

February, 2024

DCF statement in response to a child fatality on June 28, 2023

In the aftermath of the June 28, 2023 passing of a 10-month-old, DCF commenced an internal Continuous Quality Improvement (CQI) review of this family's case as the Department had ended its involvement with the family on June 8, 2023.

The purpose of the CQI process is to review and evaluate the Department's work leading up to the incident and identify areas where there are opportunities for case practice and/or systems improvements. As a proud member of the National Partnership for Child Safety (NPCS), DCF employs this framework and these processes to understand the inherently complex nature of the work and the factors that influence decision-making during cases where a fatality or near fatality has occurred. It also provides a safe and supportive environment for our social work staff to process, share information and learn from critical incidents to prevent additional tragedies. This framework is foundational to our ABCD Child Safety Practice Model and Safe and Sound culture established for our employees.

Continuous Quality Improvement remains a tenet of the Department's core values, as evidenced by the March 2022 court decision to end the Juan F. Consent Decree, and remove that aspect of federal oversight of the Department's practice. CTDCF worked closely with the Court Monitor's Office for over 30 years to ensure that an effective CQI infrastructure was developed to identify, analyze, and refine practice to improve outcomes for children and families. Since the termination of federal oversight under the Consent Decree, and in keeping with a commitment to excellence in child welfare practice, the Department contracted with Chapin Hall, an independent policy center at the University of Chicago, to complete a comprehensive overview of the Bureau of Strategic Planning and its functions to build upon the existing performance management system and propose recommendations to create a holistic CQI Practice Model. As previously noted, this engagement began in January of 2023.

As a result of our CQI reviews and processes, including the review in this case, we have identified system improvement opportunities as well as areas of best practice that have continued to be addressed and reinforced over the past six months. Those areas of best practice include, but are not limited to, the use of a strength-based approach to our work, supervisory support and oversight, fentanyl triage meetings, Structured Decision Making (SDM) safety assessments, multidisciplinary consultation teams, engaging with providers, and onboarding and training of new staff, including shadowing opportunities, to assist in retaining a qualified workforce and reduce turnover.

More specifically, the Department remains focused on the following practice and systemic areas for continuous improvement:

1. Assessing child safety in families where substance misuse and particularly fentanyl is present
 - We have trained all social work staff on how to administer the UNCOPE screening tool to determine the impact of substance use on child safety and well-being and to assess parental functioning to meet the needs of their children. The UNCOPE is comprised of six questions and provides a quick and simple way of identifying risk for substance use

concerns when not already clearly identified as a problem. The tool can be used to screen for alcohol and/or other drugs in adults.

- Staff have also been trained on the use of Motivational Interviewing, which is an evidence-based approach to engagement that can assist in gathering additional information to inform our assessments and improve service delivery.
- Full training occurred with all area office social work, legal and administrative staff on the topic "**Enhanced Safety Guidance for Cases Involving Fentanyl and Substance Use**". This training covered the final fentanyl protocol, the agency's substance use practice guide, screening and testing and a refresher on substance use and misuse in general.
- Work will continue with thought partners and subject matter experts, including the Alcohol and Drug Policy Council, the Department of Mental Health and Addiction Services, the federal Substance Abuse and Mental Health Services Administration, to develop best practice in child protection when parental/caregiver substance use is present.
- Educational literature and brochures were distributed to each of the offices labeled "keeping you safe and your families safe". This was education on Fentanyl and resources to support our staff and our families in prevention and treatment.
- The Department is also initiating training for our staff on Naloxone and distributing this to all DCF offices along with reviewing and updating policy and procedures related to its use.

2. Accessing/Enhancing Fentanyl testing

- Partnerships will continue with the adult substance use community to address challenges with and developments related to Fentanyl testing.
- The state has received technical assistance from the Opioid Response Network regarding this issue, including training on the Role of Substance Use Disorders & Management in the Family Unit.
- Providers now have an FDA CLIA waived rapid screening test for Fentanyl. The goal is to have all providers begin using this in February.
- Family Based Recovery (FBR) is now testing for Fentanyl. The Department will continue to review the protocols, expectations and best practices regarding testing and revise/update FBR and other provider contracts as needed.

3. Including all providers in teaming

- DCF will continue to engage with non-contracted programs such as Methadone Programs and Probation to include them in the DCF teaming process and in meetings with other providers involved with the family. This will ensure all entities involved with a family have coordinated communication and sharing of information.
- DCF and JB-CSSD have been meeting to discuss barriers to information sharing, many statutorily set, and determine ways to ensure better communication between agencies.

4. Addressing provider staff turnover

- Connecticut continues to experience a workforce shortage and the Department will continue to strategize with the provider community to develop solutions. Challenges existed with staffing in the FBR provider network, and turnover occurred specifically with members of the FBR team working with this family leaving those directly involved newer to their roles.

5. Engaging Fathers

- The Department has hired a Fatherhood Engagement Coordinator to establish best case practice standards regarding fatherhood engagement and to promote more comprehensive assessments of fathers as an integral component of case planning.

The Department acknowledges the OCA's observations regarding this case and our shared focus on continuous quality improvement for all agencies and partners who comprise the child welfare system. While the Department may have a different perspective on some of the OCA's findings and conclusions, we are reviewing the recommendations and remain committed to collaborating with the OCA, our sister agencies and other system partners to support and improve the safety and well-being of the children and families we collectively serve.