

**ASSESSMENT OF CIRCUIT 6 FRONT-END SYSTEM:**

Designing new pathways to support families and build strong communities



MAY 2022

## ACKNOWLEDGEMENTS

BRITE Consulting Services extends our deepest appreciation to the Circuit 6 stakeholders who boldly stepped forward to share their expertise in ensuring the safety and well-being of children and families throughout their communities:

- Pasco County Sheriff's Office
- Pinellas County Sheriff's Office
- Gulf Coast Jewish Family and Community Services
- Lutheran Services Florida

The report assessment and recommendations would not have been possible without the ready willingness and transparency of leadership and staff to detail their relentless efforts to serve those most impacted by their communities most complex social problems.

Their desire to vision a brighter future for their communities is a testament to their selfless commitment to serve children and families and it is our hope we have accurately captured the hearts and minds of those we heard as they move forward in the re-design of Circuit 6's front-end child welfare system.

BRITE Consulting also appreciates the contributions of H. Lien Bragg, Principal + Managing Partner of **Sanctuary Seven**, for her thought partnership and expertise in child welfare and system re-designs.

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## INTRODUCTION

Keeping children safe, supporting families and creating healthy, thriving communities is a community responsibility. It is never the sole responsibility of one agency. Every parent, school, business, hospital, community center, and faith-based agency must step up and do their part.

Currently, child welfare systems allocate the majority of Federal and state funding *after* child maltreatment occurs and on maintenance payments to adoptive, foster and kin caregivers. In March 2022, *USA Today* reported Florida spending 10 times more funding on foster and adoptive parents than on prevention services designed to prevent removals of children from their families.<sup>1</sup> Once a child protective services (CPS) report is generated and a family touches the child welfare system, various complex factors in risk and safety decision making can result in unnecessary child removals and devastating long-term effects on children and families experiencing the trauma of family separation. Hence, a total shift is needed to support and strengthen families before they come to the attention of the child welfare system.

Child welfare workers tasked with making child safety decisions in the context of high caseloads, demanding timeframes and highly publicized child fatalities can present serious stressors in their ability to make reliable safety decisions. Despite the development of mandated safety-decision making tools to assess risk and safety, child safety decisions can be overridden and influenced by a child welfare worker's bias and personal experience.

Furthermore, communities and multiple social service systems have their own unique challenges. Although the collective aspiration of child welfare systems is to keep children safe at home and with their families is commendable, systems still struggle with the following questions: How do we support families as early as possible? How do we invest in and equip child welfare staff? What does a system look like that prioritizes families and creates healthy, thriving communities? And what haven't we asked that would make a difference?

Although it is not the sole responsibility of one agency to keep children safe and families together, when children in certain communities are removed at higher rates than others, we must stop to ask WHY? At some point, we have *to stop pulling children out of the river and find out why they're falling in*. Our collective goal must be

moving as far upstream as possible to immediately identify and adequately support families in the ways they need most. Prevention, preservation and diversion services must always be the first course of action before any government intervention occurs. Although it is not possible to keep

**“There comes a point where we need to stop just pulling people out of the river. We need to go upstream and find out why they're falling in.”**

**-Archbishop Desmond Tutu**

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<sup>1</sup> Hirt, Suzanne. “The problem is poverty, Florida removing more kids from families over alleged neglect.” *USA Today*, March 24<sup>th</sup>, 2022.

all children safe in any community, creating new pathways and prioritizing funding to support and strengthen families, invest in communities and reduce removals is not simply an idealistic goal but a possible reality.

## PROJECT SCOPE

In January 2022, Family Support Services (FSS) was appointed by the Florida Department of Children and Families (DCF) as the lead child welfare agency for Pasco and Pinellas counties (Circuit 6). In addition to serving as the lead child welfare agency for Duval and Nassau counties (Circuit 4), FSS is now responsible for ensuring a full continuum of services from community prevention to permanency for children in the child welfare system for Circuit 6.

Interestingly, Circuit 6 encompasses the highest child removal rates in the state, which greatly differs from Circuit 4 where both Duval and Nassau counties have historically low child removal rates. Noting this vast difference between Circuit 4 and Circuit 6 child removal rates, FSS requested BRITE Consulting Services to conduct an assessment of Circuit 6's front-end system of prevention, preservation and diversion services to:

- Gain a better understating of how the front-end system is designed and operates;
- Assess infrastructure and service array capacity that supports its front-end system; and
- Offer recommendations regarding strengths, challenges and opportunities to re-design a more robust front-end system.

In April and May 2022, assessment activities included:

- Meeting with agency leadership
  - Pasco County Sheriff's Office,
  - Gulf Coast Jewish Family and Community Services (GCJFCS),
  - Pinellas County Sheriff's Office, and
  - Lutheran Services Florida (LSF);
- Conducting focus groups with child protective investigators, preservation / diversion staff and therapists;
- Collecting and analyzing data; and
- Geo-mapping investigation and removal patterns.

**Given the two (2) month time frame, this assessment is limited in scope and depth.** It is recommended that a more in-depth assessment of Circuit 6's front-end system occur to further validate and expand any proposed course of action or recommendations that includes, but is not limited to:

- Reviewing a random sample of front-end cases to assess safety decision making protocols and practice;
- Observing staff during home visits and in the delivery of prevention and preservation services;
- Convening focus groups with parents / caregivers and services providers;
- Continuing to analyze child welfare data trends; and
- Establishing robust data collection methods to track prevention, family preservation and diversion outcomes.

Finally, the dynamics of culture, climate, and relationships are unique to every community and interrelated with child welfare systems. Assessing cultural and community dynamics was not part of this scope of work yet it is also highly recommended that this occur given the impact these dynamics have on child welfare outcomes.

