



STATE OF MICHIGAN

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
LANSING

RICK SNYDER  
GOVERNOR

NICK LYON  
DIRECTOR

December 5, 2018

Rick Lowe, Chief Internal Auditor  
Office of Internal Audit Services  
George W. Romney Building  
111 South Capitol, 8<sup>th</sup> Floor  
Lansing, Michigan 48913

Dear Mr. Lowe:

In accordance with the State of Michigan, Financial Management Guide, Part VII, attached are the summary table identifying our responses and corrective action plans to address recommendations contained within the Office of the Auditor General's Performance Audit of Children's Protective Services Investigations.

Questions regarding the summary table or corrective action plans should be directed to me at 517-241-4237 or MyersP3@michigan.gov.

Sincerely,

Pam Myers, Director  
Bureau of Audit

PM:kk

Enclosure

c: Office of the Auditor General  
House Fiscal Agency  
Senate Fiscal Agency  
Executive Office  
DHHS, Nick Lyon  
DHHS, Nancy Vreibel  
DHHS, Dr. Herman McCall

House Appropriations Committee  
House Standing Committee  
Senate Appropriations Committee  
Senate Standing Committee  
DHHS, Farah Hanley  
DHHS, GERALYN LASHER  
DHHS, Karla Ruest

PERFORMANCE AUDIT OF  
CHILDREN'S PROTECTIVE SERVICES INVESTIGATIONS

DEPARTMENT OF HEALTH AND HUMAN SERVICES

REPORT DATED

SEPTEMBER 6, 2018

AUDIT RESPONSE

Approved: *Farah A. Hanley*  
Farah A. Hanley, Senior Deputy Director  
Department of Health and Human Services

Date: *11/9/18*



## **AUDIT REPORT SUMMARY**

DEPARTMENT: Children's Services Administration

AUDIT PERIOD: May 1, 2014 through July 31, 2016

REPORT DATED: September 6, 2018

### **DISPOSITION OF AUDIT RECOMMENDATIONS**

CITATIONS PARTIALLY COMPLIED WITH OR TO BE COMPLIED WITH	CITATIONS DHHS DID NOT AGREE WITH
Finding 1, Finding 2, Finding 3, Finding 4, Finding 5, Finding 6, Finding 7, Finding 8, Finding 9, Finding 10, Finding 11, Finding 12, Finding 13, Finding 14, Finding 15, Finding 16, Finding 17, Finding 19, Finding 20, Finding 21, Finding 23, Finding 24	Finding 18, Finding 22

Supervisory Control Protocol (SCP): The SCP is complete. Applicable policy is being drafted and training developed. Training will commence in December 2018 with statewide rollout in subsequent waves. Implementation in all counties is expected by March 31, 2019.

Compliance Review Team (CRT): The CRT is currently being implemented. This process will continue until current funding is depleted.

Peer Case Review (PCR): The PCR is currently being implemented. This process will continue until current funding is depleted.

The Mobile Application Project consists of the three elements including; (a) mobile app for Children's Protective Services (CPS) workers, (b) the supervisor portal for the SCP, and (c) executive dashboards. All three elements will be developed by December 16, 2018. The app, portal rollout, and applicable training will be deployed in December 2018 with statewide rollout in subsequent waves. Implementation in all counties is expected by March 31, 2019.

**Audit Response**  
**Performance Audit**  
**OAG Children’s Protective Services Investigations**  
**Department of Health and Human Services**  
**May 1, 2014 through July 31, 2016**

**Recommendation 1:**        **Improvement needed to ensure that investigations are commenced in a timely manner.**

The OAG recommended that MDHHS commence CPS investigations of suspected child abuse and/or neglect (CA/N) within required time frames. The OAG also recommended that MDHHS seek legislative clarification to validate its interpretation of, and compliance with, the Section 8(1) of the Child Protection Law (CPL) commencement requirement.

**Response**

In December 2017, the department updated policy to align with practice, and in August 2018, policy was further clarified.

