

Focus INVESTigation: Proposed Revisions to the Tennessee Child Abuse/Neglect Intake  
Assessment Policy and Procedures Manual (Version 2.4)

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### Abstract

Tennessee Department of Children’s Services (2019) defines physical abuse as “non-accidental trauma or physical injury of a child, or failure to protect a child from harm”. The Child Abuse Prevention and Treatment Act (2018) calls for states to utilize a comprehensive approach to address child abuse and neglect, detailing effective components. The policy for child welfare in Tennessee, specifically the outlined procedures printed in the Child Abuse/Neglect Intake Assessment Policy and Procedures Manual (Version 2.4), need to be revised to better address the child abuse that occurs inside of the home. The Focus INVESTigation coalition has been formed for the purpose of revising the investigation procedures in such a way that will require investigators to spend more time investing in reported cases of child abuse/neglect before screening out. The coalition will advocate for change by appealing to local community members and legislators through partnering with local agencies and launching a media campaign, which will occur at the local and state levels. The members of the coalition will also present their case to the Policy Review Committee meeting in December of 2019. The coalition will continue to advocate for change in order to ensure that the safety of victimized children is a priority.

*Key Words:* invest, child safety, child abuse/neglect, coalition, DCS, intake policy

### **Topic of Focus**

The Child Abuse Prevention and Treatment Act (2018), calls for states to utilize a comprehensive approach to address child abuse and neglect, detailing effective components. The policy for child welfare in Tennessee, specifically, the outlined procedures printed in the Child Abuse/Neglect Intake Assessment Policy and Procedures Manual (Version 2.4), need to be revised to better meet this standard. This assessment policy assesses risk of a child in the home and determines whether a child is removed from the home or is allowed to remain after a report of child abuse or neglect is received. The primary areas of focus are the factors that are considered when making this determination and the necessity of adding further scrutiny to ensure the safety of Tennessee's vulnerable children. The policy provides a decision tree (Appendix A) that acts as a flowchart to determine the steps a worker with the Department of Children's Services takes when reviewing a report of child abuse or neglect, ultimately deciding if a child is removed from the home. This process leaves room for subjectivity and misinterpretations that have a direct negative impact on the very children it is assigned to protect. Currently, the policy states that if a child's injury is reported as an accident, the report is automatically screened out, which means that no further action is taken (NCCD, 2015).. There are multiple unintended consequences of this process, such as an increased risk of children being abused or neglected and, in extreme cases, death. Additionally, the investigator who works for the Tennessee Department of Children's Services (DCS) is at risk of a lawsuit if a child endures further harm if left in a house that is unsafe, which then involves the judicial system of Hamilton County as well. The state of Tennessee supports this policy and there are no significant groups or individuals that oppose it, allowing for the likelihood that DCS will express concerns about funding that will be discussed.

A detective with the Chattanooga Special Victims Unit, Tyrone Williams, spoke about his frustration with cases involving children that were not removed from their home after multiple reports of neglect and abuse were filed. In 2017 in Tennessee, 980 children died and of those deaths, 98 children were determined to have died as a result of poor or absent supervision (TN Department of Health, 2019), and 43 children were determined to have died from child abuse or child neglect (Children's Bureau, 2019). In 2018, the Child Death Review Team identified 113 children who had either personal or family history with the Department of Children's Services within the three years preceding their death (TDCS, 2018). The first-hand experience of Investigator Williams and the Tennessee Fatality Report demonstrate the need for change in Child Abuse/Neglect Intake Assessment policy.

### **Researching the Issue**

TN Department of Children's Services (2019) defines physical abuse as "non-accidental trauma or physical injury of a child, or failure to protect a child from harm". Neglect is defined as "a failure to provide for a child's physical survival needs to the extent that there is harm, or risk of harm to the child's health or safety". Sexual abuse encompasses a sexual behavior or situation in which there is a sexual component and psychological harm includes "a repeated pattern of a caregiver conveying to children they are worthless, flawed, unloved, unwanted, endangered". Included in this definition are acts that are not only abusive by themselves but also the failure of a caregiver to act. These definitions are to be considered when working in a position that determines the welfare of a child, specifically by an employee of the Department of Children's Services (DCS).

The TN Child Abuse/Neglect Intake Assessment Policy and Procedures Manual (2015) outlines the screening process that child welfare employees must follow once a report is made to the TN Child Abuse Hotline. The first step involves assessing the report to determine if it will be assigned to DCS as a case and if so, which specific track it will take. There are four options to consider when assessing a report, including an assessment by Child Protective Services (CPS), an investigation by CPS, an investigation by the Special Investigations Unit (SIU), or a referral to Resource Linkage. If a report is referred for Resource Linkage, it signifies that there is no risk of harm to the child, but instead there may be a need for a resource and it must be sent within three days for receipt (Broadnax, 2017). A fifth option also exists which is to screen out the report, and in this case, no further action will be taken.

This procedures manual also includes a decision tree that is utilized to guide the employee in determining the outcome of the report by advancing through crossroads, eventually getting to the final decision. The decision tree poses questions and depending on the answers provided, it uses arrows to advance the user to the next crossroad. For example, the decision tree reads, ‘Is enough information provided to attempt to locate the child?’ If the answer is yes, the user is directed to answer an additional question, but if the answer is no, the report is screened out. Another question on the decision tree reads, ‘Is the incident reported to be accidental?’ Again, if the answer is yes, the user advances to the next question, but an answer of no causes the report to be screened out and no further action will be taken.

So to describe the issue you would need to establish that there is an issue or problem. So to this add statistics or research indicating reports that suggest there are gaps in current decision-making about whether or not to remove child such as child fatality rates of cases

reported to CPS or that have CPS/foster care involvement. So things like decision errors are highlighted by the citizen review panel reports and perhaps the child fatality review for TN.

Child welfare and protection has not always been a “public concern”. According to Fegert and Stötzel (2016), “For much of history, cruelty to children was viewed as a private rather than a societal concern.” There was never a need for intervention because it was socially acceptable for parents or guardians to do whatever they felt worked best for their family.

The turning point in public concern regarding child welfare was in 1875 when a young girl, Mary Ellen Wilson, was removed from her home in New York City as a result of severe abuse from her caregivers (Courtney, 2013). This removal was initiated by Henry Burgh, the leader of New York’s American Society for the Prevention of Cruelty to Animals (NYSPCA). Following Mary’s removal, Burgh worked with others who were passionate about child welfare to create the New York Society for the Prevention of Cruelty to Children (NYSPCC).