## **DATA SNAPSHOT**

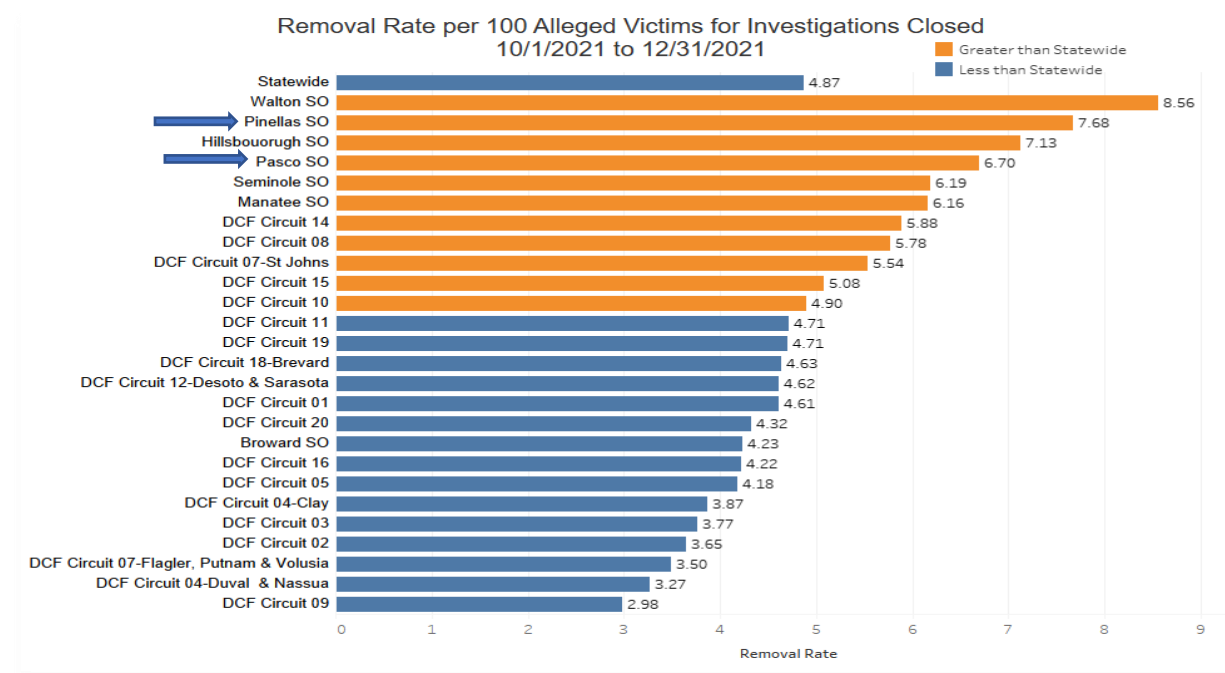
Currently, FSS serves as the lead child welfare agency in Circuit 4 (Duval and Nassau) and Circuit 6 (Pasco and Pinellas) whose different communities and systems of care are noticeable when examining the vast difference in child removal rates between both Circuits. To better understand what might be contributing to Circuit 6's high removal rates, a preliminary review of available data was conducted to hypothesize about possible causes or reasons for higher rates of child removals.

**NOTE:** This preliminary data review cannot make conclusions about direct or causal relationships due to the limitations in available data and the timeframe to conduct this assessment. Additionally, caution is warranted in assuming there is one causal variable as there are often numerous, interrelated factors that contribute to high removal rates.



Per the *DCF Key Indicator Report*, **Figure 1** represents the number of child removals per 100 alleged victims in Pasco and Pinellas counties indicating a higher rate of removal than the statewide rate of 4.87.

**Figure 1: Quarterly Stratification by Circuit and CBC Lead Agency**



A few key data variables were reviewed to possibly identify any major outliers, including the number of children determined to be in PRESENT DANGER and the number of children determined to be SAFE/UNSAFE by county (**Table 1**).

**Table 1: Number of Present Danger Investigations Completed & Safety Determinations in Calendar Year 2021**

County	Number of Completed Investigations	Number with Present Danger Identified	Percentage with Present Danger Identified	SAFE Children	UNSAFE Children
Nassau	514	70	14%	86.7%	13.3%
Duval	9084	1992	22%	90.2%	9.8%
Pasco	4124	636	15%	89%	11%
Pinellas	5983	1207	20%	85%	15%

The data shows that Pasco and Pinellas counties do not have higher rates of “present danger” than Duval County. Although Duval County shows a higher percentage of “present danger”, more cases are determined as “safe”. Duval County also holds the lowest “unsafe” rate of the four (4) counties.

Alternatively, Pinellas County has the highest rate of “unsafe” children that may contribute to the higher rate of child removals. Other variables that might impact high removal rates are

inconsistencies in safety decision making or children who are actually “safe” but determined “unsafe” due to the lack of services to support otherwise “safe” children.

Risk and safety decision making is complex and can be subjective. Therefore, further analysis is needed to complement this preliminary review that include reviewing safety and risk decision making protocols, risk and safety assessments and safety determinations.

## **CIRCUIT 6: PASCO COUNTY**

According to the United States Census Bureau<sup>2</sup>, Pasco County has a population of 584,067. The land area is 746.89 square miles with a population per square mile of 782 making it one of the most rural and geographically dispersed areas of Florida. The percentage of people in poverty is 11.4%; slightly lower than the state percentage at 12.4%.

Currently, the Pasco County Sheriff’s Office is responsible for conducting child abuse and neglect investigations and has seven (7) investigative units and a total of forty-nine (49) Child Protection Investigators (CPIs).

### **Data**

Pasco County removed 1,426 children from 2019-2021, with 43% of families residing on the westside of Pasco County, clustered in Port Richey and New Port Richey. The zip code with the highest removals is 34668 with 172 child removals from 2019-2021. *See Appendix A: Child Removals (2019-2021) and Number of CPI Investigations (2021) by Zip Code.*<sup>3</sup>

### **Strengths**

Pasco County prides itself as a tightknit community that values relationship. Notably, stakeholders commented that positive working relationships among providers, stable leadership and synergetic teamwork within agencies, specifically the Sheriff’s Office and Gulf Coast Jewish Families and Community Services, point to the stability of their front-end system.

Additionally, numerous service providers, such as Suncoast Voices for Children and Farmworker’s Self-Help, are available to support children and families in the child welfare system. In meeting with leadership and staff, there was a clear commitment to innovate in ways that help families and communities thrive.

