

**Children and Youth Committee Public Hearing
CYS Caseworker Complement and Retention
Monday, April 4, 2016
Room 60 East Wing
Harrisburg, PA**

Good Morning, I would first like to thank Chairwoman Watson, Vice-Chairman Moul, Mr. Grasa, and the Honorable Committee for allowing me this opportunity. My name is Nicholas Ranney and I am an intake caseworker with the Franklin County Children and Youth Service. I was hired in May, 2008, after I graduated from West Virginia University with my bachelor's degree. I come before you today to offer my experience within the child welfare field and to hopefully share a perspective which may help to better the field and practice as a whole.

In my short time within this profession I have seen many changes. Most notably, I have seen many caseworkers come and go in only 8 short years. I have had the opportunity to meet many other caseworkers within the state and all share similar stories about staff coming and going. Retention, particularly within the intake unit, has been a struggle even when I was first hired. I believe there are many reasons for this which I will touch upon.

First, allow me to explain the role and function of my current position. When a mandated reporter or community member calls ChildLine to make a report that report is sent to the county agency. Upon receipt by the agency that report is reviewed by a supervisor. If the supervisor finds that the allegations within the report meet the criteria and is within the jurisdiction of the county it is assigned to an intake caseworker. These allegations can span a gamut of areas from physical and sexual abuse, drug use, truancy, neglect, incorrigibility, and that is only naming a few. Upon receipt of the report by the intake caseworker, their investigation begins and can last no longer than 60 days. Currently, a Franklin County intake worker is averaging being assigned 2 cases per day, or a 40 percent increase since the inception of the new Child Protective Service Laws. Meanwhile, our intake staff has not increased at all. The increased caseload alone is enough to cause staff to leave.

I believe another problem caseworkers face is a lack of training. Since I have begun this career I have had to develop extensive knowledge within the fields of child development, mental health, human anatomy, biology, pharmaceuticals, narcotics, addiction, interrogations, crime scene investigation, technology, and the list goes on. The training provided to new caseworkers is named "Charting the Course" and consists of 10 modules.

While these modules do well to introduce caseworkers to the forms and general practices used within an agency, they do little by way of preparing a caseworker for the field. I had to seek out and get permission to attend additional trainings that helped shape my abilities as a caseworker. These trainings include Finding Words offered by the National Child Training Center in Winona, Minnesota. Childfirst PA, a PA forensic interview training developed by the National Child Training Center which offered free tuition to child welfare workers with usage of grant money. ChildFirst is a week long training designed to train multidisciplinary investigative teams on every stage of the child abuse investigation from the initial

outcry thru prosecution. In 2011, the Pennsylvania Solicitor's Association along with the Pennsylvania District Attorney's Association brought Childfirst to Pennsylvania and began training multidisciplinary investigative teams consisting of child protective services workers, law enforcement, prosecutors, solicitors, forensic interviewers, and medical providers. In 2012, Pennsylvania became certified as a ChildFirst training state. Since that time, ChildFirst PA has trained approximately 400 team members. In March of 2012 with the use of Children's Justice Act grant dollars through the federal Child Abuse Prevention and Treatment Act, ChildFirst PA training was offered free to multidisciplinary investigative teams. This funding continued through the Department of Human Services until March of 2015. Currently counties that are interested in providing ChildFirst PA training to their teams must secure funding through grants from PCCD. This is a hardship for most counties and has significantly limited the delivery of ChildFirst PA training to teams.

ChildFirst is the only in-state training of its kind. It trains teams to understand the importance of having a county investigative protocol, how to interview children involved in a child abuse investigation, and the roles and responsibilities of each discipline involved in investigation allegations of child abuse and neglect. The ChildFirst PA training was cited in the Dauphin County Grand Jury report in June of 2015 as being the only training that effectively prepares caseworkers handling child abuse investigations. Without adequate training, caseworkers feel overwhelmed and ineffective in their ability to keep children safe. Inadequate training can also lead to the mishandling of child abuse investigations. This ultimately means, that children may remain vulnerable, offenders may continue to commit acts of abuse, and, in the most serious of cases, children may die. The significance of having well-trained caseworkers not only improves the retention rates for caseworkers but ensures the safety of children as well.

I've also attended lectures and trainings done by doctors at the Penn State Milton S. Hershey Children's Hospital, the National Children's Alliance, and the Pennsylvania Chapter of Children's Advocacy Centers and Multi Disiplinary Teams. Those are just naming a few, none of which are required, and all of which helped mold me into a competent caseworker. Imagine, being thrust into a position which carried with it something as precious as a child's life and well-being. Now imagine, being given limited tools with which to accomplish the task. Overwhelmed, daunted, terrified, pressured, scrutinized, stressed, tired, drained, are only a few of the adjectives used when new workers speak about their current day to day.

