporter statute and screening guidelines to allow screeners to seek collateral information from mandated reporters when making a screening decision.	<input checked="" type="checkbox"/> Deadline (1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> M.S. 626.556, subd. 7(b) Screening Guidelines – pg. 27 	Screening Workgroup	<ul style="list-style-type: none"> Statutory change required; currently gives permission to contact parents prior to screening

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15.	<p>Clarify statutory provisions addressing the release of data to mandated reporters to state that child protection agencies must provide relevant private data of a child affected by the data to mandated reporters who made the report, except in limited cases where it is not in the best interest of the child. Further, county agencies should be encouraged to provide such communication to other mandated reporters who did not make the original report when that mandated reporter has an ongoing responsibility for the health, education, or welfare of a child and the information is pertinent to the mandated reporter’s caring for a child.</p>	<input checked="" type="checkbox"/> Deadline 1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> • M.S. 626.556, subd. 10j 	<p>Legislator, Screening Workgroup, & DHS “Best Practices Guide” for assessment & investigation</p>	<ul style="list-style-type: none"> • Will be in “Best practices guide” for assessment & investigation
16.	<p>Amend Substantial Child Endangerment to include:</p> <p>a) Injury to the face, head, back, or abdomen of a child under the age of six and injury to the buttocks of a child under age three. Bruising to the buttocks of a child over age three does not preclude a traditional response.</p> <p>The Department, after consultation with counties, tribes and stakeholders, will develop and provide guidance for responding to allegations involving injuries to a child’s buttocks to differentiate between “reasonable and moderate physical discipline of a child administered by a parent or legal guardian which does not result in an injury” and “physical injury inflicted by a person responsible for the child’s care on a child other than by accidental means”. The department will include this guidance</p>	<input checked="" type="checkbox"/> Deadline (1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> • a) Screening Guidelines (pg. 48) indicate these should be FI response 	<p>Screening Workgroup</p>	<ul style="list-style-type: none"> • b) – e) appear to already be in statute as proposed by the Task Force

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	<p>as part of its 2016 reporting submission to the legislature in 2016.</p> <p>b) Neglect that substantially endangers the child’s physical or mental health, including a growth delay, which may be referred to as failure to thrive, which is due to parental neglect.</p> <p>c) Withholding a medically indicated treatment from a child with a life threatening condition unless exempted in Minnesota Statute 260C.007 subd. 6 (5).</p> <p>d) Abandonment of the child which is defined as occurring when a parent has no contact with their child on a regular basis and has not demonstrated consistent interest in the child’s well-being.</p> <p>e) Behavior that constitutes “a pattern of past child abuse”, as referenced in Minn. Stat. § 609.223, subd. 2, which is defined as an act committed against a minor victim that constitutes a violation of the following laws of this state or any similar laws of the United States or any other state: section 609.221 (Assault 1); 609.222 (Assault 2); 609.223 (Assault 3); 609.224 (Assault 5); 609.2242 (Domestic Assault); 609.342 (Criminal Sexual Conduct 1); 609.343 (Criminal Sexual Conduct 2); 609.344 (Criminal Sexual Conduct 3); 609.345 (Criminal Sexual Conduct 4); 609.377 (Malicious Punishment); 609.378 (Neglect or Endangerment of a Child); or 609.713 (Terroristic Threats). Within the Guidelines, the references to criminal</p>		<ul style="list-style-type: none"> e) Screening Guidelines – pg. 34 		
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	statutes must be included in plain language along with the statutory reference.				
17.	<p>Recommend referrals alleging domestic violence in the presence of children not immediately be included as Substantial Child Endangerment; however, a 24-hour response time for the first face-to-face contact with the alleged child subject is required to look into the following concerns so that appropriate track decisions can be made:</p> <ul style="list-style-type: none"> a) There is reason to believe the child is intervening or will intervene, placing him or her at risk, or b) The child is likely to be injured during the violence (e.g. being held during the violence, physically restrained from leaving, or used as a shield, or c) The alleged offender does not allow the protective parent and child access to basic needs impacting their health and safety, or d) The alleged perpetrator has killed, substantially harmed, or is making a believable threat to do so to anyone in the family, including extended family members and pets, or e) The child exhibits observable behavioral, emotional or psychological effects, or f) Serious injury to non-offending parent (e.g. broken bones, internal injuries, strangulation, etc.), or g) Violence is increasing in frequency and severity, or h) Weapons were used or threatened, or i) Threats of kidnapping, suicide, or homicide. 	<ul style="list-style-type: none"> <input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2017) <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- Domestic Violence Response model) <input checked="" type="checkbox"/> Ease of Implementation (Difficult) 		Domestic Violence Workgroup	<ul style="list-style-type: none"> • Domestic Violence Work Group convened in March • Screening Guidelines – pg 51 & 57 – but does not require a 24-hour response because not included in definition of substantial child endangerment. Would require a statutory change. • Domestic Violence Work group meetings have ended. Summaries of their work and/or practice guidance is currently being developed. Upon completion of draft(s), next step is for information to be reviewed by Recommendations Implementation Work group and others. (11/14/16)

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	DHS must develop and provide guidance for a Domestic Violence Child Protective Services Response Track as part of its response continuum.				
18.	Amend the definition of medical neglect in Minnesota Statute 626.556, subd. 2(f) (7) to state that medical neglect does not need a diagnosis from a physician to be screened in. In addition, medical neglect should be broadened from medical neglect of an “infant” to medical neglect of a “child”. The current definition is a cross-reference to the definition in Chapter 260C which is for cases in court and is too restrictive for the reporting and screening in statute.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2017) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	Screening Guidelines – examples on pg. 43	DHS/Legislator	<ul style="list-style-type: none"> Propose amendment to change definition in statute from “infant” to “child”
19.	Amend the statutory definition of “physical abuse” set forth in Minn. Stat. 626.556, subd. 2 (g), to delete the language “that are done in anger or without regard to the safety of the child.” Instead, the statute should simply state that “Actions which are not reasonable and moderate include, but are not limited to, any of the following:” (1-10 which includes throwing, kicking, burning, cutting, etc.)	<input checked="" type="checkbox"/> Deadline (1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> M.S. 626.556, subd. 2(k) Screening Guidelines – pg. 48 	Screening Workgroup	<ul style="list-style-type: none">
20.	Amend the definition of “Threatened injury” under Minnesota Statutes 626.556, subd. 2 (n) to include: a) Child who was exposed prenatally to chemical or alcohol use. This is measured by a child who tests positive for any chemical, including alcohol, that is not prescribed to the mother or any mother who tests positive any time during the pregnancy or delivery for a chemical, including alcohol, not prescribed to her;	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2017) <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- workgroups meeting addressing specific areas including prenatal exposure and domestic violence) <input checked="" type="checkbox"/> Ease of Implementation (Difficult)	Category: Child Protection Practice Link to #48 attempt for 2017 Legislative as well as current workgroup activities/outcomes (Prenatal Exposure & Domestic Violence)	Domestic Violence Workgroup Alcohol and Other Drug/Prenatal Exposure workgroup Implementation Workgroup	<ul style="list-style-type: none"> Will be discussed at DV work group Consider AOD/Prenatal Exposure work group We have active workgroups- can we check with them before proceeding (DV, SEY, tribal-Shirley can present) What are the implications for resources Adds alcohol Adds in the home Adds voluntary

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	<p>b) Domestic violence where a child is present in the home at the time of the alleged abuse;</p> <p>c) Exposing a child to someone whose parental rights were terminated or whose parental rights were transferred to another following the filing of an involuntary petition of termination of parental rights or an involuntary transfer of legal and physical custody to another, regardless of whether the termination or custody transfer was deemed voluntary or involuntary.</p>				<ul style="list-style-type: none"> • Broader review of statute
21.	<p>Require efforts to notify the other parent of a Traditional (TR) or Differential Response (DR):</p> <p>a) If the DR or TR will not be compromised, the other parent should be notified at the same point as the custodial parent of the report and DR or TR.</p> <p>b) If the DR or TR will be compromised, the other parent should be notified as soon as possible once the threat of the interference with the DR or TR is removed.</p> <p>c) Notification should not occur in the event an OFP or HRO is in place unless the agency determines that the notification is in the best interests of the child.</p> <p>d) The other parent should be provided with notification of the TR or DR outcome including the services that are offered to the custodial parent and child.</p> <p>e) To obtain contact information for the other parent, the agency may utilize the information available through the child</p>	<p><input type="checkbox"/>Deadline</p> <p><input type="checkbox"/>Legislative Action</p> <p><input type="checkbox"/>Technology/Infrastructure</p> <p><input checked="" type="checkbox"/>Ease of Implementation (Medium)</p>	<p align="center">Need follow-up</p>	<p>DHS/Implementation Workgroup</p>	<ul style="list-style-type: none"> • On legislative placement list (pg. 43 of Legislative Task Force report)