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and Children’s Services Agency (CSA) leadership to track practice compliance. The timeliness of CPS commencements will be verified using the SCP.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. Commencement is reviewed in each case for compliance.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

The department is creating a mobile software application that will interface with the MiSACWIS system and allow workers to access immediate physical safety features, remotely enter social work contacts, and document completion of other required investigation activities in real time from the field. The mobile application will improve documentation and worker safety. CPS workers will be able to add commencement contacts from the mobile application.

**Recommendation 2:**        **Considerable improvement needed in documentation of Central Registry clearances.**

The OAG recommended that MDHHS document its performance of a Central Registry clearance for all required individuals associated with a CPS investigation.

### Response

In February 2018, the department issued a communication to clarify documentation expectations. The department is actively working on technology enhancements which will improve the readability of reports and increase compliance of worker documentation and supervisory review. The first release of the enhancements will occur in December 2018.

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP requires verification by the supervisor that the worker sufficiently documented the completion of all needed central registry clearances.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT includes identification of whether the central registry clearances were adequately documented.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

### Recommendation 3: Considerable improvement needed in completion of required criminal history checks.

The OAG recommended that MDHHS complete a criminal history check for all required individuals when conducting investigations of CA/N.

### Response

The department began updating policy to clarify LEIN requirements in 2017 and finalized and published the policy in 2018.

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP requires verification by the supervisor that the worker completed and sufficiently documented criminal history clearances.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT includes identification of whether the criminal history was properly documented.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic

deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

Recommendation 4:            Documentation of a complete review of CPS history for family and household members needed.

The OAG recommended that MDHHS maintain documentation to support that CPS investigators conducted a complete review of CPS history for family and household members.

Response

The department is actively working on technology enhancements which will improve person search and case history search functionality. Enhancements will also improve readability of reports and enhance worker documentation functionality and supervisory review. The release of the enhancements will occur in December 2018.

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP requires verification by the supervisor that the worker reviewed and sufficiently documented CPS history.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT includes identification of whether the CPS history was properly documented.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

Recommendation 5:            Significant improvement needed in the documentation of communication with mandated reporters.

The OAG recommended that MDHHS document that it has contacted mandated reporters to obtain additional information and to clarify and verify the information that MDHHS receives in the reporters' CA/N complaints. The OAG also recommended that MDHHS consistently document that it provided the mandated reporters with written notification of its disposition of the investigation that resulted from the reporters' complaints.

Response

In February 2018, the department issued a communication to clarify documentation expectations. Further, policy is being clarified to require investigators to contact any reporting source if additional information is needed and removing the requirement to contact mandated reporters when no additional information is needed. Currently the department is in the process of amending policy to clarify these requirements.

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP requires verification by the supervisor that the worker documented contact with the mandated reporter if additional information was needed and that the worker sent notification of disposition to the mandated reporter.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT includes identification of whether the required notification to mandated reporters occurred and was documented.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

The department is creating a mobile software application that will interface with the MiSACWIS system and allow workers to access immediate physical safety features, remotely enter social work contacts, and document completion of other required investigation activities in real time from the field. The mobile application will improve documentation and worker safety. CPS workers will be able to add contacts with mandated reporters from the mobile application.

Recommendation 6:        Improvement needed in completing timely face-to-face contact with alleged child victims.

The OAG recommended that MDHHS consistently make face-to-face contact with all alleged child victims within required time frames.

Response

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP requires verification by the supervisor that the worker made face to face contacts, and that they were timely and sufficiently documented.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

The department is creating a mobile software application that will interface with the MiSACWIS system and allow workers to access immediate physical safety features, remotely enter social work contacts, and document completion of other required investigation activities in real time from the field. The mobile application will improve documentation and worker safety. CPS workers will be able to add face to face contacts from the mobile application.

Recommendation 7:        Improved documentation needed of investigators' efforts to interview and verify the safety and whereabouts of all children.

The OAG recommended that MDHHS improve its documentation of CPS investigators' efforts to interview all children in the home during a CPS investigation, including the reason(s) why the investigator did not interview all children. The OAG also recommended that MDHHS improve its documentation to support that CPS investigators consistently verify the safety and whereabouts of all children, including those children who reside in another location.