Other issues make it hard to retain staff as well. The changes that are so constant within the child welfare field can, at times, be difficult to keep up with. From the time I started to now just the paperwork alone has changed immensely. When I first started I could type my notes on Microsoft word, complete a safety assessment check list by making a few check marks on a piece of paper, complete one risk assessment, and send out letters at completion of a case. Now, caseworkers will joke amongst themselves that the belief must be that more paperwork makes kids more safe. The problem? More paperwork leads to less time for caseworkers to actually be in the community, working with their clients, evaluating children's safety, and overall lessening the amount of time they have to do their most important functions. Most caseworkers do this job because they want to help and work with people only to find the most of their time is spent behind a desk and steering wheel.

The paperwork increase can at times be understandable but a lot of frustration comes with redundancy with the paperwork itself. For example, caseworkers are to complete a form known as a safety assessment. This form consists of 14 yes or no questions such as "child sexual abuse is suspected." If a caseworker answers no they are still tasked with providing an explanation. This explanation must also contain case specific details. We have been told that someone should be able to pick up this safety assessment and know everything about the case. I believe that is what a caseworker's dictation is for, to explain the details of the case. I understand the purpose of a safety assessment, but one could simply answer no and not be required to further detail this answer. Now, imagine after doing your safety assessment and typing thorough and detailed contact notes still having to give detailed answers to these 6 questions after every contact: type of referral, nature of referral, child functioning, adult functioning, general parenting, and parenting discipline. So, a caseworker has essentially documented the same thing 3 separate times after just one contact. Extrapolate this out over the course of just one month and you've only just touched the peak of the iceberg in terms of the paperwork a caseworker is tasked with completing.

Also, within the last few years CWIS was introduced, a statewide database in which we now do all of our work. This was rolled out statewide and caseworkers were only offered a 1 day training on the system. Also, it was only limitedly piloted. The difficulties with this system as well as the redundancy of some of the paperwork tasked to caseworkers are too much to detail but I will be happy to answer specific questions.

Now, imagine all of these problems existing and then increasing ones workload by 40 percent. Also, be aware that there is no monetary incentive to this job. The starting pay of a caseworker, one tasked with investigations, is less than a Childline worker who simply takes the reports. Young people who enter this profession quickly learn that their earning potential is far greater elsewhere and more likely less stressful. Those who do stay long enough to maybe have a family run into other problems like providing for a family on a small income, stress of the job interfering with family relationships, long hours detracting from ones family, and so on.

It is for these reasons that I feel the child welfare has entered a breaking point and will soon be in crisis. Young, talented, and well-intended people are avoiding or leaving this profession at an exceptionally high rate. And for those who remain, the amount of work and stress is becoming near unbearable. I would like to offer some suggestions as to how we can help caseworkers do their intended job.

I believe decreasing a caseworkers caseload would provide the most immediate and impactful solution to issues caseworkers are facing. Fewer cases would allow caseworkers to spend more time with their families in the field, feel less rushed, and ease the stress of their job. The more time one can spend with a family the better an assessment can be completed. The better assessment one can complete will in turn allow for better services, if needed to be put into place. With appropriate services in place the agency could avoid potential out of home placements and recidivism. This can only be accomplished by increasing staff sizes, and as I stated previously within my agency staff size has not increased in the last 5 years despite a 40 percent increase in referrals.

Caseworkers need to be provided better training in the beginning. The amount of knowledge a caseworker is expected to possess is outrageous and beyond one college degree. While I understand some of what we do is learned while being in the field, most new caseworkers aren't receiving adequate supervision or time with experienced caseworkers because of the increased workloads and demands. We need to look into a more comprehensive training program for new caseworkers that not only provides classroom lecture but can recreate real world experiences. At the National Child Protection Training Center there is a mock house used to set up real world examples of referrals caseworkers may see. Childfirst PA uses actual children as well as trained adult actors for caseworkers to practice their interview skills. Childfirst PA also offers courtroom training and how to testify. Doctors, such as ones at the Penn State Children's Hospital should be consulted or have caseworkers attend their lectures.

I, as well as all other caseworkers, did not take on this job because we wanted to be rich. I do this job because I believe that children are the most valuable and important resource we have, but also the most fragile. I do this because I hope that I have the ability to impact a child's life for the better. I cannot, in the current climate continue to do the job I love as effectively as I should be able to. No caseworker can. Because of this, I fear that children will be left behind, hurt, neglected, and forgotten. I don't seek change to better my work or life, I seek change to better the life of a child. Thank you for your time, and again thank you for this opportunity.

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