Even during the early development and implementation of child welfare, there were countless hurdles to jump through. [NN1] Activists were confronted with challenges regarding government regulations, custody battles, discrimination, dysfunctional families, and welfare reform (Ashby, 1997), which continue to be struggles in today’s system as well. In the early 1990s, Marylee Allen, MSW, described the dangers, risks, and costs of delay to intervene because the issues were not yet considered to be severe enough to require immediate action (Allen, 1991). Other literature argues, however, that children have always been taken care of and the reason why society has negative opinions regarding the welfare system is because the majority of stories published only highlight negative events (Myers, 2008). The argument,

however, is not whether or not children are being protected, but can that protection be improved or enhanced.

Researchers acknowledge that many different service providers offer assistance to children in need, but they encourage those working in child welfare to promote and implement trauma-informed education, practice, and care (Ko, 2008). When it comes to child welfare, trauma will always be a factor that must be understood and considered when moving forward with various cases. Using trauma-informed care is a critical practice because, if it is not utilized, there is a high risk for system-induced trauma that could impact clients in an even more significant way (Connors-Burrow, 2013).

Furthermore, it has been argued that even though various practices and educational experiences should be addressed, a great deal of the struggle that occurs within the child welfare system results from overworked staff (Mahoney, 2019). Social workers have unrealistically large caseloads that make it impossible to give clients the time, attention, and care that they may need. Patrick Mahoney served as a trial court judge for children and families in San Francisco for 13 years and, during his time in the judicial system, he made countless observations of ways in which the welfare system could improve. Beyond the unrealistically large caseloads of social workers, Mahoney also realized that there was a lack of communication and collaboration among service providers. The conclusion that judge Mahoney came to, was that a specific case rarely fits within the protocol of one agency and, in order to provide adequate assistance to children and families, service providers need to consider collaborating with one another (Mahoney, 2019).



While there are various protocols for each agency, most agencies, in some way, have a protocol that involves timing. Julie Davis, program specialist for child welfare, explains a rare case in which a child was removed in a timely manner because it was immediately obvious that the mother was neglecting to care for her child. In a majority of cases, however, Julie explains that timing is not always on the child's side (Davis, 2017). In the case of Mary Ellen Wilson, there were various obstacles that had to be overcome before she was finally removed from her home. This case directly contributed to the establishment of child welfare, as well as the policy implemented for child removal

According to the 2017 Children's Rights Organization's report, in association with UNICEF, 4.1 million reports of child maltreatment were made in the United States which involved more than 7.5 million children. In their report, it is estimated that an average of 674,000 children were victims of maltreatment, approximately 74.9% of those children were victims of neglect.

In Tennessee it is reported that, from July 2017 - June 2018, there were 24,303 CPS Investigations, 2,242 CPS Special Investigations, and 134,757 Child Abuse Hotline Calls (TN DCS, 2018). It is estimated that there are 8,558 children in foster care, and it is expected that 6,679 children enter into state's custody every year (AFCARS, 2017).

Additionally, it is estimated that 34% of American children have some type of encounter with Child Protective Services by the time they reach 18 years of age (Mitchell, 2018). Once a CPS report is made and an investigation has begun the child is considered to be "at-risk" for removal into state's custody.

In the state of Tennessee, the definition of child neglect is “ knowingly abusing or neglecting a child in a way that negatively affects the child's health and welfare.” This vague definition allows for inconsistency between cases by leaving too much interpretation up to the child protective worker’s discretion and judgement. This puts families who live close to the poverty line at a disadvantage and increases the likelihood of their homes being considered neglectful by a child protective investigator, especially one who had never experienced the struggles that poverty brings. The vague definition of neglect can reinforce the false belief held by some which states poverty equals neglect.

The current evaluation process is very subjective, increasing the probability that an investigator could be influenced solely by their personal biases and assumptions, rather than facts. Added to this, the number of cases that CPS workers are often assigned is far above the suggested maximum, as mandated by their agency. This leaves the workers unable to give the proper amount of attention to each case, leaving some cases overlooked, some minimally investigated or some cases to remain untouched. The current assessment process leaves much room for error but is still the uniform evaluation by which CPS workers base their decisions. Many situations that result in a CPS investigation of a family are not as easily defined or explained as a “checkbox”, “yes/no”, black and white evaluation. The current assessment criteria, seemingly, leaves too much room for interpretation. As with many life situations there are more questions to be asked to see the whole picture, as opposed to just going by what the check box supposes you may or may not see.

The Child Abuse and Neglect Intake Assessment policies and procedures for TN needs to experience further revisions to better inform the decision to remove from or keep a child in the home. A research gap identified is the lack of quality assessment within the Child Abuse/Neglect Intake Assessment policy.

According to DCS (2015), the policy directs workers to screen out, or seek no further action, on reports that do not provide enough information to locate a child, rather than provide an opportunity to obtain more information. The existing policy also directs accidental injuries to be screened out, creating an incentive for child abusers to fabricate accident reports to explain a situation. The accident related question on the decision tree seeks a subjective response and instructs the worker to record a negative answer if an accident is not confirmed, but this does not allow for uncertainty and could potentially keep a child in an abusive home. Having vague and subjective policies to evaluate a child at risk can increase the possibility that a child will not receive a quality and comprehensive assessment and will remain in an unsafe environment.

Wherry (2018) stated, “Depending on the timing of the screening relative to the abuse and its circumstances, some parents, preoccupied by their child’s recent disclosure, may also fail to endorse other items which remain salient to the child” (e.g., the death of a grandparent). At times when an adult has received news that a child has been abused, they might forget other important factors that are impacting that child.

Future recommendations include county and state interagency cooperation and communication ( about....) by the use of a database. A database would streamline the process ( of....) and would likely prevent a family from moving around to avoid DCS from removing children from the home. Instead of simply contacting the agency of a family’s location if known,

they would be transferred electronically, rather than terminated. The purpose of revising the policy is to ensure a quality intake assessment is completed.