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<sup>2</sup> 2021 U.S. Census Bureau

<sup>3</sup> *It should be noted that zip code data for investigations may not be complete as addresses are only required for verified maltreatment at perpetrator level*



## Service Array

Currently, GCJFCS *Safe at Home* serves as Pasco County's family preservation and diversion program. **Table 2** details their staff composition. Therapists are primarily interns with Master Degrees and supervised by a licensed mental health counselor (LMHC). Family Advocates, however, are not certified but do hold Bachelor Degrees, although not required by contract.

**Table 2: Safe at Home Staff**

Position	Number of Staff
Program Director	1
Assistant Program Director	1
Clinical Supervisor	1
Case Management (CM) Supervisor	1
Intake Specialist	3
Case Managers	10 + 1 over hire
Counselors	9 + 1 over hire
Family Advocates	2
<b>TOTAL</b>	<b>30</b>

*Safe at Home* provides four levels of services summarized in Table 3.

**Table 3: Safe at Home Services**

Services	Overview
<b>Safety Management Services (SMS)</b>	Utilized within first two weeks of investigation when CPI has a present danger safety plan. A CM and Counselor work the case for 14 days or until safety plan is moved to impending danger or ended.
<b>Primary Diversion</b>	Utilized within first 30 days of investigation while CPI is in process of investigating but feels services being implemented quickly would benefit family and prevent shelter. If CPI determines child to be safe, CPI calls intake and rolls case to FSS (below), if unsafe the family is referred to IHNJ. CPI must remain primary on case until it rolls to no services needed, FSS or IHNJ. Services ranges from 0-60 days, if case rolls to FSS or IHNJ, same CM stays with family.
<b>Family Support Services (FSS)</b>	CPI determines children to be safe but high risk. CPI calls intake, intake specialist calls family for acceptance of services. If accepted, CM, Counselor or Family Advocate are assigned to case for weekly home visits and resources. Services are provided up to 60 days.
<b>In-Home Non-Judicial (IHNJ)</b>	When CPI determines children living at home with parent (s) to be unsafe with impending danger, IHNJ services can be transferred through Case Transfer Staffing (CTS). IHNJ visits are 3-4 times per week, depending on supervisor assessment, and last 3-6 months depending on need of family.

**Table 4** shows the number of children served by *Safe at Home* over the last two (2) fiscal years.

**Table 4: Children Served (FY 2019 – 2021)**

Safe at Home	2019-2020	2020-2021
SMS	5	434
Primary	680	317
FSS	375	234
IHNJ	302	345
<b>Total Number of Children Served (unduplicated)</b>	<b>1,362</b>	<b>1,330</b>

### **Pasco County Gaps & Needs**

The following were identified by stakeholders as gaps and needs in supporting Pasco County families:

- ***Substance Abuse (SA) Treatment and Beds:*** There is a lack of capacity and funding for substance abuse treatment and services. The largest provider, BayCare, has an extensive waiting list. Other providers, such as Sober Solutions, have capacity but lack funding to implement services.
- ***Mental Health (MH) Services and Community Beds for Youth:*** There is a need for additional community beds for youth and community mental health services to support families with adolescents.
- ***Child Care on Eastside of Pasco:*** There is an absence of child care facilities in Dade and Zephyrhills which is a critical support while families are receiving services and obtaining employment.
- ***Transportation:*** Staff need additional resources to help families with transportation given the expansive geography of Pasco County; including bus tickets and alternative transportation options to support families seeking services. Expanding services to rural areas is also needed and would minimize transportation issues experienced by families and child welfare staff.
- ***Housing Resources:*** Additional funds and options are needed for safe and affordable housing.

Safe and affordable housing, childcare, transportation and mental health / substance abuse services are necessary supports for child safety and family well-being. The absence or limited availability of critical support services causes additional stressors for families and further delays in complying with mandated safety and case plans.

### County Specific Recommendations: Pasco Front-End Child Welfare System

The following recommendations reflect the collective voice of Pasco County's child welfare stakeholders and staff in conjunction with national best practice and research on supporting and strengthening families and communities.

- 1) Identify and develop community centers to provide family support and prevention services before government intervention occurs;
- 2) Co-create infrastructure and operating guidelines for an integrated decision-making team (IDT) that encompasses the Sheriff's Office, preservation/diversion supervisors and a Community Based Care (CBC) liaison to strengthen consistency in practice implementation;
- 3) Designate an Intake position from FSS to assign and track all preservation and diversion cases and ensure appropriateness of cases accepted and referred for services;
- 4) Require a "face to face" home visit of all children determined as "safe" as part of the initial engagement with families versus the current practice of contacting families by telephone;
- 5) Divide preservation and diversion cases by zip codes to minimize driving time and to increase time spent engaging with families;
- 6) Designate a preservation unit to serve the Eastside of Pasco County;
- 7) Eliminate requirement for therapists to conduct child safety checks to ensure their primary responsibility is the provision of therapeutic services to parents/caregivers;
- 8) Compensate staff for on call hours for SMS services;
- 9) Fund resource and service array gaps identified by staff at sufficient levels that match family and community needs;
- 10) Engage faith-based communities to serve as an additional safety and family support option for families. Stakeholders specifically recommended Grace Family Church, Calvary Chapel, Generations Christian Church, St. Vincent de Paul and Metropolitan Ministries; and
- 11) Provide more intensive services to address families' intergenerational trauma and cooccurring mental health (MH) and substance abuse (SA) issues. A higher level of expertise and knowledge of trauma and MH/SA among child welfare staff is needed to better serve families.

**"When services are provided, they're not deep enough to deal with a families' intergenerational trauma, the services aren't following the level of need of families."**

**-Pasco County Sheriff's Office Stakeholder**

Additional recommendations for Pasco County that address broader, systemic issues are found in *Overall Recommendations: Circuit 6 – Pasco & Pinellas* on 14.

## CIRCUIT 6: PINELLAS COUNTY

### Data

According to the United States Census Bureau<sup>4</sup>, Pinellas County has a population of 959,107. The land area is 273.80 square miles with a population per square mile of 3,502, making it one of the densest populations in Florida. Percentage of people in poverty is 11.1%, lower than the state percentage at 12.4%.