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	support enforcement unit to the extent not inconsistent with federal law. f) In no case shall the inability to locate or notify the other parent impair the agency’s ability to respond to the maltreatment report.				
22.	Amend the statutory definition of “Investigation” under 626.556 subd. 2 (b) and subd. 10 (a) (1) to clarify that investigation must be used, at a minimum, for all cases that involve substantial child endangerment or high risk allegations of harm, neglect, or injury to the child. Currently the statute is being misinterpreted to limit investigation to only cases involving substantial child endangerment. In addition, “Investigation” will be renamed as “Traditional Response”.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2017) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> Screening Guidelines – pg. 56-57 – includes discretionary assignment to FI 	Screening Workgroup	<ul style="list-style-type: none"> Propose amendment to change “investigation” language to “Traditional Response”
23.	Change the statutory definition of reports to: “Report” means information given to the responsible agency or law enforcement which describes alleged child maltreatment and which includes enough information to identify the child victim and the child’s caretaker or the alleged offender.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> M.S. 626.556, subd. 2(m) 	Legislator	<ul style="list-style-type: none">
24.	DHS should work with counties, tribes and other stakeholders and experts to examine the possible development of a statewide child abuse and neglect reporting system creating one number with a system to route calls to the appropriate local child welfare agency. Local county and tribal child welfare agencies would be permitted to maintain practices for accepting reports of suspected maltreatment and the decision making authority on how to handle the reports would remain with counties. The statewide system should be able to route calls 24 hours per day, seven days per week, necessitating counties to	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Funding/statutory changes, etc...) <input checked="" type="checkbox"/> Technology/Infrastructure <input checked="" type="checkbox"/> Ease of Implementation (Difficult)	<ul style="list-style-type: none"> 	DHS/Implementation Workgroup	<ul style="list-style-type: none"> Develop a specific work group with members with expertise in the front-end (intake, screening, assessment, investigation) <ul style="list-style-type: none"> Work group would need to look at SSIS capacity CCWIS- review Review reports of results of screening reviews

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<p>have designees in place to accept calls outside of normal business hours. In designing this new system, the following items should be considered:</p> <ul style="list-style-type: none">a) Creation of a steering committee composed of state, county, and community stakeholders as well as individuals with telephone experience.b) Review of New York’s and Colorado’s statewide systems and outcomes to see if they have created greater quality in intake and screening leading to increased child safety.c) Promotion of one 24/7 statewide child abuse reporting hotline with calls routed to the appropriate county or tribe.d) Review for impact recording may have on a reporter’s willingness to freely share critical information regarding a child and a familye) Exploration of a “cloud” system for interactive voice response, call data, call recording, and consideration for data practices implications.f) Accommodations for callers who do not speak English and accessibility for people who are deaf or have hearing impairments.g) A public awareness campaign to promote the statewide hotline and reporting of suspected child maltreatment.h) Central record-keeping and tracking of both “reports” and “inquiries”.i) Process by which counties can opt to have DHS or another county to receive reports and inquiries on their behalf.				
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	<p>j) Standardized training and certification for all staff prior to taking reports and inquiries.</p> <p>k) Consistency in information gathering.</p> <p>l) Adequate staffing and resources for counties and the state to implement the hotline, especially with anticipated increased reports with the visibility of a single state-wide number.</p> <p>m) Continuous quality improvement: listening to audio taped calls and providing training, feedback, coaching to workers and supervisors.</p> <p>n) System-side data collection.</p> <p>o) State hotline administration/unit, help desk functions and escape features from automated system to talk to a live person.</p>				
25.	<p>DHS should, as part of redesign review, engage an independent reviewer with expertise in child protection services to review Minnesota’s child maltreatment screening statutes, guidelines, and practice and make recommendations on needed changes to complete the shift to a system focused on the best interest of the child. The review should address and provide recommendations on the following:</p> <ul style="list-style-type: none"> • Appropriateness of the rate of screened out reports and screened in reports and the resulting impact on child safety • Are the parameters reflected within the scope of Minnesota’s child maltreatment screening statutes appropriately designed to ensure child safety • Are the parameters reflected within the scope of Minnesota’s screening 	<p><input type="checkbox"/>Deadline</p> <p><input checked="" type="checkbox"/>Legislative Action (Funding)</p> <p><input checked="" type="checkbox"/>Technology/Infrastructure (Infrastructure- after completion of response path continuum work)</p> <p><input type="checkbox"/>Ease of Implementation</p>	<p>Link to #47</p>	<p>DHS/Implementation Workgroup</p>	<ul style="list-style-type: none"> • Revisit after response path continuum completed. • Research project with estimated cost of \$500,000 for external evaluation

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	<p>guidelines appropriately designed to ensure child safety</p> <ul style="list-style-type: none"> • Is Minnesota’s practice for receiving and screening reports of child maltreatment sufficiently assessing and responsive to child safety • Are there recommended strategies or system modifications that could better ensure uniformity in practice across the state. 				
26.	<p>Revise the guidelines to provide explicit guidance on reports related to older children. Presently, too many older children do not receive adequate protection or services. Often their avoidance response to abuse/neglect makes them particularly vulnerable: running away, joining a gang, using drugs and entering endangering relationships. More thorough assessment must be done and alternative living arrangements with statutory authorization should occur.</p>	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- current initiatives are in process including homeless youth and runaway youth) <input type="checkbox"/> Ease of Implementation	<p>Category: Older Youth</p> <ul style="list-style-type: none"> • Screening Guidelines – pg. 26 <p><i>DHS work plan, Interagency Council on Homelessness, proposal for 2017 Legislative Session, DHS Bulletin- Runaway Youth</i></p>	DHS/State Youth initiative committees	<ul style="list-style-type: none"> • Partially complete • Resources for homeless youth- Link, Outfront, Reclaim, Host Homes, etc... • What does our data say • 2 generational models • Partnerships with children’s mental health & department of corrections • Increase pressure on foster care resources • IV-E, Fed \$’s changing • Coordination with housing resources • Independent living • Emancipation
27.	<p>Review and change the focus of Chapter 260C of runaway/truancy CHIPS from punishing/addressing only the juvenile’s problems to a whole family assessment to look to the reason for the behavior. Too often the running and truancy is the reaction to an underlying family problem that is not limited to the child’s behavior or issues.</p>	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- current initiatives are in process including homeless youth and runaway youth) <input type="checkbox"/> Ease of Implementation	<p>Category: Older Youth</p> <p><i>DHS work plan, Interagency Council on Homelessness, proposal for 2017 Legislative Session, DHS Bulletin- Runaway Youth</i></p>	DHS/State Youth initiative committees	<ul style="list-style-type: none"> • What does current data tell us? • The “how” is very different per county • Review federal alignment- SEY- Homeless youth • Disproportionality/Disparities – disparity • Legislative change • Parental accountabilities • What are best practices • What are the impacts to caseloads, out of home care, and resources