### **Brand and Support Mapping**

Focus INVESTigation, seeks to promote policy change regarding the investigation of child abuse reports. There is a need for further investment during investigations that result from these reports taking additional steps to ensure that a child is not in any danger, immediate or otherwise, before screening the report out. As the policy currently stands, situations that are claimed to be accidental are screened out and the report is closed, without a future follow-up. Focus INVESTigation will have a two-fold process in that it will require a second employee with DCS to approve the screening out of the report and it will implement a follow-up visit to the home within one month.

### **Forces for Change**

These changes will provide better protection for children who might be in danger, and it also has the potential to protect child welfare workers from lawsuits by having a second person concur with the screen out. If a social worker has a child on his/her caseload that was left in an environment that ultimately leads to further injury or death, the social worker could be prosecuted. Therefore, rather than screening out so rapidly, we are advocating for additional INVESTing in the report review. These changes are outlined on the Force Field Analysis (Appendix B).

### **Forces Against Change**

The Department of Children's Services may oppose this revision to the existing procedure because it has the potential to add cases to DCS workers who are already overburdened. This revision also has the potential to require additional investigators, which will take significant funds from the budget. Another possibility to consider is that members of Tennessee's legislature may privately oppose the revisions due to the additional need for funding, but not publicly oppose it for fear of retribution for not helping abused children, but this conflict may result in any funding requests being denied. Finally, families who had or

believe they had children removed by DCS when it was not necessary could be emotionally charged over this revision. Their concerns need to be addressed proactively by outlining precautions that will be taken.

There are several counter arguments that will be made as it becomes necessary to sway potential supporters to join Focus INVESTigation in calling for these revisions. The CPS employees who investigate child abuse and neglect cases will be more empowered to further investigate cases that may not actually be accidents, although may appear as such, by being able to link the family to resources, or investigating further and by following up within the month. Also, more intensive investigation would mean less missed abuse cases, less child deaths, less children wrongfully taken from parents. CPS employees will have exercised additional caution and will therefore, be more protected from a judgement if sued in court on behalf of a child who suffers further abuse or dies after not being removed. An argument can be made to the Tennessee legislators and DCS executives that if less children are wrongfully removed from their home, it saves the state money and a more intensive initial assessment could mean less resources spent on multiple investigations for families wrongfully reported for abuse/neglect. Lastly and ultimately the most important argument for these revisions is that children who suffer from incidents that are described as accidents, but may in fact be the result of abuse or neglect, will no longer be forced to remain in the home.

### **Forming a Coalition**

The foundation of the campaign began with a conversation with Investigator Tyrone Williams, a Chattanooga police officer who works in the Special Victims Unit. Mr. Williams stated that he sees too many children left in their homes after multiple reports of abuse or neglect have been reported, leading to further abuse and sometimes death. Including employees of the Chattanooga police department into the coalition would be wise because these officers are often first on the scene of seriously abused or neglected children. They would serve as an integral part of the coalition in voicing their passionate pleas of support. Their role would be to describe in detail the tragic, but preventable, cases that they have been called to

and when appropriate, speak before legislators. Leaders of the campaign will assist the officers with the framing of their stories to elicit calls to action as a result of their emotional pleas.

Greater support for the coalition can be reached by partnering with professionals in the child welfare system. Child welfare workers, including social workers, would likely be on board with the policy change in order to better serve more children. Having these frontline workers advocate for the policy change would resonate with the policy review committee. A potential conflict would be an increase in caseloads for CPS workers, which are already beyond the acceptable limits. This conflict makes them a potential 'odd bedfellow'. Therefore, this change would add more work to overwhelmed case managers and investigators. As a result of this, the campaign would benefit from having someone from the coalition who is experienced in grant writing to bring in funds to hire additional employees, particularly social workers specializing in trauma or family and child areas. Also, another member of the campaign will engage in conversations about the concerns of employees from Child Welfare Services.

Reaching individuals in powerful government positions, can also be beneficial in supporting the coalition. State Senator Sara Kyle & House Representative John DeBerry, Jr. of the TN General Assembly are sponsors of legislation in their respective chambers, SB 1422 and HB 0870, that seek to change the required time to investigate a report of child abuse or brutality from 24 hours to immediate, in some cases. Their concern for children in abusive situations is demonstrated by their sponsorship of this legislation and therefore, they could be potential supporters. By including lobbyists or political candidates for TN public office in their Memphis jurisdiction, we may get better access to these legislators. Their role will be to collaborate by engaging with CPS on the change in the policy.

To extend more public awareness and support for the coalition, it is important to network with members and agencies in the community. Children's Advocacy Centers of TN would be a good addition to the coalition because they currently serve vulnerable children and coordinate many systems to provide a safe and comfortable place for children who are removed from their homes. Their role would be to inform the public and gain support. As families receive their services, employees from the center can inform them of the campaign and how they can get involved. Leaders of the campaign will research and coordinate meetings to engage community support as well.

### **Media Campaign**

As police officers are the first responders and investigators for calls about child abuse or neglect, it would be a benefit for the campaign by having them testify to legislators. The goal for partnering with police officers is to document information in order to advocate for change in policy. CPS workers are also in the frontlines and informants on families in determining the removal of a child. Having support from CPS workers is vital as they are the ones that conduct the investigations. They will be able to implement and enforce the updated policy and provide feedback. Once a child is removed from the home, services and resources must be provided. Therefore, collaborating with Children's Advocacy Centers of TN will help and meet families needs during and after the transitions. They may also serve as lobbyists. State Senator, Sara Kyle and House Representative, John DeBerry Jr. of the TN General Assembly are sponsors of legislation in their respective chambers. Both are in favor of reporting child abuse and conducting an investigation immediately in certain circumstances. The goal for them to unite in the campaign is to present and propose the new policy of screening for child abuse.

The residents of Tennessee can show their support by giving their voice through emailing Kim Garland to make the revision to the DCS Child Abuse/Neglect Intake Assessment Policy & Procedures. Another way is by attending the Policy Review Committee meeting on December 17, 2019. Focus Investigation will be presenting at the Policy Review Committee. Some of the newspapers that will be used to help advertise the cause will be newspapers from the four major cities in Tennessee which will be Knoxville News Sentinel (Knoxville), Nashville Post/The Tennessean (Nashville), The Commercial Appeal (Memphis), and Chattanooga Times Free Press (Chattanooga).

Another way *Focus INVESTigation* can gain support is to identify and engage *former* victims of child abuse or neglect who were left in homes after DCS was referred. Careful attention would be given to confirm the person is over the age of 18 and that participating in the advocacy campaign would be beneficial for them and not cause undue distress.