Response

In February 2018, the department issued a communication to clarify documentation expectations.

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP requires verification by the supervisor that the worker interviewed and determined safety and whereabouts of all children and that those efforts were sufficiently documented.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT includes identification of whether efforts to interview and verify safety and whereabouts of all children were documented.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

The department is creating a mobile software application that will interface with the MiSACWIS system and allow workers to access immediate physical safety features, remotely enter social work contacts, and document completion of other required investigation activities in real time from the field. The mobile application will improve documentation and worker safety. CPS workers will be able to add contacts with information regarding efforts to interview children and verify the safety and whereabouts of all children from the mobile application.



Recommendation 8: Documentation of safety planning at initial contact with family and completion, accuracy, and timeliness of safety assessments need improvement.

The OAG recommended that CPS investigators consistently document that a safety plan has been established during the initial contact with families under investigation of CA/N or document why an immediate safety plan is not needed. The OAG also recommended that CPS investigators improve their completion, accuracy, and timeliness of safety assessments. The OAG further recommended that MDHHS establish a safety planning policy and clarify its policy for safety assessment timeliness requirements.

Response

The department is in the process of amending policy to clarify expectations for safety planning.

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP requires verification by the supervisor that safety planning expectations were met, that the Safety Assessment Tool was completed accurately, and that both were sufficiently documented.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT includes identification of whether safety planning and completion of the Safety Assessment Tool met policy expectations.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

The department is creating a mobile software application that will interface with the MiSACWIS system and allow workers to access immediate physical safety features, remotely enter social work contacts, and document completion of other required investigation activities in real time from the field. The mobile application will improve documentation and worker safety.

Recommendation 9: Improvements needed to ensure compliance with CPL court petition filing requirements.

The OAG recommended that MDHHS file court petitions when required by the CPL.

Response

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP requires verification by the supervisor that petitions were filed when required.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT identifies whether petitions were filed as required by law and policy.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

Recommendation 10:      Significant improvements needed to ensure compliance with CPL-required referrals to county prosecuting attorneys.

The OAG recommended that MDHHS refer all CPS Central Registry cases to the applicable prosecuting attorney when it determines that there is evidence of a child's death, serious physical injury, or sexual abuse or exploitation.

Response

In February 2018, the department issued a communication to clarify documentation expectations.

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP requires verification by the supervisor that referrals were made to the prosecuting attorney when required and the referral was sufficiently documented.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT identifies whether the proper referrals were made and documented.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

The department is creating a mobile software application that will interface with the MiSACWIS system and allow workers to access immediate physical safety features, remotely enter social work contacts, and document completion of other required investigation activities in real time from the field. The mobile application will improve documentation and worker safety.

Recommendation 11:      Consistent completion of required sibling placement evaluations needs improvement.

The OAG recommended that MDHHS complete the required sibling placement evaluation to document how a child remains safe in the perpetrator's care when another sibling(s) has been removed from the perpetrator's care.

### Response

MDHHS will be assessing the needs and practices of field staff to determine the utility of the form and whether alternative methods for documentation are more effective. Until the assessment is completed, the policy requirement will be verified through the following reviews:

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

### Recommendation 12: Improvement needed in obtaining medical examinations for children or documenting reasons when not obtained.

The OAG recommended that MDHHS improve its efforts to ensure that CPS investigators consistently obtain medical examinations for children when certain circumstances exist or document why a required medical examination was not obtained.

### Response

In February 2018, the department issued a communication to clarify documentation expectations.

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP requires verification by the supervisor that adequate documentation exists for when a medical examination is not necessitated and that medical examinations are requested when applicable.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT identifies whether adequate documentation exists for when a medical examination is not necessitated and that medical examinations are requested when applicable.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

The department is creating a mobile software application that will interface with the MiSACWIS system and allow workers to access immediate physical safety features, remotely enter social work contacts, and document completion of other required investigation activities in real time from the field. The mobile application will improve documentation and worker safety.

Recommendation 13:      Significant improvement needed to ensure accurate assessment of risk of future harm to children.

The OAG recommended that MDHHS accurately assess the risk of future harm to children for CPS investigations.