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					<ul style="list-style-type: none"> • When are our partner organizations in this • Child well-being assessment to transitioning to adulthood
28.	Complete, by the Reviser of Statutes, in collaboration with DHS and Ann Ahlstrom, Staff Attorney and Co-manager of Children’s Justice Initiative (CJI), an organizational revision of Minnesota Statute 626.556 to alphabetize definitions, create internal consistency, eliminate redundant language, reorganize the statute into new statutes (i.e. separating institutional investigations from non-institutional investigations), and correct internal references and references to other statutes.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Legislative Task Force) <input type="checkbox"/> Technology/Infrastructure <input checked="" type="checkbox"/> Ease of Implementation (Difficult)	Legislative Task Force	Legislative Task Force	<ul style="list-style-type: none"> • Legislative Task Force workgroup charge
29.	Rename Family Assessment to Differential Response (DR) and Family Investigation to Traditional Response (TR). This renaming would be consistent with national practice and help avoid confusion when interpreting federal laws and regulations.	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Technology- SSIS, Infrastructure- link to recommendation #28) <input type="checkbox"/> Ease of Implementation	Category: Child Protection Practice Link to #28 work	DHS/Implementation Workgroup	<ul style="list-style-type: none"> • Needs further analysis • Would require legislation • Impact (paperwork, staff) • SSIS • Messaging- pamphlets, newsletters • Nationally recognized language (research & practice) • DR & Investigation vs TR •
30.	Differential Response and Traditional Response are both involuntary child protection responses to reports of alleged child maltreatment. It is critical that either response provide a critical and methodical assessment of child safety while identifying key family strengths that can be built upon to mitigate safety and risk concerns. The goals of any child protection response should be to: <ul style="list-style-type: none"> • Make child safety paramount in a decision making 	<input checked="" type="checkbox"/> Deadline (1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> • Screening Guidelines – pg. 54 	Screening Workgroup	<ul style="list-style-type: none"> •

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	<ul style="list-style-type: none"> Assess and ensure the safety of any child involved Conduct thorough fact finding to determine if a child has been harmed and/or if services are needed Identify family strengths to mitigate risk factors and ensure child safety Be culturally affirming Coordinate and monitor services to families Address effects of maltreatment through trauma-informed interventions Promote child well-being and permanency Increase positive outcomes (i.e., reduced re-reports, avoid subsequent harm). 				
31.	Make child safety the focus of any child protection response. The statute should no longer identify Differential Response as the preferred method.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> M.S. 626.556, Subd. 1 	Legislators	<ul style="list-style-type: none">
32.	Interview children individually first and prior to contact with parent/legal guardian whenever possible. In addition, DHS should research and implement training on best practices in regards to child interviewing protocols. These protocols would be developed in consultation with content experts, cultural advisors, counties and other key stakeholders. Specific practice guidance should be provided regarding audio recording of interviews, locations of child interviews, and interview techniques that are culturally responsive and trauma-informed. Child safety must be the primary guide as to when and how to structure interviews.	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- “Best Practices Guide” for assessment & investigation) <input type="checkbox"/> Ease of Implementation		Screening Workgroup & DHS	<ul style="list-style-type: none"> Will be in “Best practices guide” for assessment & investigation Some curricula/training revisions in process (Foundation WBTS and classroom) “Minnesota’s Best Practices in Family Assessment and Family Investigation” was released statewide on 10/17/16. (11/14/16)

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<p>33.</p>	<p>Ensure fact-finding occurs in all child protection responses. DHS should develop protocols to support thorough fact-finding. At minimum, information to be gathered should include gathering details from a variety of sources including the alleged victim(s), sibling(s), parent(s), and other relevant collateral contacts regarding:</p> <ul style="list-style-type: none"> • Who, what, when, where and how regarding the reported allegation • Patterns of behavior that present risk to a child (i.e., recency, frequency, duration, severity) • Harm (current and historical) and its respective impact it has on said child • Protective parental capacities (e.g., knowledge of parenting and child development; nurturing and attachment; parental resilience; social and emotional competence; concrete supports in times of need; and social connections) • Child vulnerability factors (e.g., age, disability, etc.) • Family and/or child(ren) strengths that promote resiliency • Context and times within the family when the child is safe as a starting point for additional safety planning or services. <p>DHS should develop a required case summary form for Traditional Response and Differential Response cases in the Social Service Information System (SSIS) where results of fact-finding must be documented. This would include details surrounding the reported allegations and include a statement about whether or not the reported</p>	<p><input type="checkbox"/>Deadline <input type="checkbox"/>Legislative Action <input checked="" type="checkbox"/>Technology/Infrastructure (Infrastructure- partially completed via Screening Guidelines and Best Practice Guide. MN.IT/SSIS enhancements needed) <input type="checkbox"/>Ease of Implementation</p>	<p align="center">Awaiting approval</p>	<p>Screening Workgroup Implementation Workgroup</p>	<ul style="list-style-type: none"> • Partially completed through Screening Guidelines, Best practice guide and SDM manual • If continue with SDM will need to better address/incorporate protective factors • Discussions occurring regarding safety-organized practice • MN.IT/SSIS Enhancement Request has been submitted • “Minnesota’s Best Practices in Family Assessment and Family Investigation’ was released statewide on 10/17/16. (11/14/16)
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	<p>maltreatment incident occurred and identify the victim(s) and offender(s). Data from this case summary form will be gathered and tracked to identify county, tribal, and state trends.</p>				
34.	<p>DHS to encourage and support the use of Multi-Disciplinary Team (MDT) decision making by developing the infrastructure to support the development of MDTs across the state. The MDT infrastructure would address:</p> <ul style="list-style-type: none"> Philosophy behind MDTs MDT specific training An evaluation component Ongoing training for MDTs. <p>Any and all statutes, policies, and/or practice guidance that discourage use of MDTs should be discontinued.</p>	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input type="checkbox"/> Technology/Infrastructure <input checked="" type="checkbox"/> Ease of Implementation (Easy to Medium)		DHS	<ul style="list-style-type: none"> Planning for MDT Conference underway Unclear about the evaluation component 2016 MDT Conference was held on 11/4/16. There were 184 professionals representing 26 different counties registered to attend. (11/14/16)
35.	<p>Adopt stronger and more robust intake and screening tools for data gathering prior to pathway assignment to strengthen the quality of the information available.</p>	<input checked="" type="checkbox"/> Deadline (1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- Screening Guidelines will guide tool development) <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> Screening Guidelines 	DHS & Screening Workgroup	<ul style="list-style-type: none"> Tools can be developed based on Guidelines; will require a contract
36.	<p>DHS should, as an interim measure, retain dual pathways for responding to reports of alleged child maltreatment. The dual pathways should include Traditional Response (Family Investigation) and Differential Response (Family Assessment). Explicit criteria for immediate assignment of High Risk and Low Risk allegations of child maltreatment must be defined:</p> <ul style="list-style-type: none"> High Risk (all Substantial Child Endangerment and can include other risk factors) – Traditional Response 	<input checked="" type="checkbox"/> Deadline (1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- Screening Guidelines and updates of tools to guide next steps regarding moderate risk) <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> Screening Guidelines – pg. 56-59 	Screening Workgroup Implementation Workgroup DHS	<ul style="list-style-type: none"> 3rd bullet (moderate risk) yet to be addressed

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	<ul style="list-style-type: none"> • Low Risk (Reports of alleged child maltreatment that are clearly low risk. These are reports that exclude all Substantial Child Endangerment and Moderate and High Risk. Additional criteria is necessary to ensure the proper parameters that clearly define a maltreatment report as low risk)- Differential Response • All other cases, which include those with moderate risk and those which are difficult to assign without additional information (excludes all Substantial Child Endangerment). These maltreatment referrals require fact-finding before track assignment can be made. DHS is to provide guidance on necessary fact finding inclusive of collateral contacts and face-to-face interviews with child subjects and parents or caregivers. 				
37.	DHS must develop, in consultation with counties, tribes, stakeholders and subject matter experts, a required information standard for making pathway response determination. This standard should reflect what is required and be implemented with a practice understanding that more information is better. Fact finding must occur until such time the pathway assignment required information standard is met. Fact finding efforts may include collateral contacts and “in-person” interviews with the child subject and the family.	<input checked="" type="checkbox"/> Deadline (1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> • Screening Guidelines – pg. 56-59 	Screening Workgroup	<ul style="list-style-type: none"> •
38.	DHS shall, in consultation with counties, tribes, subject matter experts, and stakeholders, define clear and consistent pathway assignment criteria to either pathway including a definition for cases	<input checked="" type="checkbox"/> Deadline (1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure	<ul style="list-style-type: none"> • Screening Guidelines – pg. 57 	Screening Workgroup	<ul style="list-style-type: none"> •