The elected official that would be spoken with about this issue would be Governor Bill Lee. Communication will begin and take place by sending an advocacy letter about the issue that presses me the most which is the evaluation system used by DCS to analyze children that are physically and sexually abused. Also, the campaign will be planning to have a meeting with the governor. For the meeting, there will bring a small group of people that will come along that are also passionate about the issue and some materials such as pamphlets that also contain information on the issues and the struggles surrounding about child welfare. The meeting will be kept short to at least about ten minutes. Concerns about the issue will be shared by talking about how the legislation impacts the community. When the meeting is over, there will set a deadline for a response on the legislation.



The plan for the issue to be monitored will be dependent upon the outcome of the Policy Review Committee meeting that will be held on December 17, 2019. Afterwards, there will be a follow-up with those that are involved in the Policy Review Committee.

In addition to working with various collaterals within the community, the campaign will also be using the media to bring awareness. The avenues that will be used are Facebook, Instagram, Twitter, and local newspapers from four major cities in Tennessee. They are from Knoxville - Knoxville News Sentinel, Nashville - Nashville Post/The Tennessean, Memphis - The Commercial Appeal, and Chattanooga - Chattanooga Times Free Press. These sources will help by bringing awareness of the campaign. The following are the posts from the campaign's sources of media.

### **Newspaper**

According to Julie Davis, Senior Program Specialist at NCCD (National Council on Crime & Delinquency) reported, "The question of safety is more than an immediate concern. Without intervention, there would be no way to know...[a child is safe and] this could happen again with a much worse outcome" (Davis, 2017). In 2017, 55 children, ages 0-17, died from homicide in the state of Tennessee (Tennessee Department of Health, 2019). See appendix [] to view chart from the Tennessee Department of Health, which shows the location that has the highest fatality rate. According to this chart, most of the child deaths happen at home. We must INVEST in children and their families in order to see change happen. Family challenges are inevitable, but death is preventable. For more information on how to get involved, INVEST in a family, and save lives, follow our coalition on Facebook, Instagram, and Twitter at FocusINVESTigation, or email us at FocusINVESTigation@gmail.com.

### **Facebook**

While there are many things that the child welfare system does well, there are also some weaknesses that need to be addressed. One of these weaknesses is their investigation process in situations

of reported child abuse. According to Wadhawani (2019), there were approximately 115 Tennessee children who died in 2018. Some of the children passed away while CPS was actively investigating, while others passed away after the investigation had been closed. A coalition called “Focus INVESTigation” is being created to reconstruct the investigation process in attempt to prevent dangerous situations from slipping through the cracks and, ultimately, to save lives of innocent children. The campaign’s aim is to prevent calls that have been considered accidents and that might actually be children living with abuse or negligence be further investigated and not be screened out. The current policy states that if a call is assessed to be an accident, no further investigation proceeds or follow-ups. For more information on how to get involved and join the coalition, contact us at [FocusINvestigation@gmail.com](mailto:FocusINvestigation@gmail.com) or visit our Facebook page: FocusINVESTigation.

### **Instagram**

On May 22, 2013 an 8-years-old, Gabriel Fernandez was tortured and killed by his mother and her boyfriend because they believed he was homosexual. One of the saddest parts of this heart-breaking story is that reports were made but, according to investigators, there was no evidence of abuse. It is for cases like this one, and children like Gabriel, that a coalition called Focus INvestigation is being created. If you would like to learn more about this coalition and ways you can get involved, follow us @FocusINVESTigation or send an email to [FocusINVESTigation@gmail.com](mailto:FocusINVESTigation@gmail.com). #FocusINVESTigationcoalition

### **Twitter**

Family challenges are inevitable, but death is preventable! Contact your local representatives to improve child abuse investigation! #screenIN Follow our coalition and join the mission! Saving lives, one INVESTment at a time! #focusINVESTigationcoalition

- November 1, 2019 - Social media accounts will be created on Facebook, Twitter, and Instagram to start building awareness. Newspapers in four major cities in Tennessee will be contacted:

Knoxville - Knoxville News Sentinel, Nashville - Nashville Post/The Tennessean, Memphis - The Commercial Appeal, and Chattanooga - Chattanooga Times Free Press).

- November 15, 2019 - Newspaper article will be submitted to publishers and social media posts for Instagram, Twitter, and Facebook will be posted.
- December 1, 2019 - Social media posts will be reposted
- December 10, 2019 - Contact Kim Garland, who is involved in DCS Investigations, and make arrangements to present the case/coalition at the Policy Review Committee meeting on December 17, 2019.

### **Advocacy Plan**

A revision needs to be made to The Tennessee Child Abuse/Neglect Intake Assessment policy and procedures that would require a second child welfare worker to review a reported case of child abuse or neglect before it could be screened out. This revision must also require cases that are reported as accidents to receive at least one home visit by a worker from The Department of Social Services within one month of the initial report. Furthermore, when an incident is identified as an accident, the child welfare worker needs to have the option of forwarding the report to be assessed by Child Protective Services, refer it for resource linkage *or* screen it out, instead of the current procedure of screening accidents out.

### **Effective Advocacy Strategies**

**Social media.** Social media is instrumental in bringing attention to non-profit advocacy plans, bearing in mind that there is an overabundance of causes and people typically pay attention to only a small number of issues at one time (Guo & Saxton, 2017). That being said, social media is inexpensive, interactive and has the ability to quickly reach large numbers of people, therefore, making it a critical component of advocacy campaigns (Guo & Saxton, 2017). Depending on how much an organization speaks on social media, the size of the audience it

reaches and the message it puts out determines the extent to which it will be heard (Guo & Saxton, 2017). Another element in utilizing social media effectively involves targeting a specific audience due to the personal connection the audience is likely to feel (Guo & Saxton, 2017). Twitter allows customers the ability to target users by utilizing the “@USERNAME” feature before the message, making the message appear more personal, as if it was not broadcast to a large audience (Guo & Saxton, 2017).

