



## 2020 SPECIAL INITIATIVES AGENDA

Most Coloradans who call the Office of Colorado's Child Protection Ombudsman (CPO) dial dozens of numbers before calling the CPO. For instance, a grandmother, confused about why her granddaughter was placed into foster care, calls because she does not understand the technical explanation she was previously provided. Next, a mother in tears calls because she is frustrated that she has not been provided a reason for why she was denied a visit with her son at a Division of Youth Services facility. During a different call, an adoptive parent explains why they are contemplating sending their child to live out of state, primarily because none of the agencies or providers they have contacted have been able to help their teenager access the behavioral health services that they desperately need. The last call of the day is from a panicked community member. He doesn't understand why a parent – who was suspected of abusing and killing their child – is being allowed to continue caring for the child's sibling.

Since its inception in 2010, the CPO has received more than 3,900 calls – up to seven calls per day – from Colorado citizens seeking answers and help. Efforts to answer citizens' questions and respond to their needs have exposed the CPO to an incredibly diverse array of agencies, regulations and practices throughout the state. Often, the answer to citizens' questions require the CPO to translate explanations already provided by other agencies. Some questions, however, are more complicated and some the CPO hears more than once.

The CPO is uniquely situated and qualified to answer citizens' questions. During the past three years, the CPO has demonstrated its ability to provide thorough and objective analysis regarding issues that have long impacted Colorado's child protection system. As an independent state agency, the CPO is charged with studying and improving the systems tasked with protecting Colorado's children and with helping citizens navigate these systems.

To aid in the CPO's understanding of child protection systems throughout the state, the CPO has traveled to hear from families and stakeholders. Repeatedly they asked what issues the CPO is seeing, what projects the CPO is working on and what problems are most impacting the safety, permanency and well-being of Colorado's children. To better answer these questions, the CPO is announcing a new approach to our work.

In order to respond to the questions and feedback we've received from citizens and continue improving our work and the impact it has, the CPO is announcing two new practices. First, the CPO is committing agency staff and resources to proactively identifying and more effectively communicating the agency's special initiatives. These special initiatives are designed to bring awareness, education and reform to issues impacting the safety, permanency and well-being of Colorado's children. The CPO's special initiative for 2020 is improving the effectiveness of child abuse and neglect fatality reviews in Colorado. The CPO's second practice is to provide citizens and stakeholders more consistent and transparent updates regarding the implementation of the CPO's recommendations.

## // 2020 SPECIAL INITIATIVES

Beginning in 2020, the CPO will dedicate agency resources and staff to special initiatives. Our 2020 special initiative is detailed below.

### CHILD FATALITY REVIEW

Between 2015 and 2018, 131 children died of abuse and/or neglect in Colorado. Since becoming an independent agency, the CPO has heard from a variety of agencies, including child welfare agencies, medical professionals and law enforcement. All are concerned that the current systems designed to reduce such fatalities are not doing enough. They're concerned the systems charged with protecting children continue unchanged after a child dies of abuse or neglect. In fact, the average number of child deaths each year has remained largely consistent since 2015. Additionally, under Colorado's current legal framework, not all children who die of abuse or neglect have their deaths reviewed. Of the 131 deaths between 2015 and 2018, only 46 percent underwent a case-specific review.

Routinely, public discussions of child abuse and neglect deaths focus on the actions and services of child welfare agencies. Such focus is misguided. Consistently, a child is involved with not one, not two, not three but nearly half a dozen public entities prior to their deaths. These include schools, hospitals and law enforcement. However, when a child's death is reviewed, there is no consistent and transparent process that guarantees these other systems are notified of their roles in child abuse and neglect fatalities. Conversely, there is no accountability mechanism for ensuring that all systems capable of preventing child abuse and neglect deaths are improving their practices. There are multiple public entities charged with reviewing child fatalities in Colorado. There is not, however, a single entity responsible for reviewing all child abuse and neglect fatalities, implementing standard protocols for notifying agencies of lapses, issuing recommendations for improvements and ensuring those changes are made. The CPO's goal is to create the framework necessary to create such a review and – ultimately – improve the effectiveness of child fatality reviews in Colorado.

In April, the CPO will release its first brief for this initiative. The brief will provide information regarding the current child fatality review systems in Colorado. It will also provide details about the stakeholder process which will take place this summer as the CPO seeks input regarding child fatality reviews and how those processes and child protection systems may be improved.

## // ONGOING WORK

Since 2017, the CPO has issued 28 systemic recommendations to various entities across Colorado. Those recommendations were the result of four cases completed by the CPO. The CPO's reports detailed issues impacting the administration of Colorado's adoption assistance programs, concerns with the Montezuma County Department of Social Services' child welfare practices, gaps in how residential child care facilities are monitored and a lack of transparency in the Division of Youth Services' rulemaking process. The same citizens who bring such issues to the CPO's attention also want to know what impact the CPO's work – including these reports – has on improving systems.

As such, the CPO has developed a monitoring system and has dedicated staff resources to follow the implementation of its recommendations. Such efforts are aimed at ensuring the CPO is accountable for following through on the recommendations it issues and the agency remains transparent regarding its work to improve the child protection system.

In monitoring its recommendations, the CPO will continue to communicate with the relevant agency, may attend relevant stakeholder meetings and may initiate projects or legislation to address the goal of the recommendation.

A comprehensive list of all 28 recommendations and updates from the correlating agencies may be found on the CPO's website, [www.coloradocpo.org](http://www.coloradocpo.org).

## // CONCLUSION

Colorado has made many investments to ensure children are able to reach their full potential. Colorado's child protection systems are a key part of that investment. The CPO was created to ensure the state's complex child protection system consistently provides high quality services to every child, family and community in Colorado. To do this, the CPO will ensure its work is transparent, accessible and impactful. The CPO looks forward to continuing to improve child protection systems in Colorado.