Currently, the Pinellas County Sheriff's Office is responsible for conducting child abuse and neglect investigations and has a total of 84 Child Protection Investigator (CPI) positions of which 28 are vacant.<sup>5</sup>

Pinellas County removed 2,297 children from 2019-2021. The zip code with the highest removals is 33705 with 157 child removals over three years. *See Appendix B: Child Removals (FY 2019 – 2021) and Number of Investigations (2021).*<sup>6</sup>

### Strengths

Pinellas County is resource rich and has strong relationships among providers. Stakeholders commented that the mutual respect and fluid communication among agencies signifies a strength of their front-end system. Notably, the leadership teams at the Sheriff's Office and Lutheran Services Florida (LSF) bring a combined wealth of expertise and experience to their work.

Staff and leadership are open to new ideas and offered numerous recommendations to support staff and families in the community. For example, the Sheriff's Office and LSF are open to co-location and co-training. LSF staff are also co-located with the *Family Enrichment Centers'* therapists offering a team approach and model that strengthens interagency collaboration.

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<sup>4</sup> 2021 U.S. Census Bureau

<sup>5</sup> As of April 4<sup>th</sup>, 2022

<sup>6</sup> *It should be noted that zip code data for investigations may not be complete as addresses are only required for verified maltreatment at perpetrator level*

## Service Array

Currently, LSF's *Connecting Family Paths* (CFP) is contracted to provide preservation and diversion services through several programs: Safety Management Services (SMS), Family Support Services (FSS) and In-Home Non-Judicial Services (IHNJ). **Table 5** details CFP's staff composition

**Table 5: Connecting Family Paths Staff**

Position	Number of Staff
Program Director	1
Assistant Program Director	1
Staffing Coordinator	1
Quality Assurance (QA) Specialists	1
Case Management (CM) Supervisors	3
Safe Care Workers	3
Family Facilitators	6
Case Managers (CM)	10
<b>TOTAL</b>	<b>26</b>

CFP contracts with the *Family Enrichment Center* for eight (8) therapists who are licensed mental health counselors. Each therapist works with an average of ten (10) families with 1-3 families in aftercare totaling an average of 21 caregivers per therapist. Family Facilitators provide SMS services and are not certified. Safe Care managers provide in-home parenting to families that include the evidence-based models *Safe Care* and *Nurturing Parenting*.

Children determined as "safe" are not served by CFP due to capacity issues. Although Family Support Services (FSS) are within the scope of contract services, the Sheriff's Office rarely utilizes FSS because IHNJ cases are at capacity. Currently, CPIs provide community referrals to families for all "safe" children. CPI's can refer "unsafe" families to Safety Management Services (SMS) where a family facilitator monitors the case for 14-21 days if an informal monitor is not available. A family can then be served in IHNJ for 3-6 months, LSF estimates that 80% of cases receiving SMS services are then referred to IHNJ. *Connecting Family Paths* provides three levels of services summarized in **Table 6**.

**Table 6: Connecting Family Paths Services**

Services	Overview
<b>SMS</b>	Family Facilitators perform safety management tasks. Most SMS cases then transfer to IHNJ for additional services.
<b>FSS</b>	For SAFE cases, average services provided for 60 days. Currently not utilized.
<b>Traditional Diversion Services (TDS)/In-Home Non-Judicial (IHNJ)</b>	In-home non-judicial services are provided to unsafe children for 3-6 months. A minimum of 3 home visits are conducted weekly.

CFP started providing family preservation services in Pinellas County in July of 2020. The number of children and families served in FY 2020-2021 are shown in **Table 7**.

**Table 7: Connecting Family Paths Number of Children Served (FY 2020 – 2021)**

CFP Programs	Total Number Served
Children Served (unduplicated)	1,612
SMS (duplicated)	1305
FSS (duplicated)	95
TDS/IHNJ (duplicated)	724
<b>Total Number of Children (duplicated)</b>	<b>2,124</b>

### Resource Gaps & Needs

The following were identified by stakeholders as gaps and needs in supporting Pinellas County families:

- **Programs for Youth:** Considering the high number of youth identified as “ungovernable”, there is an increased need for youth programs and community beds. Youth mentoring programs was specifically recommended by leadership;
- **Intensive In-Home Providers:** Intensive in-home providers were requested to address substance abuse, mental health, parenting and complex trauma. It is critically important that providers not only be skilled at addressing co-occurring SA and MH issues and the influence of complex trauma on SA and MH but also have the capacity to adequately address healing and recovery over a long length of time;
- **Batterers Intervention Program (BIP):** Additional BIP programs are needed as well as staff training regarding engaging and providing services to batterers; and
- **Housing Resources:** Additional funds and options are needed for safe and affordable housing. Stakeholders named the lack of available housing and funds for temporary housing as variables that can contribute to child safety and removals.

**We go wide with  
families but not deep.**  
-Pinellas County Sheriff's  
Office Stakeholder

### County Specific Recommendations: Pinellas Front-End Child Welfare System

The following recommendations reflect the collective voice of Pinellas County’s child welfare stakeholders and staff in conjunction with national best practice and research on supporting and strengthening families and communities.

- 1) Conduct outreach to elementary schools and hospitals to offer mandated reporter training and information regarding community supports for families. John Hopkins All Children’s Hospital and Bayfront Medical Center Hospital generated the highest number of CPS intake calls in 2021. Partnering with both hospitals to explore offering early intervention and prevention supports to families may decrease the number of CPS reports;
- 2) Implement an in-home preservation program that serves all “safe” children and **requires** face-to-face engagement and in-home services;

- 3) Engage the faith-based community to support families and communities with high child removal rates. Stakeholders specifically recommended outreach to Calvary Chapel, Indian Rocks Baptist Church and First Baptist Church of St. Petersburg;
- 4) Assign a designated staff person to manage Persons in Need of Assistance (PNA) cases who can conduct home/caregiver visits;
- 5) Identify a parenting curriculum that support parents with children 12 years and older with subsequent training for FSS and IHNJ staff;
- 6) Require all SMS workers be certified case managers; and
- 7) Engage families earlier when providing SMS services. CPIs specifically requested early engagement of SMS workers to not only provide ongoing services but to also decrease the number of workers assigned to families. Currently, there can be up to four (4) workers simultaneously in a family's home.