**Empirical evidence and emotion.** Mosley and Gibson (2017) suggest that two elements must be present to be effective in gaining support from legislators and standing out among the many advocacy groups competing for their attention. These elements include using empirical evidence to persuade them of the effectiveness of the campaign’s proposal, fiscally and strategically, as well as narrative evidence to appeal to their emotional side. By demonstrating that the proposal is proven effective, fiscally responsible and important, the likelihood of action by the legislator is increased (Mosley & Gibson, 2017). Mosley and Gibson (2017) further suggest that narratives and personal stories are effective in providing motivation and securing commitment to the campaign by lawmakers.

**Narratives.** While Crow and Jones (2018) also tout the effectiveness of narratives in advocacy plans for public policy, they shed light on two common pitfalls of using narratives, citing evidence that the knowledge fallacy and empathy fallacy must be acknowledged. The knowledge fallacy brings opposition to the belief that most people don’t understand the complexities of policy and experts are needed to educate them on the important aspects, and then once educated, people will accept the experts’ opinion as their own truth (Crow & Jones, 2018).

The empathy fallacy debunks the idea that simply presenting an emotional story to an audience will be successful in generating human empathy, rather recognizing that individuals consider these emotional appeals through their own biases, not universal truth (Crow & Jones, 2018).

Once goals, audience and purpose have been established, Crow and Jones (2018) outline five necessary steps to narrative design that are effective in public policy, using language that surrounds the theater. First, telling a story is not enough, as the story that is conveyed must be a good one, filled with emotional tugs and accurate facts. They describe the second step of setting the stage as an opportunity to gather knowledge by considering existing literature about the policy topic and understanding the beliefs and values that will motivate the audience. During this step, the most important empirical evidence must be extrapolated from the research and included in the storytelling in an inspirational manner, allowing the story to reach the audience on an emotional level. Step three establishes the plot, which describes the causes of the problem and also introduces the characters involved, referring to the people being harmed by it. Step four elaborates on the cast of characters, by showing sympathy toward the victims and emphasising the solution, referred to by Crow and Jones (2018), as the heroic action. By emphasising the solution in this way, the opposition is downplayed, contributing to the effective strategy. Villains are also a crucial component to the story as they supply a place to put blame. The final step is conveying the moral of the story which translates to the call for action. Effective narratives capture the attention of the audience and convey the plight and relevance of the issue, causing concern and motivation to accept the details that follow (Crow & Jones, 2018).

**Child welfare reform in Georgia.** Lyons, Beck and Lyons (2011) detailed the procedure of a multidisciplinary coalition in Georgia that formed in an effort to improve the pay, education and training of caseworkers from Child Protective Services (CPS), decrease caseloads and advocate for increased pay and status for employees who hold social work degrees. This coalition acted when the public, policy makers and media were emotionally outraged over the death of a child in the care of CPS. The focus of the change being sought was on a policy that had a direct effect on the tragedy, in this case, overloaded caseloads and low pay and education of caseworkers in Georgia's CPS. Networking with professional groups and other groups involved in child welfare education, policy and practice was instrumental in generating social capital. Once established as a coalition, the agenda for realistic and attainable change was agreed upon, focusing on hiring more caseworkers, reducing caseloads, increasing pay and working conditions, improved education and training, increased resources for foster care and acknowledgement of the importance of a social work degree. Constant communication that was precise, clear and coordinated with the media and public was instrumental in achieving success because it designated power to their coalition by keeping the issue in the spotlight and spreading their understanding of the problem to the public. Part of the coalition's understanding of the problem included the lack of existing policy enforcement and funding from politicians, and this was highlighted in segments on major television shows and articles that appeared in well-known magazines, portraying them as the villain and motivating them to make effective changes. The policy was formulated during a retreat attended by coalition members and influential advocates, increasing social capital and resulting in a judge delivering the letter of proposed changes

directly to the governor. The letter was then published on the internet and gained numerous digital signatures.

The efforts to improve the workforce and working conditions at CPS in the state of Georgia proved successful on all fronts. The increased funding, in excess of \$30 million, allowed for new hires which lowered caseloads, increased salaries, recognized and paid more for employees with social work degrees, provided additional education and training for case managers, and improved foster care placement protections. These results called upon social workers to develop proactive advocacy campaigns, instead of knee-jerk reactionary ones, in order to produce consistent, planned and strategic outcomes for children in the welfare system (Lyons et al., 2011). Included in these campaigns should be a well thought out plan, potential stakeholders who will likely partner on the project and a media strategy to increase social and financial capital (Lyons et al., 2011).

### **Campaign Involvement**

The target population that *Focus INVESTigation* seeks to help are children in Tennessee who are at risk of being in abusive situations and would need protective services from The Department of Children's Services (DCS). In addition to being minors, these children have at minimum, been referred as possible victims of child abuse or neglect, qualifying them as a vulnerable population. As such, these children need protection from responsible and professional adults working in child welfare as well as those advocating on their behalf. Therefore, the involvement of children who are currently being or at risk of being abused or neglected would be irresponsible and detrimental to the well-being of this population. However, the plights of these children could be used to achieve the goals of Focus INVESTigation by telling their stories to

potential coalition members, the public, state and local legislators, and DCS executives, while shielding their identities.

It could however, be acceptable and helpful to engage *former* victims of child abuse or neglect, especially those who were left in homes after DCS was referred. Careful attention would be given to confirm the person is over the age of 18 and that participating in the advocacy campaign would be beneficial for them and not cause undue distress. Since these individuals are also of a vulnerable population, retraumatization is a risk that would need to be addressed before involvement with Focus INVESTigation occurred. Consideration would also be given to the families of these individuals, as their lives may be negatively affected by their exposure as well. On the positive side, involvement with this advocacy campaign could lead to greater visibility, more exposure of the issue and ultimately, more support for the revisions to the current Tennessee Child Abuse/Neglect Intake Assessment policy and procedures that Focus INVESTigation seeks.

The plan of this coalition is to engage community members to get involved with the advocacy campaign and use their strengths to promote the mission of Focus INVESTigation in order to be most effective in help the vulnerable children in Tennessee. In order to do this, the *Focus INVESTigation* coalition will host informational sessions in communities around Tennessee and discuss ways in which people can get involved and contribute to the advocacy campaign by spreading awareness, generating funding, and gaining crucial support. These informational sessions will not only increase awareness about the issue, but they will also increase the number of donors, volunteers, supporters, and overall involvement in the campaign.