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<p>appropriate for Differential Response. Cases that clearly should follow pathway assignment into Traditional Response will be assigned within 24 hours, consistent with the substantial child endangerment statute. DHS should develop guidance regarding the timing for those cases that require initial fact finding.</p> <p>Criteria should also be provided for when path switching is or is not allowed and identify specific documentation requirements to support the decision. It is important to note that pathway determination should not extend any existing timeframes for the initial face-to-face contact with the alleged child victim. These criteria should be developed on or before December 31, 2015. In addition to existing statutes that define specific child protection responses for defined actions (i.e., Substantial Child Endangerment), other criteria for pathway assignment to be considered should minimally include:</p> <ul style="list-style-type: none"> • Necessary fact finding before a track decision is made for those alleged maltreatment referrals believed to present moderate risk • Multiple differential response cases within a certain time period • The age of the child and other children in the home. The identified age should be based on clearly defined objectives which could include the risk for fatal, or near fatal injury, brain development, social isolation, or the child’s ability to protect him/herself • Other vulnerabilities (child is developmentally delayed, pre-verbal, etc.) 	<p><input type="checkbox"/>Ease of Implementation</p>			
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	<ul style="list-style-type: none"> The presence of unrelated adults in the household. 				
39.	DHS will monitor and evaluate initial pathway assignment and path changes using the established criteria and provide feedback to counties and tribes regarding the quality of decision making. A culture of continuous quality improvement should be supported and promoted. Results of pathway assignment should also be used for training and accountability.	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- incorporate into current DHS QA activities) <input type="checkbox"/> Ease of Implementation		DHS	<ul style="list-style-type: none"> Plans to add to current DHS QA staff (screening review team) responsibilities
40.	<p>DHS should immediately review, update, and validate all decision making tools with priority given to the safety assessment. In general, any tools used by DHS and counties are to have a clear purpose, to facilitate decision making at critical points in the child protection response, and that such tools are updated, and valid. In addition, that any tools adopted are culturally responsive and appropriate for families from different racial, ethnic, and socio-economic backgrounds. Overall, regarding all tools, DHS should clearly define:</p> <ul style="list-style-type: none"> What decision-making tools are to be used at key decision making points along the child protection continuum The purpose for each decision making tool, and <p>How the specific tools are to guide decision making.</p>	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- in process of revalidating Risk Assessment) <input type="checkbox"/> Ease of Implementation	In progress	DHS	<ul style="list-style-type: none"> Current contract in place with CRC to revalidate the Risk Assessment Will require an advisory group comprised of county/tribal and DHS staff to review SDM and other options for tools
41.	<p>Identify a validated safety assessment tool that better reflects dangerousness and child vulnerability factors. A safety assessment should address any factors proven to predict safety concerns. Some potential factors could include:</p> <ul style="list-style-type: none"> Recentness of abuse/neglect Frequency 	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- linked to recommendation #40) <input type="checkbox"/> Ease of Implementation	Safety Organized Practice Workgroup/led by DHS Safety Coordinator- Legislative funding needed	DHS	<ul style="list-style-type: none"> See #40 above

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	<ul style="list-style-type: none"> Severity Child characteristics. 				
42.	DHS should review research on protective factors and predictive analytics for how it can reduce or eliminate risk factors, and implement this information in trainings and practice. This would include use of screening and assessment instruments that have been validated. This should be done through a long-term contract arrangement to improve child safety outcomes over time.	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Linked to recommendation #41) <input type="checkbox"/> Ease of Implementation	Link to #41	DHS Implementation Workgroup	<ul style="list-style-type: none"> Tied to #40 & 41. Lit review required – will be incorporated into training modules
43.	Require in statute a mandatory consultation with the county or tribal attorney to determine the appropriateness of filing a Child in Need of Protection or Services (CHIPS) petition in the event that a family does not engage in necessary services and child safety and/or risk issues have not been mitigated prior to closure of a child protection case, regardless of track.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> M.S. 626.556, subd. 10m (b) 	Legislators	<ul style="list-style-type: none">
44.	Include in statute the requirement for a minimum of monthly face-to-face contact with children for cases in which a family is receiving protective services while the child(ren) remains in the home.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Legislative action needed) <input checked="" type="checkbox"/> Technology/Infrastructure (Technology- SSIS modifications needed) <input type="checkbox"/> Ease of Implementation	Category: Child Protection Practice DHS & MACSSA (Performance Withhold Measure)	DHS	<ul style="list-style-type: none"> Would require legislation 2015 CP Allocation legislation requires monthly visits with children receiving CP case management services while residing in their homes to be eligible for withheld funds. 2016 proposal to remove that language. No other requirement/plan Who’s the identified client What is research/best practice Capacity of counties & tribes to do that Location- where (homeless youth, etc.) Who should be responsible for eyes on Train this function- quality of visits

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					<ul style="list-style-type: none"> • SSIS documentation • Statute-jurisdiction • SDM Risk classification tools • Professional judgment- individual level, client specific
45.	Traditional Response cases should result in the following determinations: maltreatment determined (yes or no) and are child protective services needed, (yes or no). For Differential Response cases the determination would include whether or not child protective services are needed. Documentation for DR cases will include a case summary form which will include a statement that will identify if the child experienced maltreatment. This data should be entered into SSIS so that they can be reviewed in future cases and so that summary data on a county-wide basis can be collected. DHS should provide guidance on criteria and best practice for making the determinations and require supervisory review and approval.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Legislative action needed) <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- Finalization of Best Practices Guide for Assessment and Investigations. Link to Recommendation #48) <input checked="" type="checkbox"/> Ease of Implementation (Difficult- CAPTA funding requirements)	Category: Child Protection Practice DHS: Link to #48 attempt for 2017 Legislative	DHS Implementation Workgroup	<ul style="list-style-type: none"> • Outline and identify intended and unintended consequences • Consideration of appeal procedure – impact to CAPTA funding
46.	Complete trauma pre-screenings on any child during a child protection response. DHS should pilot a trauma pre-screen tool in 2015 and expand statewide in 2016. Implementation of trauma pre-screening should be consistent with research on best practices.	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- pilot in process, linked to Recommendation #41) <input type="checkbox"/> Ease of Implementation	In progress and link to #41	DHS/Trauma pre-screen pilot	<ul style="list-style-type: none"> • Trauma pre-screen pilot being implemented in May. • Trauma pre-screen pilot is underway. Five counties are participating. Results and policy development to be fully prepared spring 2017. (11/14/16)
47.	DHS should, as part of a redesign review, engage an outside expert to work with the agency, counties, tribes and stakeholders to advise, develop and implement Minnesota’s child protection response continuum. This evaluation should consider when and how pathway decisions should be made and whether	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Funding) <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- would require an RFP, linked to recommendation #48)	<ul style="list-style-type: none"> • Category: Child Protection Practice DHS: Link to #48 attempt for 2017 Legislative	DHS Implementation Workgroup	<ul style="list-style-type: none"> • Would require an RFP • Would require funding

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	<p>Minnesota should move to a single child protection response, albeit one with different branches and approaches depending upon how to best meet the interests of child safety and welfare. Part of this review should consider the impact of any changes which result from the work of this Task Force.</p>	<input type="checkbox"/> Ease of Implementation			
<p>48.</p>	<p>DHS shall convene a workgroup for further analysis and definition of threats to child safety and risk of maltreatment as the foundation for development of a comprehensive long-term child protective services response continuum. This continuum must be designed for appropriate response alignment based on child safety and risk and may include multiple pathways, depending upon the best interests of the child. This response continuum design should be completed by January 1, 2017. The workgroup shall minimally include the representation from the following agencies/disciplines:</p> <ul style="list-style-type: none"> • Minnesota DHS • Administrative and frontline County/Tribal Child Welfare Agency staff • Law Enforcement • County Attorney • Court • Defense Attorney 	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- link to Recommendation #47) <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> • Category: Child Protection Practice <p>Link to #47</p>	<p>DHS Implementation Workgroup</p>	<ul style="list-style-type: none"> • Connected to #47