Response

The department is actively working on technology enhancements aimed at increasing the accuracy of tool completion and improving the supervisor's ability to verify accuracy. The first release of the enhancements will be complete in December 2018.

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP requires verification by the supervisor that the Risk Assessment Tool was completed accurately.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT identifies whether the Risk Assessment scores are consistent with documented facts and evidence.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

The department is creating a mobile software application that will interface with the MiSACWIS system and allow workers to access immediate physical safety features, remotely enter social work contacts, and document completion of other required investigation activities in real time from the field. The mobile application will improve documentation and worker safety. Improved documentation within social work contacts will result in more accurate completion of the Risk Assessment Tool and the mobile application will enable workers to enter contacts remotely.

Recommendation 14:      Impact assessments needed to identify and evaluate the effect of MiSACWIS risk assessment functionality changes.

The OAG recommended that MDHHS conduct impact assessments for MiSACWIS risk assessment functionality changes.

Response

The department completed the risk assessment impact analysis in October 2018 and the cases that required further field validation are in the final stages of being amended, as needed. If risk assessment functionality is changed in the future MDHHS will determine if an impact assessment is warranted.

Recommendation 15:      Completion of child and family needs and strengths assessments needs improvement.

The OAG recommended that CPS investigators improve their completion of child and family needs and strengths assessments.

### Response

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT identifies whether the Family and Child Assessment of Needs and Strengths was completed as required.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

### Recommendation 16: Improvement needed in timely completion of CPS investigations.

The OAG recommended that CPS investigators complete CPS investigations within required time frames.

### Response

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP requires verification by the supervisor that the investigation was completed within expected timeframes.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT identifies whether the investigation was completed within 30 days or an allowable exception was granted.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

### Recommendation 17: Significant improvement needed in supervisory oversight of CPS investigations.

The OAG recommended that CPS supervisors improve the effectiveness and timeliness of CPS investigation reviews and the consistency of case consultations with investigators.

### Response

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The additional controls required in the SCP are aimed at identifying errors as they occur and correcting them prior to investigation completion.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

The department has created a team of CPS supervisors to provide ongoing skill development workshops to their peers that will focus on improving local office culture and enhancing supervisors' ability to deliver effective supervision and leadership.

Recommendation 18:      Monitoring of families' participation in post-investigative services needed for all Category III investigations.

The OAG recommended that MDHHS monitor families' participation in post-investigative services to determine whether the families are receiving and participating in the services intended to alleviate the child's risk level for abuse and/or neglect, when applicable. The OAG also recommended that MDHHS seek legislative clarification to validate its interpretation of, and compliance with, Section 8d(1)(c) of the CPL for Category III investigations.

Response

The CPS Program Office is continuing to explore a change in policy requirements for service provision in Category III cases based on recurrence work with the University of Michigan, and MDHHS' Data Warehouse Team, including whether or not particular Category III cases should be opened based on specific risk factors i.e. age, vulnerability, etc.

Recommendation 19:      Clarification needed for properly classifying CPS investigations in which a court petition is filed and subsequent evidence does not support that CA/N occurred.

The OAG recommended that MDHHS clarify its policy and the guidance it provides to CPS investigators for properly classifying investigations when MDHHS files a court petition and the evidence subsequently obtained during the investigation does not support that CA/N has occurred. The OAG also recommended that MDHHS identify misclassified Category I investigations, correct the investigation classification to reflect CPL requirements, and remove the names of any individuals that MDHHS has inappropriately added to the Central Registry as a result of the misclassifications.

Response

The department completed an impact analysis and all cases determined to be high risk for error were reviewed. Based on the review, six cases will be sent to the field to determine if an amendment is necessary and any individuals not meeting the criteria for placement on Central Registry will be removed. This will be completed by December 1, 2018.

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP provides supervisory oversight specifically related to proper classification of Category I cases.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine

policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT provides oversight specifically related to proper classification of Category I cases.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

Recommendation 20:      Improvement needed in appropriately adding confirmed perpetrators to the Central Registry as required by the CPL.