**Opposition**

The biggest anticipated opposition to this coalition would be the Department of Children's Services, as executives and employees may oppose revision to the existing procedure because it has the potential to add cases to DCS workers who are already overburdened. There are several ways to overcome this concern, and a reallocation of existing funds or a shifting of job responsibilities could resolve the issue. Since Focus INVESTigation will bring attention to the need to help Tennessee's vulnerable children through the advocacy campaign, more public funding and private donors would be sought to pay for additional DCS employees. In an attempt to address this opposition, members of the *Focus INVESTigation* coalition would put this on the agenda of their presentation at the Policy Review Committee on December 17, 2019. Because this meeting is already in place to review current policies, it would be a perfect time to address the issues of overloaded caseworkers

**Summary of Campaign**

The main points to be discussed with DCS executives and elected officials if given the opportunity would be the need to further safeguard Tennessee's vulnerable children by revising the process of screening out child abuse and neglect reports and providing further measures for incidents described as accidents. Focus INVESTigation would point to the 2017 statistics that shows Tennessee screened out 42% of its referrals, while Florida and Georgia each screened out less than 28%. The fact that 113 children who died in 2017 were known to DCS within three years preceding their deaths demonstrates the crucial role that DCS workers play in the lives of these children and the impact they have on protecting them (TDCS, 2018). Further statistical data is provided on the Fact Sheet (Appendix ?) and this would be presented as time allowed. The

case to revise the current Tennessee Child Abuse/Neglect Intake Assessment policy and procedures will be made at the Policy Review Committee meeting on December 17, 2019. The next step will be determined by the outcome of this meeting, but it will likely be to follow-up with those in the Policy Review Committee.

### **Conclusion**

The Child Abuse and Neglect Intake Assessment policies and procedures for Tennessee need to experience further revisions to better inform the decision to remove from or keep a child in the home. The Focus INVESTigation coalition has been formed for the purpose of revising the investigation procedures in such a way that will require investigators to spend more time investing in reported cases of child abuse/neglect before screening out. The current evaluation process is very subjective, increasing the probability that an investigator could be influenced solely by their personal biases and assumptions, rather than facts. There are countless children whose lives have been lost due to a lack of investment in the cases. The proposed policy revisions have the potential to save lives and positively impact countless children.

Although the appeal for change is one that could positively impact the lives of countless children, the Focus INVESTigation coalition is aware that there may be opposition to the proposed policy revisions. One of the main reasons for this opposition could be the potential for increased caseload for DCS workers. However, the coalition is fully prepared to address this issue and ensure that the social workers, as well as the children, are being taken care of. The goal of this coalition is to ensure the safety of victimized children through proper investigation procedures. There is a dire need for change, and that change needs to start now.

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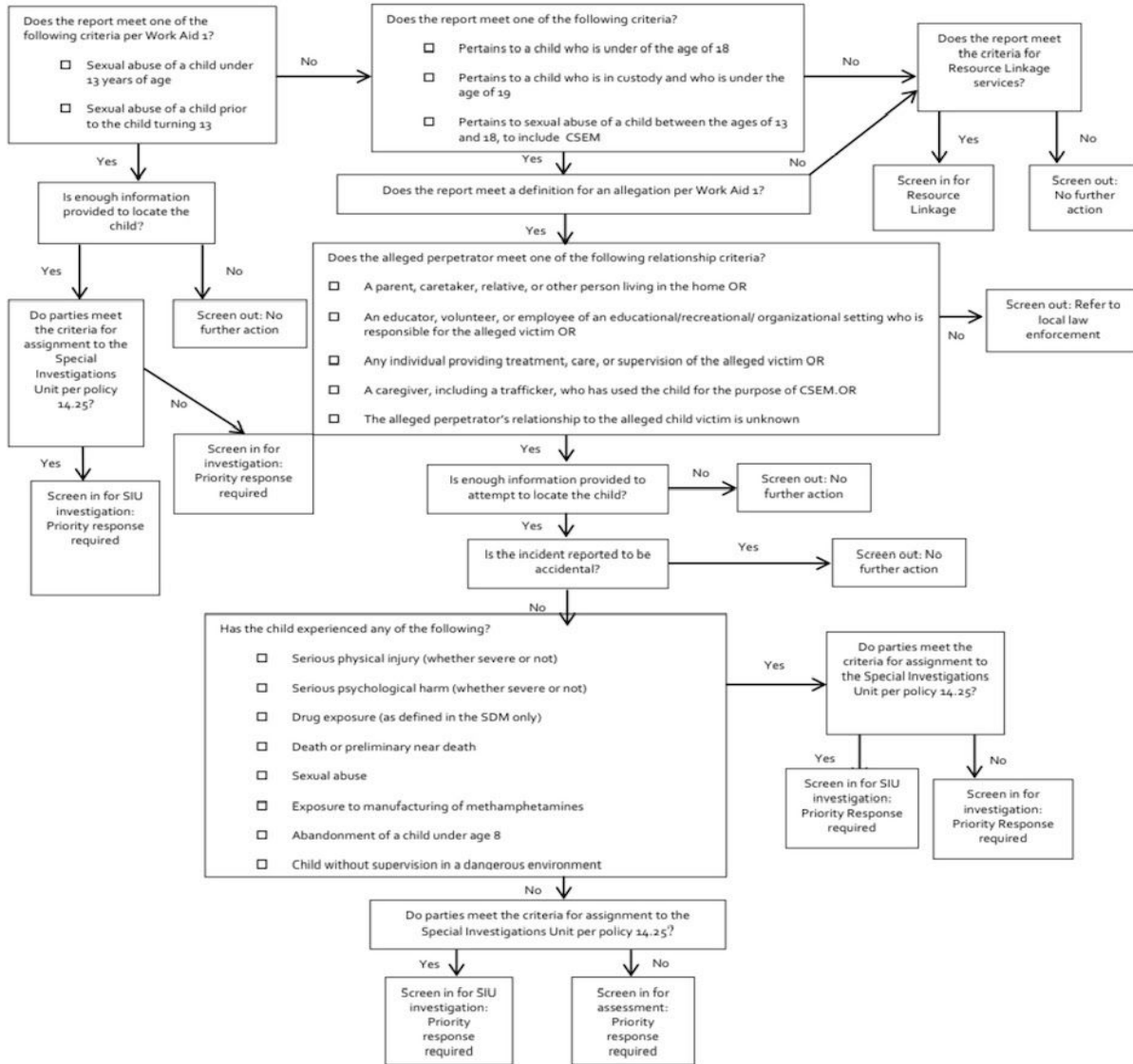
Appendices