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	<ul style="list-style-type: none"> • Guardian Ad Litem • Pediatrician • Child Development • Mental Health • Parent(s) • Child Welfare Focused Academic Institution • Child Safety/Risk Subject Matter Experts. 				
49.	<p>Coordinate services and financing across the system in the fields of mental health, chemical dependency, housing and other related areas within the State of Minnesota-Department of Human Services for children and families who need child protection case management services so as to prioritize services for interventions that would increase safety and reduce risk of future harm. This would promote more holistic and effective responses for children and families who have experienced trauma, abuse, neglect and/or other egregious harm to reduce recidivism into the child protection system</p>	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Funding) <input type="checkbox"/> Technology/Infrastructure (Infrastructure- Disparities Grant rollout and evaluation results) <input type="checkbox"/> Ease of Implementation	<p>Category: Child Protection Resource/Funding</p> <p>DHS- IV-E reform</p>	DHS	<ul style="list-style-type: none"> • Requires additional resources for CSP • Disparities Grant and Evaluation • Fiscal Note • Categorize- manageability • Technology • Evaluation & Research • Capacity •
50.	<p>Make referrals for clinical, mental health and functional assessments on children, along with their families, who receive child protective case management services, who have trauma or mental health needs identified during screening. These assessments should be conducted by</p>	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- Trauma pre-screen pilot. Linked to Recommendation #46)	<p>Link to #46</p>	DHS	<ul style="list-style-type: none"> • Tied to trauma pre-screen (Rec # 46) • Requires closer, ongoing collaboration with CMH Division • Ambit work to train clinicians

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	<p>experts in the field. For example, if significant trauma to a child has occurred, a clinical trauma assessment with a qualified mental health professional should be required.</p> <p>For this recommendation to be effectively implemented, resources must be allocated to counties and community providers to improve the social and emotional well-being of children to heal from trauma, as well as reducing physical harm.</p>	<input type="checkbox"/> Ease of Implementation			
51.	<p>DHS should adopt a plan to monitor the provision of services and outcomes to assure that children and families receive appropriate, effective and needed services. This plan should include a periodic functional assessment of a child’s well-being while in the child protection system and evaluate whether such services actually improved and benefitted children and their families.</p>	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input type="checkbox"/> Technology/Infrastructure <input checked="" type="checkbox"/> Ease of Implementation (Easy)		DHS	<ul style="list-style-type: none"> MnCF SR includes some components Family Strengths & Needs Assessment – every 6 months; MH Screens and Physical Health screens
52.	<p>DHS should model and provide leadership to reduce disparities by making progress with key staff and leaders within DHS to become more racially conscious and culturally competent in the delivery of child welfare services. DHS must be seen as an effective leader in this effort to ensure that policies and practices are assessed to enable decision making and oversight that does not perpetuate more racial, ethnic, and socioeconomic disparities.</p>	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2013) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<p>DHS- ERG’s (Employee Resource Group) with Dr. David Everett (Diversity and Inclusion Consultant)</p>	DHS Cultural and Ethnic Communities Leadership Council	<ul style="list-style-type: none"> 2013 legislation established the Cultural and Ethnic Communities Leadership Council whose purpose is to advise the commissioner on reducing disparities that affect racial and ethnic groups.
53.	<p>Support the development of “cultural navigator” and parent mentor positions to act as liaisons with racial and ethnic communities, using a community health worker model. Ideally, this person would be from the same culture as the family being engaged and graduate from a rigorous training program with a certification, to</p>	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> 	DHS	<ul style="list-style-type: none"> Disparity grants

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	<p>ensure an understanding of the child welfare system. The role of this position would be to:</p> <ul style="list-style-type: none"> • Help parents and the child welfare/child protection worker communicate more effectively. • Help parents understand, navigate and ultimately meet the requirements of the child protection and court system. • Facilitate connecting families with culturally relevant services. 				
54.	DHS should identify and link previous and current disparities work to future intervention strategies aimed at racial equity and disparity reduction.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	•	DHS	<ul style="list-style-type: none"> • In process. Division staff designated for American Indian disparities work. Equity pilot.
55.	Develop a certification program that would prepare students and current workers and supervisors to work in specific cultures through field placements/internships.	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- DHS CW Training system, collaboration with U of MN/CASW) <input type="checkbox"/> Ease of Implementation	Category: Workforce Development DHS CW Training, U of MN/CASW	DHS U of MN/CASW	<ul style="list-style-type: none"> • Partially outside of DHS scope – universities and colleges • Field placements/internships outside of DHS scope • Certification program for all new workers through proposed Training Academy that could consider ties to specific competencies.
56.	Promote and improve the representation of racial and ethnic communities’ among child protection and child welfare ranks using recommendation #55.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Funding) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	Category: Workforce Development U of MN/CASW- longer term work/funding.	U of MN/CASW Legislator	<ul style="list-style-type: none"> • Deliverables in IV-E scholars contract with universities/colleges • Recruit, train and maintain Native American Social Workers especially in high Native American population communities • Supervisory training-recruitment and retention at all levels • Train and active recruitment. • IV-E does not capture the majority of our workforce. • Ongoing training • Who can we partner with?

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					<ul style="list-style-type: none"> • What are the institutional barriers? (i.e. having “buzz words”) • Merit system • Workforce shortage in some parts of the State. • Retention- how to retain & promote/advance. • Initial application, screening criteria- how do they impact ability to recruit and hire? • What are other State’s doing?
57.	Develop culturally supportive services that assist children in transitioning home following an out of home placement as a means to prevent foster care re-entry. With additional funding, request for proposals (RFP’s) could be submitted in support of this service.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation		DHS	<ul style="list-style-type: none"> • Disparity grants (parent mentors is part of service array) • Results of disparity grant evaluation may result in identification of practices, services etc. to expand. • Initiative Tribes
58.	DHS should include representation from the African American community, tribal representation and other underrepresented groups in the development of policy guidance, and best practice strategies and protocols.	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- workgroup make up, and ongoing communication with tribes) <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> • Diverse representation on workgroups/committees 	DHS	<ul style="list-style-type: none"> • Ongoing
59.	DHS should to provide clear policy and practice guidance about the need to include a tribal representative as part of a multi-disciplinary team whenever a case of a tribal child is reviewed.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> • Screening Guidelines – pg. 23 • Best practices in assessment & investigation document 	Screening Workgroup	<ul style="list-style-type: none"> •
60.	Expand Initiative Tribes. This will: <ul style="list-style-type: none"> • Support tribes in their ability to provide the types of child welfare services they know to be culturally meaningful and effective with their children and families. 	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2016: Planning Grant 2017: Initiative funds for Red Lake and Mille Lacs) <input type="checkbox"/> Technology/Infrastructure	<ul style="list-style-type: none"> • 2016 Legislative Session Planning Grant • 2017 Legislative Session Initiative funds for Red Lake and Mille Lacs 	DHS Legislator	<ul style="list-style-type: none"> • Proposed legislation n 2016 – pending • Planning underway with Red Lake Nation and Mille Lacs Band of Ojibwe (11/14/16)

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	<ul style="list-style-type: none"> • Improve county and tribal government relationships and establish methods to measure success in this area. • Improve child safety, permanency, and well-being outcomes for American Indian children served by these programs. ¹ • Recognize and actively support the sovereignty of Tribal Governments. 	<input type="checkbox"/> Ease of Implementation			
61.	<p>The state should directly fund more front-end services, including prevention and early intervention that have the capacity to promote safety, reduce risk and promote healing from abuse and neglect. This may include the direct funding of services for families involved in the child protection system and allow DHS to work creatively with providers to support the service array. This allows for more proactive service delivery by providing services to families before concerns reach higher risk warranting involuntary services and to also reduce re-occurrence into the child protection system.</p>	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Funding) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	DHS- IV-E Reform and 2017 legislative funding	DHS Legislator	<ul style="list-style-type: none"> • Pending legislation to expand PSOP • Pending legislation to expand child care allocation
62.	<p>Increase monitoring and evaluation:</p> <ul style="list-style-type: none"> • Monitor and report disparities, as well as outcomes for African American and American Indian children and families, using the Social Services Information System and review indicators • Identify areas of underrepresentation and pilot methods to promote access for those populations who are not yet visible to the system 	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2015) <input checked="" type="checkbox"/> Technology/Infrastructure (Technology- Tableau) <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> • Disparities grant • Tableau 	DHS	<ul style="list-style-type: none"> • Equity pilot project planning underway (AI families) • Development of ICWA compliance in process • 2010 disparities report updated

¹The American Indian Child Welfare Initiative is a collaboration between tribal, county and state governments with the shared goal of improving the child welfare outcomes for American Indian children, and reducing the disproportionate number of American Indian children in the state’s child welfare system. Data reveals promising results. Tribal programs exceed statewide performance on federal child welfare outcomes measures in areas such as relative care and placement stability. Programs participate in the Minnesota Children and Family Service Reviews, federal Title IV-E audits and fiscal audits conducted by the department.