## **OVERALL RECOMMENDATIONS: CIRCUIT 6 - PASCO & PINELLAS**

FSS has the unique opportunity to redesign the current child welfare system in Circuit 6 to create meaningful and sustainable change for staff, children and families. As new pathways for prevention and early intervention services are established, ongoing assessment of Circuit 6's front-end system should continue and include a deeper examination of safety decision making practices, supervision and continuous quality improvement methods. Additionally, youth and family voice on all aspects of the front-end system is a critical component missing from this initial assessment and set of recommendations. **It is highly recommended that youth and family voice be centered in the next phase of Circuit 6's front-end system re-design.**

Until then, the following recommendations offer the beginning of a necessary foundation for creating a strong front-end child system and are not only informed by the collective voice of Circuit 6 stakeholders and national best practice and research but also align with national child welfare trend towards prevention per the [Family First Prevention Services Act](#) (FFPSA)<sup>7</sup>.

### **(1) Establish a Child and Family Centered Culture and Framework**

An operating framework that encompasses a clear set of guiding principles, shared values and common language where stakeholders are grounded in a culture that centers children and families is the hallmark of a model child welfare system. Without a shared vision and collective culture for ensuring the safety and well-being of children and families, a child welfare system's outcomes will be inconsistent at best and abysmal at worst.

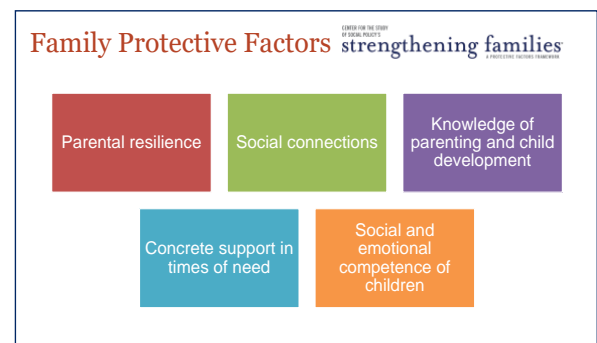
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<sup>7</sup> Bipartisan Budget Act (HR 1892). Family First Prevention Services Act. February 2018.  
<https://www.congress.gov/bill/115th-congress/house-bill/1892>



Values drive behavior and culture is created daily by what is tolerated in everyday practice. It is imperative that as new front-end pathways are created and communities are engaged, system stakeholders operate from a common language and shared lens that guides decision making and everyday practice. The primary question that must constantly drive the thinking and actions of all system stakeholders is “**What’s best for the family?**”. At its core, a robust front-end system must be *family-centered, trauma-responsive, community-driven and equitable*. Hence, specific steps in establishing a solid foundation for an effective front-end system are:

- Creating an operating framework with clearly articulated values, guiding principles and approach to serving families;
- Galvanizing system stakeholders to embody a shared framework for ensuring child safety and family well-being;
- Crafting a county specific, community manifesto that reflect the shared vision, values and beliefs of their communities;
- Co-training and collocating CPI’s and family preservation/diversion staff to further develop shared language and culture;
- Require family preservation / diversion programs to serve the entire family through a holistic family approach;
- Mandate training for new family preservation / diversion staff on protective factors, trauma and family engagement;
- Implement the “*Protective Factors Framework*”, a research-informed framework that increases family strengths, enhances child development and reduces the likelihood of child abuse and neglect<sup>8</sup>. The framework is based on engaging individuals, families and communities through building five (5) key protective factors<sup>9</sup>:



- (1) Parental resilience
- (2) Social connections
- (3) Knowledge of parenting and child development
- (4) Concrete support in times of need and
- (5) Social and emotional competence of children

Recommendations to support families in need, include concrete supports, social connections and enhancing parental capacity to manage stress.

<sup>8</sup> The Center for the Study of Social Policy. *Strengthening Families: A protective factors framework*. <https://cssp.org/wp-content/uploads/2018/11/About-Strengthening-Families.pdf>

<sup>9</sup>Ibid.

## **(2) Design a Comprehensive, Trauma Informed, Community Prevention Plan**

Early identification of families that may need support is key to reducing the number of CPS investigations that are intrusive and compounds stress on vulnerable families.

Research estimated the cost of nonfatal child maltreatment at \$830,928 over a child's lifetime, including tangible and intangible costs.<sup>10</sup> A fundamental shift is needed to reinvest funds at the front-end to support families and strengthen communities before maltreatment occurs. In fact, a comprehensive community prevention plan that encompasses a public health approach and engages a wide range of community stakeholders that touch the lives of children and families can create several pathways for families to receive support prior to government involvement. A community-based, community-driven prevention plan also requires system stakeholders to work in strategic, purposeful partnerships that improve service coordination to families and instills a collective responsibility for the safety and well-being of children.<sup>11</sup>

Additionally, most families coming to the attention of child welfare are not confirmed cases of child abuse and neglect but families struggling with histories of childhood trauma who live in low-income, marginalized communities with high-levels of collective trauma. Research shows that childhood trauma greatly impacts individuals throughout adulthood and leads to poor health outcomes including increased substance abuse and mental health challenges.<sup>12</sup> Furthermore, community trauma stems from a disinvestment in certain areas, poor housing, poor public space quality, lack of interpersonal connections and high rates of violence.<sup>13</sup>

Although we know the harmful effects of childhood and community trauma, we also know there are a multitude of strategies that provide healing, specifically through strong relationships and a support system. Specific strategies include: healing circles, hiring resident leaders, resident driven programs, community health workers and peer leadership programs.<sup>14</sup> Increasing social trust, cohesion and social support at the community level is critical to supporting families and creating thriving communities. And any community engagement effort should include community residents leading the design of community prevention efforts.

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<sup>10</sup> *What do we know about the return on investment in preventing child maltreatment?* June 2019, Casey Family Programs Issue Brief.

<sup>11</sup> *How has Texas advanced a public health approach to the prevention of abuse and neglect?* September 2019, Casey Family Programs Issue Brief.

<sup>12</sup> *Long-Term Consequences of Child Abuse and Neglect*. April 2019. Child Welfare Information Gateway, FACTSHEET. [https://www.childwelfare.gov/pubpdfs/long\\_term\\_consequences.pdf](https://www.childwelfare.gov/pubpdfs/long_term_consequences.pdf)

<sup>13</sup> *Trauma Informed Community Building and Engagement*, April 2018, Urban Institute.