Appendix A: Child Abuse/Neglect Intake Assessment Policy and Procedures Decision Tree

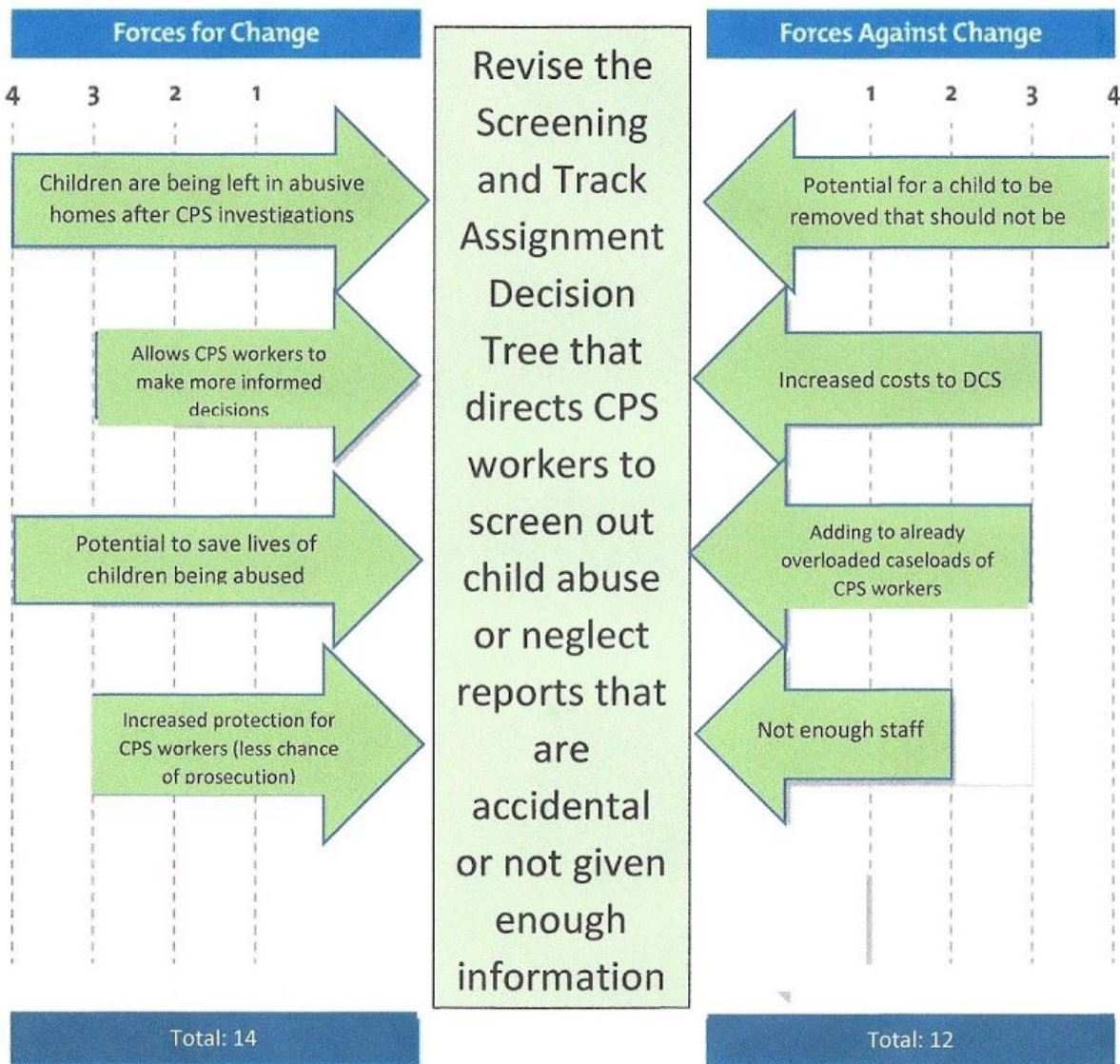
SECTION 1. SCREENING AND TRACK ASSIGNMENT

Part A. Screening and Track Assignment Decision Tree

Complete the decision tree for the allegation(s) reported. Refer to DCS policy, Work Aid 1, and SDM definitions. When the report contains multiple allegation types, the assigned track is based on whether or not any one of the allegations meets the criteria for a CPS investigation.



**Appendix B: Force Field Analysis**



Appendix C: Fact Sheet

<p>Policy Brief: Focus INVESTigation</p>	<p>Revision to TN Child Abuse/Neglect Intake Assessment Policy &amp; Procedures</p>	<p>October 2019</p>
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**Introduction:**

Across the United States in 2017, an estimated 674,000 children were abused or neglected, and approximately 1,720 children died as a result.<sup>2</sup> In Tennessee, 980 children died and of those deaths, 98 children were determined to have died as a result of poor or absent supervision<sup>6</sup> and 43 children were determined to have died from child abuse or child neglect.<sup>1</sup> In 2018, The Child Death Review Team identified 113 children who had either personal or family history with the Department of Children’s Services within the three years preceding their death.<sup>2</sup> Focus INVESTigation calls for child welfare workers to spend more time on the investigation of each reported case of child abuse and neglect before screening cases out and therefore, closing them. There are several factors that contribute to some cases not receiving the appropriate time and dedication, including overworked and overloaded caseworkers and that issue is currently being addressed with pending legislation. It is the intent of Focus INVESTigation to reform the current procedures manual that dictates which cases get screened out in order to give some families more services and visits, preventing some children from being left in abusive and unsafe homes. Specifically, the option of screening out a case of reported child abuse or neglect needs to have a second person from the Department of Children’s Services agree that the case does not warrant any further services or visits and should in fact be screened out. By requiring a second set of eyes on the case, it gives the child or children involved another chance to get help if needed. Focus INVESTigation also calls for incidents of reported abuse or neglect that are described as accidents to have at least one more visit by a worker from The Department of Social Services within one month. Currently, the flow chart on the decision tree screens out cases if they are accidents. The children of Tennessee need further protections and a revision to the Child Abuse/Neglect Intake Assessment policy and procedures would do just that.