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	<ul style="list-style-type: none"> • Work with the Human Services Performance Council to further develop new data reporting, gathering, and analysis methods, instruments and procedures to track county performance measures and accountability as it relates to demographic indicators for children. This information should be used to increase action steps to improve child welfare • Dedicate a section of future annual child welfare report to racial equity in which specific measures are followed through a lens of race and ethnicity • Use information and apply the outcomes to increase action steps to improve child welfare • Develop and use an external advisory committee including stakeholders and service recipients to assist in monitoring and evaluating outcomes. 				
63.	<p>Research, identify, develop curriculum and train on culturally affirming approaches and practices that work with African American and American Indian families, the two populations overrepresented in the child protection system. Also, trainings should include cultural and racial self-awareness, professional ethics, the difference between equal access and equity, and culturally appropriate ways to delivery services and work with families. Training should be provided to child welfare professionals and supervisors as well as other system stakeholders.</p>	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2017) <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- Child Welfare Training System) <input type="checkbox"/> Ease of Implementation	<ul style="list-style-type: none"> • Trainings currently available through Child Welfare Training System; will be integrated into new academy model. 	Professional Development Workgroup	<ul style="list-style-type: none"> • Ongoing
64.	<p>Identify services that can be replicated and scaled up and fund them with dollars to operate. These services should be evaluated and research used</p>	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action	<ul style="list-style-type: none"> • 	DHS	<ul style="list-style-type: none"> • Evaluation of disparity grants •

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	to build promising practices in order to provide a research base for interventions that are responsive to racial and cultural communities.	<input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- Disparities Grant evaluation outcomes) <input type="checkbox"/> Ease of Implementation			
65.	Enhance the Minnesota Child Welfare Training System: A. DHS should develop a Workforce Training and Oversight Advisory Group (comprised of state, county, tribal, communities of color and academic representatives) to advise DHS Child Welfare Training System to: <ol style="list-style-type: none"> 1) Develop, review and/or revise competencies for child protection workers and supervisors, 2) Identify workforce training needs and gaps, and 3) Consider development of a tiered child protection pre-service training program which would include: <ol style="list-style-type: none"> a) Online orientation training that child protection workers would be required to complete prior to case assignment. b) Tier I: Deliver basic theoretical and philosophical foundations upon which to build child protection specific knowledge and skills. This would be required for all newly hired workers without social work degrees. 	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2017) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	2017 Legislative Funding 1) Completed 2) Workgroup developed framework that includes tiered delivery system. 3) Estimated 18-24 months for implementation. Will take legislation and funding	Professional Development Workgroup	<ul style="list-style-type: none"> • Professional Development Workgroup ended in March • Legislation required – plan to do 2017 legislative proposal to address A.4) and C.

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	<p>c) Tier II: Deliver child protection specific knowledge and skills. This would be required for workers who complete Tier I and those hired with social work degrees.</p> <p>4) Implement a Child Protection Training Academy that will include scenario-based training for child protection staff, supervisors, and managers. This training would replace the current Child Welfare Foundation Training currently required for new child protection workers. DHS should explore various modalities for delivering training, including online or Web-based training, to make training more accessible. The Academy should address the following topic areas:</p> <ul style="list-style-type: none"> a) Intake b) Screening c) Differential Response d) Traditional Response e) Trauma-informed care f) Culture and biases g) Injury identification h) SSIS case documentation i) Minnesota rules and statutes. <p>B. DHS should develop a certification process that includes completion of the training(s), structured on-the-job training</p>		<p>B. Certification process outlined in framework structure</p> <ul style="list-style-type: none"> • Working on potential statutory language for supervisors 		
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	<p>activities, successful demonstration of applicable competencies and verification from the staff/supervisor’s employment agency of completion of prescribed training and activities.</p> <p>C. Require all new child protection workers, supervisors and managers with child protection supervisory responsibilities to complete the training(s) and certification(s) specific to their job duties and responsibilities prior to or within 180 days of employment and as a condition of employment.</p>				
66.	Establish requirements for competency-based initial training and continuing education for new and existing child protection supervisors.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2017) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation		Professional Development Workgroup	<ul style="list-style-type: none"> • Outlined by Professional Development Work group. Will mirror competencies for CP workers.
67.	DHS should continue to support the IV-E educational programs available through Minnesota colleges and universities.	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input type="checkbox"/> Technology/Infrastructure (Infrastructure- IV-E Scholars contract) <input type="checkbox"/> Ease of Implementation		DHS	<ul style="list-style-type: none"> • Ongoing through IV-E Scholars contract
68.	Expand the existing student loan forgiveness program in Minnesota to include Social Work graduates who are employed as child protection/child welfare social workers. The program will reduce debt encumbered while earning a social work degree in exchange for a social worker taking a child protection position for a minimum of two years post-graduation. A goal of the program should be that agencies are able to recruit and hire social workers with diverse backgrounds that match the population being served.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Funding) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	<p>Category: Workforce Development</p> <p>Legislators or University Systems</p>	Legislators and/or University Systems	<ul style="list-style-type: none"> • Loan forgiveness beyond social work- other fields • Merit system • Fiscal note • Partners-university • Wage increase • Purpose? Workforce shortage- new/learning • What models support diverse workforce • Barriers- scrutiny licensing, workload, \$

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69.	Require local agencies, with the support of DHS, to develop and submit a comprehensive Secondary Traumatic Stress (STS) support plan which will support the workforce in the identification and treatment of STS.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2017) <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- Professional Development Recommendations and CASCW framework) <input type="checkbox"/> Ease of Implementation	2017 Legislative funding	Professional Development Workgroup DHS CASCW	<ul style="list-style-type: none"> Discussed by Professional Development Work group. CASCW pulling together a research-based framework Would take legislative action for “require” Training Academy
70.	Require license mandated reporters to submit evidence of completion of mandated reporter training as a requirement for licensure/re-licensure, and develop a certificate of completion that can be printed upon completion of DHS online mandated reporter training.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	Category: Mandated Reporters/Community Stakeholders Legislator and/or Licensing Boards. DHS can generate a certificate process.	Legislator and/or Licensing Boards	<ul style="list-style-type: none"> Licensing boards/legislation Current online training being revised by DHS, certificate won’t be possible Helps with screening decision Non-licensed mandated reporters Statute/legislation Fiscal note
71.	DHS should develop a variety of Web-based trainings for mandated reporters on multiple topic areas that expand beyond the specific responsibilities for reporting suspected child maltreatment, e.g. culture and bias.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Funding) <input checked="" type="checkbox"/> Technology/Infrastructure (Technology- compatibility due to accessibility standards) <input type="checkbox"/> Ease of Implementation	Category: Mandated Reporters/Community Stakeholders Legislator for DHS funding	Legislators DHS	<ul style="list-style-type: none"> No funds to do this DHS accessibility standards create significant barriers Technology Stakeholder (impacted) IV-E impact- not reimbursable Exploitation-Federal changes- county response- impact to stakeholders
72.	Require child protection staff, supervisors and managers to participate annually in advanced training developed by DHS in collaboration with the workforce training and oversight advisory group as a condition of continued employment.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Funding) <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- Child Welfare Training System/Academy) <input type="checkbox"/> Ease of Implementation		Professional Development Workgroup	<ul style="list-style-type: none"> Strengthen statutory language Proposal to include new Learning Management System for Child Welfare Training System/Academy
73.	DHS should, in collaboration with the workforce training and oversight advisory group,	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action		DHS	<ul style="list-style-type: none"> In process through collaboration between Children’s Justice Act (CJA)