<sup>14</sup> *Ibid*.

Most importantly, a cross sector of public and private leaders, parents, and community members co-creating a comprehensive community prevention plan is key and may also include essential elements such as:

- Partnering with schools, hospitals, community centers, and faith-based entities to identify and support families as early as possible;
- Engaging parents and community members from zip codes with the highest child removal rates and co-creating strategies to support families prior to child welfare involvement (e.g., concrete supports, opportunities for families to connect, build social trust and cohesion);
- Addressing individual and community trauma;
- Re-designing community outreach centers to operate as family resource centers that are proximate to vulnerable families;
- Increasing the availability of Care Navigators and locating them in communities with high rates of child removal; and
- Developing media campaigns that normalize parents asking for help and offer accessible parent education, resources and support services.<sup>15</sup>

### **(3) Enhance Services and Streamline Program Structures**

It is recommended that all existing prevention, family preservation and diversion programs enhance their service capacity and streamline their program structures. When families do come to the attention of the child welfare system, most children are “safe”. For example, in CY 2021, 89% of children in Pasco County and 85% of children in Pinellas County were assessed as “safe”. For children determined “safe”, an effective family preservation program is one where families are engaged face-to-face and their protective factors are increased. In-home services should be available for at least 3-9 months depending on family need. Serving “safe” children and their families with greater intensity and increasing their protective factors will decrease the likelihood that they will touch the system in the future.

Additionally, for children determined as “unsafe”, diversion services need to be conducted by certified child welfare staff with intensive services provided from 6-12 months depending on family need. Increasing the duration of services allows trust to build among service providers, increases length of time families receive therapeutic services and creates capacity to address deeply entrenched, complex issues such as intergenerational family trauma.

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<sup>15</sup> *How has Texas advanced a public health approach to the prevention of abuse and neglect?* September 2019, Casey Family Programs Issue Brief.

Additional recommendations to enhance prevention and family preservation programs include:

- Provide community resource specialists as a referral source for CPI's that serve as experts on available community resources and the primary point of contact for follow-up with families; particularly for children determined as "safe" but have come to the attention of the child welfare system;
- Serve ALL families with in-home services even at the lowest level of risk (all SAFE children) to prevent the need for higher levels of safety services;
- Increase capacity and duration of services for FSS and IHNJ cases and track caseloads by number of children;
- Provide additional IHNJ units in each county based on numbers served in FY 2021 not to exceed 25 children per worker;
- Require safety monitors be certified;
- Create program brochures for families receiving FSS services that clearly articulate program components and services;
- Review staff compensation and make comparable to other human services positions; and,
- Consider implementing evidence-based programs that demonstrate a high return on investment (e.g., Nurse Family Partnership and Homebuilders). <sup>16</sup>

**The transition has been difficult on the workforce: manageable caseloads, adequate resources and support need to be a priority in the system redesign.**

**-Circuit 6 Leadership Focus Groups**

#### **(4) Engage and Co-create with Youth, Parents and Community**

Families and communities most impacted by the child welfare system must be co-creators and invited as experts in re-designing the front-end system. Learning from parents' lived experiences and the struggles they encounter seeking help is paramount to creating effective front-end pathways that best serve families.

Similar to system stakeholders, parent leaders and community members should also be financially compensated for their time and lived expertise. Youth and family voice as well as active participation are necessary to challenging child welfare systems to evolve in new and different ways that authentically center families. Child welfare systems need to be open, transparent and willing to hold space with those they serve. And this requires acknowledging harm done to families and communities and co-creating ways to repair harm and meaningfully partner with families.

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<sup>16</sup> *What do we know about the return on investment in preventing child maltreatment?* June 2019, Casey Family Programs Issue Brief.

### **(5) Create Innovative Approaches for Co-Occurring Social Problems**

Co-occurring substance abuse, mental health and domestic violence was cited by Circuit 6 stakeholders as a primary driver of child removals and are complex problems that require a community wide response and cross systems approach. Co-location of substance abuse/mental health experts and domestic violence advocates with child welfare staff to provide onsite expert consultation and improve case collaboration have demonstrated effective outcomes for families experiencing co-occurring issues. It is recommended that a multi-disciplinary task force be established to research and implement innovative approaches to be piloted for possible replication and scalability.

### **(6) Provide Concrete Supports and Needed Resources to Families**

Every family has basic needs that must be met including food, clothing, child care, employment and safe housing. Unfortunately, many families do not have their basic needs met or are struggling unnecessarily where resources are limited. Consequently, families that lack basic needs experience increased parental stress and family crisis. Although most child welfare systems discount poverty as a reason for child removals, the multiple stressors that poverty causes and the lack of basic needs is the root cause of why many children enter the child welfare system.

Studies show that children from households with fewer resources are three times as likely to be substantiated for abuse and about seven times more likely to be substantiated for neglect than other children.<sup>17</sup> Factors such as racism and other discriminatory policies have created communities with limited resources and poor built environments which is one reason for the disproportionate number of African American children in foster care in Florida and nationally. Engaging parents and community members and providing community-based prevention, preservation and diversion programs is essential to supporting families struggling to meet their basic needs.

Stakeholders identified numerous gaps in community resources needed to adequately support children and families. Needs ranged from lack of transportation to the lack of service providers (e.g., substance abuse, mental health). The county specific recommendations regarding service capacity issues need to be adequately funded and addressed. Although some of the county specific recommendations require additional funding, others simply call for improved cross sector and community collaboration to address more co-occurring or complex system issues (e.g., safe, affordable housing, SA/ DV/ MH).

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<sup>17</sup> *How do economic supports benefit families and communities?* February 2022, Casey Family Programs Issue Brief.

## **(7) Create Continuous Quality Assessment Mechanisms for Front-End System Re-Design**

Re-designing a system is a process that will require continued assessment. As more parents, community members and stakeholders are engaged there will be numerous iterations of the re-design plan. Feedback from stakeholders and data collection is critical in identifying pathways that have the most impact or require adaptation to better serve families. Mechanisms should be built into the front-end system to include collecting continuous feedback on the quality and capacity of services. The voice of youth, parents and stakeholders should also be incorporated in assessing the quality of services and any needed front-end system improvements. It is recommended that the following be considered when establishing a robust mechanism to continually assess capacity and quality of Circuit 6's front-end pathways:

- Enhance child welfare data tracking system that includes a monthly assessment of children served, program capacity and structured quality assurance (QA) review process with youth and families;
- Create a feedback mechanism for internal and external stakeholders regarding front-end pathways; and
- Recognize and celebrate successes to instill a culture of centering child and family well-being.