**Current Policy:** When a report of possible child abuse or neglect is received, child welfare workers follow the procedures outlined in the Tennessee Child Abuse/Neglect Intake Assessment Policy and Procedures Manual. The manual is created by the TN Department of Children’s Services, which is currently led by Commissioner Jennifer Nichols. The Child Abuse/Neglect Intake Assessment Policy and Procedures:

- ✓ exists as a screening tool to guide child welfare workers through an investigation and determine whether a child should be removed from the home or should be allowed to remain<sup>3</sup>
- ✓ provides specific steps that need to be satisfied before a child can be removed from the home
- ✓ includes a decision tree, that identifies the flow an investigation should take
- ✓ determines the outcome of the investigation, resulting in:
  - an assessment by Child Protective Services<sup>4</sup>
  - an investigation by Child Protective Services<sup>4</sup>
  - an investigation by The Special Investigations Unit<sup>4</sup>
  - a referral to Resource Linkage<sup>4</sup>, which signifies that there is no risk of harm to the child, but instead there may be a need for a resource<sup>5</sup>
  - a screen out, in which no further action will be taken<sup>4</sup>

*“DCS responded at least 15 times to allegations of child abuse or neglect involving the family during a 14-year period”*

Just before 7 a.m. on April 27, 2018, police responded to a 911 call about a 1 year-old baby who wasn’t breathing. When police and emergency workers got to the apartment, they said the home was in complete ‘disarray’. There were ‘piles of clothes observed to be scattered, roaches throughout the room and wall’ and ‘several white pills in the bedroom where the crib was located, lying on the floor.’ Emergency workers performed CPR and transported the baby to a hospital, where efforts to resuscitate him failed. An autopsy revealed the cause of death was a chronic viral infection complicated by strep throat. But the details laid out in the 87-page case file raise questions about whether any child would be safe in the home.



**Appendix D: Policy Brief**

<p>Policy Brief: Focus INVESTigation</p>	<p>Revision to TN Child Abuse/Neglect Intake Assessment Policy &amp; Procedures</p>	<p>October 2019</p>
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**Shortcomings of Current Policy:**

One reason that a case would be screened out is if the incident in question was an accident. In 2016, Tennessee reported that 175 children died from accidents, defined as an injury or poisoning without intent to cause harm or death.<sup>6</sup> The process of screening out cases reported to be accidents leaves no opportunity to educate the caregiver which could prevent future accidents, does not account for possible neglect as a cause of the accident and does not allow for follow-up, especially if the story turns out to have been fabricated. It simply closes the case and leaves the child in the home with no additional resources or preventative measures.

Another reason reports of child abuse or neglect get screened out is because the child cannot be located. While it is true that sometimes enough information is not provided from the initial report, a simple internet search or a few phone calls can pinpoint the location of the child.

**Revision Recommendation:**

Tennessee determined that 240 children died in 2016 of injuries resulting from external factors.<sup>6</sup> Tennessee Department of Health agrees that some deaths of children are preventable and could be avoided with adequate care and supervision by the child’s caregiver.<sup>6</sup> A revision should be made to The Tennessee Child Abuse/Neglect Intake Assessment policy and procedures that requires a second child welfare worker to review a case before it can be screened out. This revision should also require cases that are reported to have been an accident to receive at least one more visit by a worker from The Department of Social Services within one month. Furthermore, when an incident is identified as an accident, the child welfare worker should have the option of forwarding the report to be assessed by Child Protective Services, refer it for Resource Linkage or screen it out.

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<sup>1</sup> Children’s Bureau. (2019). Child maltreatment 2017. Retrieved from <https://www.acf.hhs.gov/cb/research-data-technology/statistics-research/child-maltreatment>

<sup>2</sup> Tennessee Department of Children’s Services. (2018). Child death review: 2018 annual report. Retrieved from [https://files.dcs.tn.gov/childsafety/2018/2018\\_CDR\\_AnnualReport.pdf](https://files.dcs.tn.gov/childsafety/2018/2018_CDR_AnnualReport.pdf)

<sup>3</sup> Tennessee Department of Children’s Services. Annual Report, Annual Report1–40 (2018). Retrieved from [https://www.tn.gov/content/dam/tn/dcs/documents/quality\\_improvement/annual-reports/Annual%20Report%2011-2018.pdf](https://www.tn.gov/content/dam/tn/dcs/documents/quality_improvement/annual-reports/Annual%20Report%2011-2018.pdf)

<sup>4</sup> Children’s Resource Center. (2015). Child abuse/neglect intake assessment policy and procedures. (Version 2.4). Retrieved from <es/chap14/ChildAbuseNeglectIntakeManual.pdf?fbclid=IwAR3V0DtO45LUlyZF0eCVQ17xoHPyjirEdyurOVgchXWPZ6dQbl28GRYkp5Y>

<sup>5</sup> Broadnax, C. (2017). DCS education. TN Department of Children’s Services. Retrieved from [http://kocortho.com/files/1214/9789/1780/DCS\\_Education\\_School\\_Nurses.pdf](http://kocortho.com/files/1214/9789/1780/DCS_Education_School_Nurses.pdf)

<sup>6</sup> Tennessee Department of Health. (2019). *Child fatality annual report: Understanding and preventing child deaths in Tennessee*. Retrieved from

<sup>7</sup> Wadhawani, A. (2019). DCS investigated 186 child deaths last year; most children were known to the agency. *Nashville Tennessean*. Retrieved from <https://www.tennessean.com/story/news/2019/05/05/tennessee-childrens-services-death-investigations-2018/3055436002/>

Days before the boy’s death, DCS opened an investigation on the family based on allegations of a lack of supervision, and physical and psychological abuse, according to the file. A day before he died, a caseworker stopped by the family’s home ‘but no one would come to the door.’ It was the second time in a month that DCS had been called in. Caseworkers investigated an allegation that the children weren’t being properly supervised on April 5, 2018. “No Services Needed,” the caseworker wrote. In total, DCS responded at least 15 times to allegations of child abuse or neglect involving the family during a 14-year period prior to the child’s death. The agency took an additional 15 reports they listed as ‘screen outs’ – reports of abuse or neglect that the agency did not pursue. After the boy’s death, DCS removed three other children from the home and placed them with grandparents.<sup>7</sup>

Appendix ? : Positional Map

Appendix: Homicide Chart

**Figure 18. Homicide Deaths  
for Children Ages 0-17 Years by Victim's Location  
Tennessee, 2017**