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	Department of Public Safety, the Department of Health and the Minnesota County Attorney’s Association, develop curriculum that fosters a multi-disciplinary approach to responding to reports of child maltreatment. This training should be offered, minimally, on an annual basis to county/tribal child protection staff, law enforcement, medical professionals and county attorneys. DHS is encouraged to use the formerly provided TEAM Conference as a model for development.	<input type="checkbox"/> Technology/Infrastructure <input checked="" type="checkbox"/> Ease of Implementation (Easy)			Advisory Team and Child Welfare Training System <ul style="list-style-type: none"> • Goal is for TEAM like conference in November.
74.	DHS should explore the fiscal implications of making Child Welfare Training System trainings available to stakeholders and community members.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Funding) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	Category: Mandated Reporters/Community Stakeholders Legislator for DHS funding	Legislator	<ul style="list-style-type: none"> • IV-E impact- not reimbursable – must be State funds
75.	DHS, in consultation with the Minnesota Department of Health, should redesign the current child mortality review process to include two separate processes, one specifically for reviewing child fatalities and near fatalities due to maltreatment and/or suspected maltreatment; the other to review fatalities and near fatalities not due to maltreatment. <p>a) Public Health Review Model:</p> <ul style="list-style-type: none"> ○ Purpose: Review child fatalities and near fatalities related to accidents, suicides, SIDS, natural causes, and other fatalities and near fatalities not related to maltreatment ○ Focus: Developing and issuing community-based prevention messages ○ Process: Utilize the process currently being used to review all 	<input checked="" type="checkbox"/> Deadline (7/1/2016) <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	a) Completed (current process) b) Will be implemented by 7/1/16	Fatality/Near-Fatality Workgroup	<ul style="list-style-type: none"> • Fatality/Near-Fatality Work group - concluded in March.

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	<p>child fatalities and near fatalities in Minnesota.</p> <p>b) Child Protection Mortality Reviews:</p> <ul style="list-style-type: none"> ○ Purpose: Review child fatalities and near fatalities due to child maltreatment, and those that occur in licensed facilities that are not due to natural causes ○ Focus: Critical examination of the elements of the case and the agency’s involvement with the child and child’s family. Review would also attend to the secondary-trauma involved with the worker, supervisor and agency. ○ Process: Develop a new process in which DHS mortality review staff lead and conduct the on-site local mortality review, and utilize child protection supervisors from other counties as peer reviewers in the process. The reviews would include developing a program improvement plan to address any practice issues identified through the review, and define technical assistance needs of the respective county. <p>This would include developing a process for Mortality Reviews of Deaths and Near Death Reports by a multi-disciplinary committee inclusive of representation of MN DHS, local county/tribal child welfare agencies, county attorneys, physicians, and other child welfare</p>		<p>Will be covered by state mortality review panel.</p>		
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	<p>stakeholders. The review process should expand the information currently provided to the public to include:</p> <ul style="list-style-type: none"> a) The cause and circumstances regarding the child fatality or near fatality; b) The age and gender of the child; c) Information describing any previous reports of child abuse or neglect, whether screened in or not, that are pertinent to the abuse or neglect that led to the child fatality or near fatality; d) DHS should explore the Child Abuse and Prevention Act requirements for the possible inclusion of any previous reports involving all children in the household as public information; e) Information describing any previous investigations/assessments pertinent to the abuse or neglect that led to the child fatality or near fatality; f) The result of any such investigations/assessments; g) The services provided by the local child welfare agency and actions of the local child welfare agency on behalf of the child that are pertinent to the child abuse or neglect that led to the child fatality or near fatality; h) The review should look at the entire system from the point of the mandated reporter making a report through the case court process. 				
76.	<p>DHS should continue with Minnesota Child and Family Service Reviews (MnCFSRs) in counties and tribes, and increase the frequency of reviews in counties with small populations of children.</p>	<p><input type="checkbox"/>Deadline <input checked="" type="checkbox"/>Legislative Action (Funding) <input type="checkbox"/>Technology/Infrastructure</p>		<p>Legislator DHS</p>	<ul style="list-style-type: none"> • Would require additional staff resources

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		<input type="checkbox"/> Ease of Implementation			
77.	DHS should identify outcome measures for child safety and child well-being. This data should be used to determine the effectiveness of interventions and system improvements.	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Infrastructure- Performance Withhold measures, Human Services Performance Measures, Federal data indicators) <input type="checkbox"/> Ease of Implementation		DHS	<ul style="list-style-type: none"> • Child & Family Service Review (CFSR) Safety, Permanency & Well-being Outcomes • Federal data indicators • Child Welfare Data Dashboard measures • Performance withhold measures • Human Service Performance Council measures
78.	Address workload/caseload size issues: a) Short-term: Establish workload standards for child protection workers and supervisors as follows: <ul style="list-style-type: none"> ○ No more than 10 child protection case management cases per worker ○ Newly hired child protection workers will carry no more than three quarters of a caseload and will not carry high-risk cases until certification through the Child Protection Training Academy ○ Establish a supervisor-worker ratio of 1:8. b) Long-term: DHS, in collaboration with the Workforce Training and Oversight Advisory Group, should: <ul style="list-style-type: none"> ○ Review methodologies for establishing caseload/workload standards that considers weighting of cases based on factors such as type of case, case complexity, out-of-home placement, court involvement, etc. Following review, DHS 	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2017) <input type="checkbox"/> Technology/Infrastructure <input checked="" type="checkbox"/> Ease of Implementation (Difficult-funding needs and geographical diversity of MN)	Category: Child Protection Workload/Caseload DHS & MACSSA- 2017 Legislative Session	DHS and MACSSA	<ul style="list-style-type: none"> • Prepare data and fiscal note for 2017 legislative proposal. • County survey. • What to do regarding b), c) and d)

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	<p>recommends implementing caseload/workload standards.</p> <ul style="list-style-type: none"> ○ Review and make recommendations for establishing an optimal supervisor to staff ratio. c) Enhance the workload analytic tool to make it user-friendly for local agencies and provide training on the use of the tool. d) Make enhancements to SSIS that allow for the gathering and review of caseload and workforce information that minimally allow for examination of caseload sizes, identification of education backgrounds of child protection staff and supervisors, and monitoring of completion of required training. 				
79.	<p>DHS should continue to conduct the statewide review of screened-out reports which started in the fall of 2014. DHS should have the authority to require a child protection response from the local agency based on the screening review. Summary results of reviews should be public information and produced on an annual basis by DHS. Legislative oversight following publication of these reports is encouraged.</p>	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Statutory authority language review in process) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation		DHS	<ul style="list-style-type: none"> • QA staff hired; continuing/expanding reviews • Legal review being requested to determine DHS authority • Summary results – possibly include in Annual CW Report
80.	<p>Change and expand the role of the Minnesota Office of Ombudsperson for Families by:</p> <ul style="list-style-type: none"> a) Renaming to “Minnesota Office of Ombudsperson for Children and Families”; b) Expand scope to include all Minnesota children and families (257.0762, Subd. 1); c) Include a specific reference to M.S. 626.556, Reporting of Maltreatment of 	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	Category: CP Legislative Task Force	CP Legislative Task Force	<ul style="list-style-type: none"> • Legislative Task Force

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	<p>Minors Act, to the statutorily defined duties of the Ombudsperson office (257.0762, Subd. 1);</p> <p>d) Require courts and social services to distribute information regarding the Minnesota Office of Ombudsperson for Children and Families in the following situations:</p> <ul style="list-style-type: none"> o In the early stages of a child protection investigation or assessment (social service), and o When a Child in Need of Protection or Services (CHIPS) petition is filed (courts). <p>e) Convene a committee/workgroup specifically for the purpose of exploring the expansion and placement of the Minnesota Office of Ombudsperson for Children and Families’ role in oversight of child protection activities.</p>				
81.	<p>Update the SSIS system so that data and reporting is accurate and trustworthy, and that the opportunities for effective case management and the efficient use of human resources are greatly improved.</p>	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Funding) <input checked="" type="checkbox"/> Technology/Infrastructure (Technology- would require a comprehensive review of SSIS) <input type="checkbox"/> Ease of Implementation		DHS	<ul style="list-style-type: none"> • Request funding to complete comprehensive review of SSIS
82.	<p>DHS should develop/enhance the “Child Welfare Data Dashboard” to provide counties and the public with quarterly performance updates focused on key child safety, permanency and well-being measures. These measures should parallel the measures identified from the Human Services Performance Council. DHS should also publish quarterly scorecards for local county and</p>	<input type="checkbox"/> Deadline <input type="checkbox"/> Legislative Action <input checked="" type="checkbox"/> Technology/Infrastructure (Technology- Tableau & SSIS) <input type="checkbox"/> Ease of Implementation	<p>Tableau</p> <p>Collaboration with Human Services Performance Council</p>	DHS	<ul style="list-style-type: none"> • Score card can potentially be implemented into CW Data Dashboard (includes quarterly trend) • Tableau server would allow drill-down; currently seeking funding