**NOTE:** The above recommendations should be incorporated into a working action plan that identifies high leverage items that would make the most impact. **It is recommended that a Front-End Implementation Team be established to implement and monitor the action plan.** The working action plan should also be co-designed by system stakeholders and parents with responsibility in decision making and implementation. Pasco and Pinellas counties have specific cultures, differing system arrays and varying geographical challenges that will require ongoing assessment and iterations of work plan strategies due to the uniqueness of each county.

## CONCLUSION

The essence of community-based care in Florida is that programs and services are based in communities where child welfare interfaces most and where the entire community can be responsible for supporting families and keeping children safe. As the lead CBC agency, Family Support Services (FSS), has the opportunity to fully engage entire communities and convene numerous entities towards a collective vision and common goal for child and family well-being. It is evident from this assessment that Circuit 6 staff and leadership have a shared goal of keeping children safe and supporting families with child removal as a last resort.

It's important for system stakeholders to understand that change takes time. Creating a strong front-end system is not an event but a process that will emerge over time. Part of the course involves getting as proximate to families as possible by creating brave space to hear their lived experience and place them at the center of the system re-design. New pathways will require new thinking and a different set of questions. This requires authentic relationships with parents, communities and stakeholders and cultivating relationships built on trust and authenticity. It is imperative that people trust the process and avoid "quick fixes" to long standing issues that beg for sustainable resolution. A family-centered, community-based, community-driven approach will involve providing a level of hope and healing to individuals and communities that has not been done before. It will require that everyone come to the table with open minds and soft hearts to collectively work together to ensure the safety and well-being of their communities.

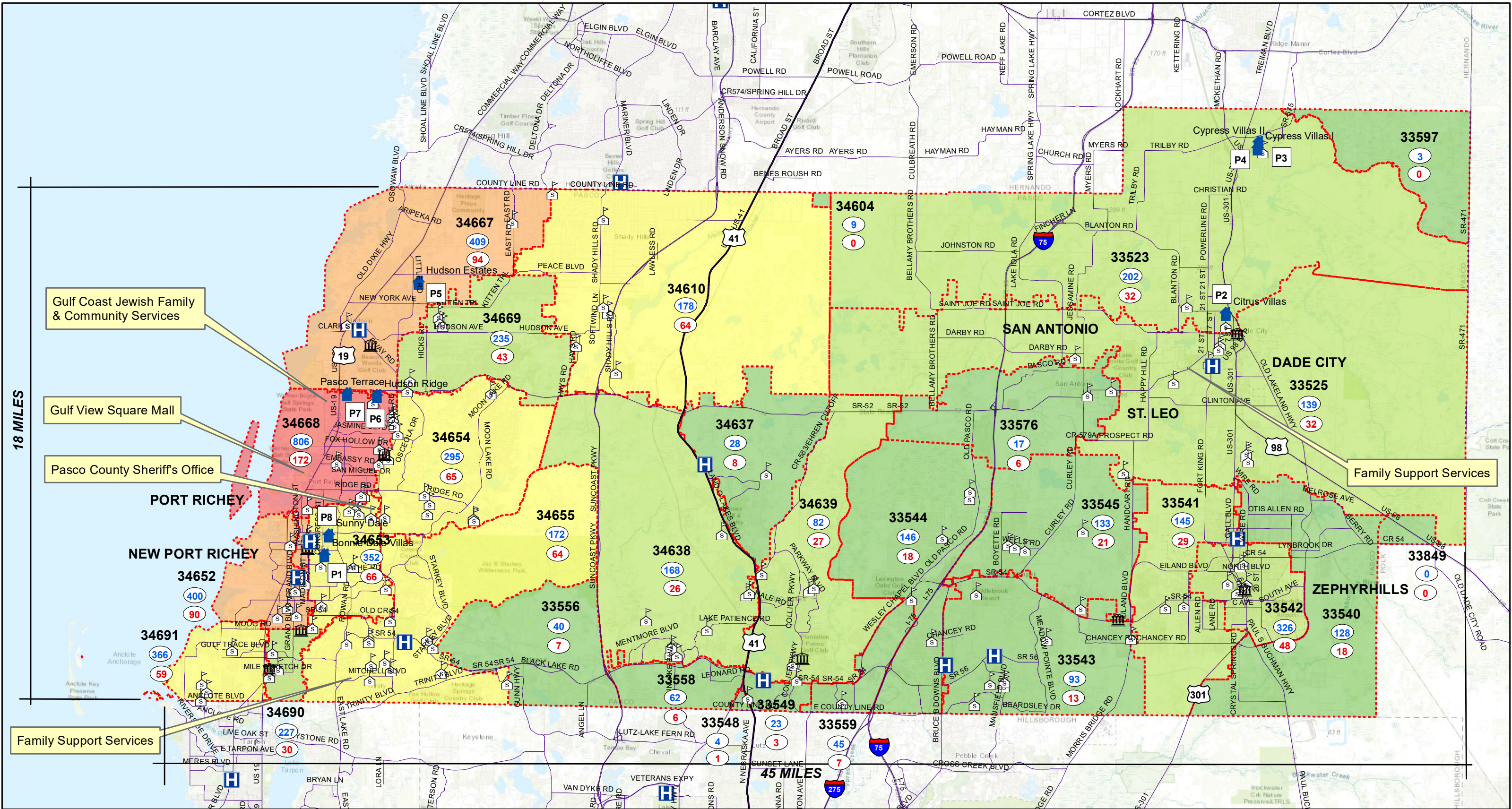
FSS and Circuit 6 is faced with a unique opportunity to delve deeper into their current practices and design system improvements that create a better system for everyone. Child welfare systems have operated far too long in antiquated practices that achieve less than optimal outcomes for children and families. New efficiencies and opportunities can impact not only how child welfare serves families but also how child welfare cares for its staff and stakeholders in a manner that fully supports their capacity to optimize safety, permanency and well-being for children and families. This period of transition for Circuit 6 and the Family First Prevention Services Act (FFPSA) also gives leaders both momentum and a mandate to realign child welfare systems that are built on a solid foundation of prevention services, informal and community supports and authentic engagement of youth, caregivers and communities.