The OAG recommended that MDHHS ensure that it adds confirmed perpetrators of CA/N to the Central Registry when required by the CPL.

#### Response

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP requires supervisors to verify that the investigation was complete, thorough, and accurate to ensure that all individuals are placed on central registry when necessary.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT identifies whether names were properly added to Central Registry.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

Recommendation 21:      The notification process to individuals whose names MDHHS adds to the Central Registry needs significant improvement.

The OAG recommended that MDHHS improve its process for notifying individuals that their names have been added to the Central Registry as perpetrators of CA/N.

#### Response

In February 2018, the department issued a communication to clarify documentation expectations.

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The SCP adds additional supervisory controls to verify that the notifications of due process were sent and documented.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. The CRT identifies whether documentation reflects that the notifications of due process were sent.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.

The department is creating a mobile software application that will interface with the MiSACWIS system and allow workers to access immediate physical safety features, remotely enter social work contacts, and document completion of other required investigation activities in real time from the field. The mobile application will improve documentation and worker safety.

Recommendation 22:      Amendatory legislation needed to add unlicensed childcare providers to the CPL.

The OAG again recommended that MDHHS seek amendatory legislation to add unlicensed CDC Program child care providers to the CPL.

Response

The department agrees that changes are needed to the Central Registry to enable external entities to make improved decisions about volunteerism and employment. The department believes that the system can be dramatically improved by amending the criteria used to determine placement on the Registry, rather than adding unlicensed child daycare program providers. In the legislative session that begins January 2019, the department will seek an amendment to state law to change the criteria for determining which names must be listed on Central Registry.

Recommendation 23:      Changes needed to comply with the CPL when conducting abbreviated CPS investigations.

The OAG recommended that MDHHS require CPS investigators to complete an investigation checklist when conducting abbreviated CPS investigations. The OAG also recommended that MDHHS ensure that local county office directors conduct a review of the abbreviated CPS investigations that do not have a completed investigation checklist prior to closing the investigation.

Response

The Investigation Checklist was created for full CPS investigations, and therefore the items on the Checklist are not applicable to abbreviated investigations. To achieve a heightened level of oversight of abbreviated investigations, policy was updated in July 2016 to require County Director approval of abbreviated investigations. Further, enhanced review requirements have been added to MiSACWIS. Lastly, it is the department's intention to seek an amendment to the Child Protection Law in 2019 to eliminate the Investigation Checklist as the SCP replaces that functionality.

Recommendation 24:      Improvement needed to ensure that MDHHS captures complete, accurate, and valid MiSACWIS data related to investigation commencement.

The OAG recommended that MDHHS strengthen its controls over MiSACWIS commencement data to help ensure that it captures complete, accurate, and valid information that is consistent with established commencement policy.



## Response

MDHHS is strengthening controls of MiSACWIS commencement data through the following case reviews and controls:

A SCP has been developed by a team of policy and field staff in response to the CPS Audit. The Protocol is designed to increase the frequency and effectiveness of supervisor review and approval of investigation activities, improve worker compliance with CPS investigation requirements and verify that required documentation occurred. Technology is being developed to integrate the SCP into MiSACWIS to enable efficient application of the Protocol and a way for supervisors, mid-managers, county directors, and CSA leadership to track practice compliance. The quality of CPS commencement data will be verified using the SCP.

As part of its continuous quality improvement efforts, the department also created a CRT. On an ongoing basis and in each region across the state, the CRT will review a sample of approved CPS investigations to determine policy and law compliance. The CRT process is meant to: identify strengths and weaknesses with investigation compliance, determine the effectiveness of the SCP in catching and correcting errors, create a constant tracking and feedback loop, inform jurisdictions of needed improvements, and create ongoing opportunities to address barriers and improve practice. Commencement data is reviewed in each case for compliance.

A PCR process has been developed to provide independent oversight of CPS Investigation practice in each jurisdiction. Increased oversight through PCR will have two major benefits. First, it will help identify systemic deficiencies and/or problematic local office practices, which will prompt corrective action, such as training and changed procedures, among other things. Second, PCR will identify and highlight areas of best practice which will be shared with, and may be adopted by, other counties.