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	<p>tribal child welfare agencies by which the Department and the public can track progress and performance outcome improvements. The dashboard and scorecard should be designed in a manner that allows local child welfare agencies to drill down to client specific data.</p>				
<p>83.</p>	<p>DHS should restructure the statewide annual child welfare report to focus on meaningful outcome measurements that are directed to measure whether interventions are effective and whether the screening process at the front-end is effective. As part of the annual child welfare report, DHS shall include the Child and Family Service Reviews. The annual report is to be made public and should contain the following sections and information:</p> <p>a) “Transparency” section with county breakdown of the following performance measures. When issuing the Transparency section, DHS may aggregate the data from counties with populations less than 10,000. Individual county social service departments and county boards may obtain the numbers for their individual counties</p> <ol style="list-style-type: none"> i. number of intake calls received ii. number of reports screened out iii. number of child protection responses conducted and type of response pathway iv. number of reports that resulted in a determination of substantiated child maltreatment v. number of reports that resulted in a determination that child protective services were needed 	<p><input type="checkbox"/>Deadline <input type="checkbox"/>Legislative Action <input checked="" type="checkbox"/>Technology/Infrastructure (Technology- Tableau, requires changes to SSIS) <input type="checkbox"/>Ease of Implementation</p>	<p>DHS- In process</p>	<p>DHS</p>	<ul style="list-style-type: none"> • Revamping Annual CW Report – focusing on what’s legislatively required; Referring to CW Data Dashboard • Some of these components can be added to Dashboard. • b) is not possible • Requires changes to SSIS • “Minnesota’s Child Maltreatment Report 2015” was provided to the Legislature on 11/1/16. In process of publication and posting on DHS public website. The second report (regarding children in out-of-home care and adoptions) is due to be released soon. A newly revised version of the Child Welfare Data Dashboard will be posted to the web before the end of the month, and includes both federal and state child welfare measures. (11/14/16)

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	<ul style="list-style-type: none"> vi. percentage of children seen within required timelines for both response pathways vii. percentage of children who return home within 12 months of removal viii. number of children who were exposed prenatally to chemical or alcohol use as measured by a child who tested positive for alcohol or any chemical that is not prescribed to the mother or any mother who tests positive any time during the pregnancy or delivery for alcohol or a chemical not prescribed to her. ix. percentage of children who experience repeat abuse/neglect <ul style="list-style-type: none"> o within 6 months of a maltreatment finding or Differential Response o within 12 months of a maltreatment finding or Differential Response x. percentage of children in the aggregate and by age who exit foster care and re-enter foster care within 12 months. The data should be further broken down to show what percent of children are corrections related and what percentage of children are child protective services related xi. child protection worker caseload numbers and turnover rates (including supervisor and line-staff numbers) 				
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	<ul style="list-style-type: none"> xii. number/percentage of cases that are reopened after being closed xiii. number of cases of sexual abuse that were assigned the differential response track with a breakdown per county and identification of the role of the alleged offender, e.g. parent, foster parent, daycare, etc... xiv. number of cases of sexual abuse that switched tracks from Traditional Response to Differential Response with a breakdown per county and identification of the role of the alleged offender (e.g. parent, foster parent, daycare, etc.) xv. identify federal measures and standards that DHS is not meeting xvi. number of traditional response and differential response cases closing at “high risk” with no services or court involvement broken down per county. <p>b) Number of children and/families with three or more reports within the past five years that were screened out with the following details:</p> <ul style="list-style-type: none"> o Nature of allegations o Age of the child subject o Role of person making the report o Screening decision and justification o Break out number of prior reports. 				
84.	DHS should, by January 2016, provide a report to the Legislature that describes:	<input checked="" type="checkbox"/> Deadline (1/2016) <input type="checkbox"/> Legislative Action		DHS	

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	<ul style="list-style-type: none"> Progress on implementation of Task Force recommendations The key drivers that result in children/families entering the system. Plans for longer term child welfare reforms, including those recommended by the Task Force. 	<input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation			
85.	DHS should develop a public website for the purpose of posting information on child fatalities that is classified as public by the Child Abuse, Prevention and Treatment Act (CAPTA).	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Statutory review) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	Under legal review	DHS	<ul style="list-style-type: none"> Addressed by Child Fatality/Near-fatality WG
86.	Use of the following criteria by the Legislature when considering additional resources: <ul style="list-style-type: none"> Target funds to children and families in the child protection system while supporting state-wide consistency in provision of services Make available a full array of intervention services to support the needs of children and their families Address gaps related to disparities and use information generated to create practice change, scale-up promising practices, and inform future investments Support a family strengths-based approach and access to other services; accelerating access to these other services for children in child protection. Direct funding and fiscal incentives toward outcomes at child level Support technology for better data reporting, sharing, transparency, and outcome monitoring 	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Funding) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	Category: Child Protection Resource/Funding Legislature	Legislature	<ul style="list-style-type: none"> Disparities Grant and Evaluation Fiscal Note Categorize- manageability Technology Evaluation & Research Capacity

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	<ul style="list-style-type: none"> • Improve balance among federal, state and local shares • Support innovation, particularly regarding addressing disparities and disproportionality in the child welfare system • No supplantation of existing resources with the addition of new resources. • Reward effective child protection practices and services. 				
87.	Increase funding for county staffing to carry out additional case work responsibilities (e.g., county child protection workers, county child protection supervisors and county child protection case aides.)	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2017) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	Category: Child Protection Workload/Caseload DHS & MACSSA- 2017 Legislative Session	DHS & MACSSA	<ul style="list-style-type: none"> • Connected to #78 • Define case management-assessment/investigation/ongoing • Current ratio’s- info needed-what do we need • Fiscal note
88.	Provide additional funding for additional intervention services necessary to support children and families as a result of changes in screening, assessment, etc. that address needs of children and families earlier in the process of a child protection response to prevent recidivism into the child protection system.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2017) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	Category: Child Protection Resource/Funding DHS 2017 Legislative Session funding request	DHS	<ul style="list-style-type: none"> • Disparities Grant and Evaluation • Fiscal Note • Categorize- manageability • Technology • Evaluation & Research • Capacity
89.	Provide additional funding for accelerated access to services including but not limited to: <ul style="list-style-type: none"> • Child care, • Head Start/Early Head Start • Home visiting for children • Transitional housing and shelter, and • Psychiatric/mental health services. The goal is to remove children in the child protection system from waiting lists in these programs.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2017) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation	Category: Child Protection Resource/Funding DHS 2017 Legislative Session funding request	DHS	<ul style="list-style-type: none"> • Disparities Grant and Evaluation • Fiscal Note • Categorize- manageability • Technology • Evaluation & Research • Capacity

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90.	Allocate competitive grants to identify, develop, adapt and scale-up culturally affirming promising practices (e.g., mental health services, mentoring, etc.) or programs that address disparities and disproportionality in the child welfare system. Dollars should be allocated to evaluate results and apply learning to transform the child protection system to be more effective. Funding preference should be given to non-profit and grass-root community organizations that are led by or already serve communities of color, ethnic and tribal communities and low income communities.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation		DHS	<ul style="list-style-type: none"> Disparity grants
91.	Increase funding for state oversight, including monitoring, training, child fatality reviews, grant management, quality assurance, etc.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Funding) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation		Legislature	<ul style="list-style-type: none">
92.	Increase funding for intake and screening tools to promote more robust data gathering during the intake and screening process.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (Funding) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation		Legislature	<ul style="list-style-type: none">
93.	DHS should, absent sufficient funding, prioritize all recommendations to develop a multi-year implementation plan.	<input type="checkbox"/> Deadline <input checked="" type="checkbox"/> Legislative Action (2015) <input type="checkbox"/> Technology/Infrastructure <input type="checkbox"/> Ease of Implementation		DHS	