As FSS navigates this time of transition and change, the hope is that desperately needed and fundamental changes will occur to create a preventative, proactive front-end system with community partners who share responsibility in supporting families so that children thrive and communities are strong. Unquestionably, the time is now to envision a stronger front-end system as FSS adapts to the necessary transitions occurring in its newly acquired jurisdictions in Circuit 6.









- Hospitals
- Public Library
- Public Housing
- Public and Private Schools

**REMOVALS BY ZIP CODE**

- 0 - 25
- 26 - 50
- 51 - 75
- 76 - 100
- Above 100

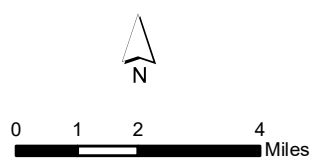
**PUBLIC HOUSING**

- P1 - Bonnie Dale Villas
- P2 - Citrus Villas
- P3 - Cypress Villas I
- P4 - Cypress Villas II
- P5 - Hudson Estates
- P6 - Hudson Ridge
- P7 - Pasco Terrace
- P8 - Sunny Dale

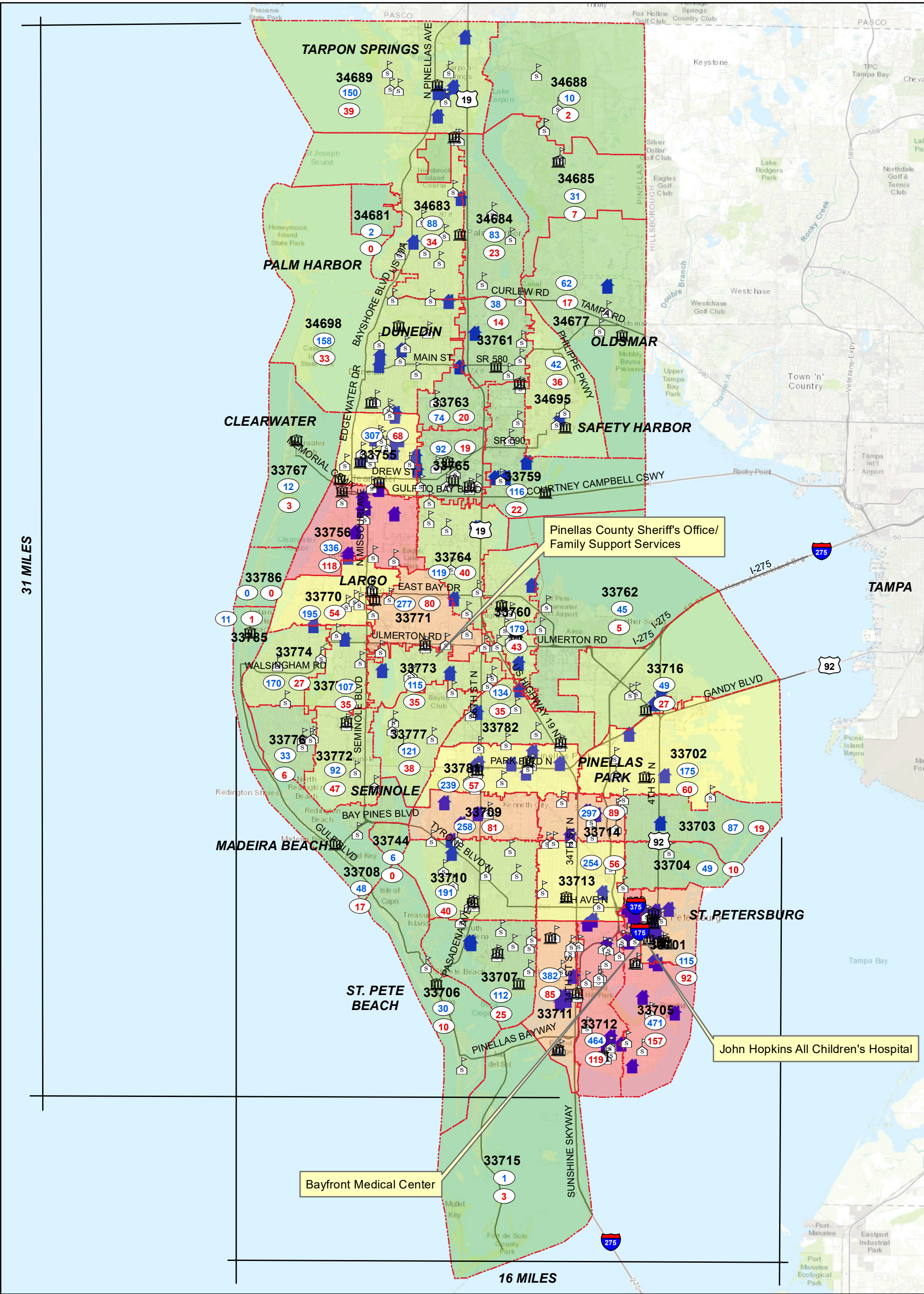
- 2021 Investigations (1 Year) in Zip Code
- 2019-2021 Removals (3 Years) in Zip Code

**+75 REMOVAL ZIP CODES**

- 34652 - 3 miles x 4 miles
- 34667 - 6 miles x 7 miles
- 34668 - 4 miles x 4 miles







- Assisted Rental Housing Complexes
- Libraries
- Public and Private Schools

**REMOVALS PER ZIP CODE**

- 0 - 25
- 26 - 50
- 51 - 75
- 76 - 100
- Above 100

2021 Investigations (1 Year) in Zip Code

2019-2021 Removals (3 Years) in Zip Code

**+100 REMOVAL ZIP CODES**

- 33705 - 1.75 miles x 6 miles
- 33712 - 1.50 miles x 5 miles
- 33756 - 2.50 miles x 3 miles



0 1 2 4 Miles