



DCF's Data Systems Actively Harm Children

“DCF’s data system was launched in the early 1980s, prior to the launch of the world wide web. Vermont has been asking our DCF Family Services staff to use 11 separate systems and 30+ Excel spreadsheets to support their work and reporting requirements. We know that this practice is time intensive, increases the likelihood of human error, and is cumbersome. We also know that the lack of a comprehensive data system that communicates across silos disadvantages us and the children, youth, and caregivers in our child welfare system. We are currently unable to speak confidently about trends in outcomes for the system that is responsible for the well-being of some of Vermont’s most vulnerable children and youth.”- Vermont Citizen’s Advisory Board, 2021.¹

Anyone who works closely with the Family Services Division of DCF (“FSD”) knows that the digital systems FSD uses to take notes, track family demographic data, prepare for court, pay bills, and perform a host of other basic functions of child welfare, is obsolete. A recent media story gave an overview.² As one DCF official who is an expert on the current system put it, “DCF does not have a case management system, it has a data system.”³ Unfortunately, even as a data system, it is a failure.

The two main databases DCF currently uses to track demographic and placement information for children in its custody, SSMIS and FSDNet, date from 1983 and the 1990s, respectively.⁴ DCF now has the oldest child welfare data system in the nation. When the federal Administration for Children and Families (“ACF”) first required states to standardize their systems in 1993, it offered a 90% federal match to support states in upgrading. Vermont chose not to take the offer. In 2016, the ACF upgraded its required data protocol to the current iteration, called the Comprehensive Child Welfare Information System (“CCWIS”), offering a 50% match.⁵ As of late 2023, at least 46 states, the District of Columbia, and Puerto Rico have implemented or committed to implementing CCWIS.⁶ Vermont is still not one of them.

It is challenging to measure the full impact of the State of Vermont’s continual reliance upon DCF’s data system. There is no control group to compare the current system with what Vermont’s child welfare systems would look like with a functional system. The data issues are circular—the harder it is to use the system, the worse the system becomes, and the harder it is to see what is going wrong. The confidentiality of the system as a whole means that the extent of the crisis is kept out of sight of the legislature and the governor. But the signs are hidden in plain sight: the lack of



sufficient prevention services for children, youth, and families, the “staffing crisis,” the high rate of children coming into care, the clogged court system. The annual choice not to modernize the data system makes it easier for DCF to balance its budget each year, but only because it shifts the costs onto the children, youth, and families DCF is supposed to serve. It is not that we are saving money by continuing to prop up our obsolete system—we are simply making it harder to calculate its cost. The approach Vermont is using is not unlike the financial practices that brought on the Great Recession: the true risks driving the market were masked for years—then they collapsed all at once. In retrospect, the signs seemed obvious.

To measure the fiscal impact of DCF’s system, it helps to think globally. The lack of a modern case management system touches nearly every aspect of the DCF Family Services Division’s \$140 million budget for Fiscal Year 2024, large parts of DCF’s \$65 million administrative budget, most of the \$3.9 million secure residential treatment budget, and a host of other related budgetary effects too numerous to detail here, including parts of the budgets of the Office of the Defender General and Judiciary.⁷ It is not an exaggeration to say that FSD’s current data systems are connected to over \$200 million in DCF’s annual budget—most of which comes out of the General Fund.⁸

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But the most important impacts of the State of Vermont’s decision to maintain an obsolete system year after year go beyond budgetary. They implicate the very core of DCF’s mission.⁹ Think of almost any daily activity of DCF-FSD, and the data system is connected. As outlined throughout this Report, DCF cannot create a safe and stable high-end system of care without a new case management system. It cannot bring racial justice to its programs without a new case management system. It cannot reform the substantiation system without a new case management system. It cannot “prevent another Woodside” without a new case management system. It cannot improve worker morale without a new case management system. And most importantly, it cannot keep the children in its care safe without a new case management system.

Efforts to articulate the necessity of a new system over the past decade have come from within DCF and externally. Voices for Vermont’s Children and the Vermont Citizen’s Advisory Board have probably been the most vocal advocates outside DCF. The push to fund a new system has now gone unanswered for so long that DCF no longer includes a new system as a line item in its budget. There appears to currently be approximately \$4 million set aside for a new system in DCF’s budget



using carryforward funds—meaning that DCF must ask to keep these funds each year and regularly risks their reallocation to other departments or projects.¹⁰ It appears that DCF is now considering funding the new system incrementally, because they “cannot afford” to bring in a comprehensive system all at once. An incremental approach would mean laying the new system *on top of* the current one, in stages, over multiple years, with no guarantee of its actual completion. New systems are certainly not cheap, but the cost of maintaining the current system—and especially of an incrementalism that would mean *multiple* systems for years of transition—is far greater. If a new system is truly brought on incrementally, the OCYFA expects to see a notable rise in DCF-FSD worker vacancies.

We call on officials at the highest levels of Vermont government to comprehensively address this issue and fully fund a new CCWIS system for Vermont.

We believe that the OCYFA is well-positioned to make the case for a new CCWIS system for DCF. We are non-partisan, child-centered, and part of state government yet independent. We have access to records and information that other entities do not. And we are connected to the technical expertise necessary to measure the problem and support its remedy. We call on officials at the highest levels of Vermont government to comprehensively address this issue and fully fund a new CCWIS system for Vermont.

In the following section, we have broken down the ways in which the data system impacts Vermont into the following categories, each with its own section:

1. Protecting child safety and well-being and ensuring equity;
2. Tracking AHS and DCF outcomes, complying with federal requirements, managing and drawing down federal funds, and improving Vermont’s child welfare systems;
3. Ensuring that Vermont’s decisionmakers—courts, legislators, and administrative officers—have the information they need to make critical decisions;
4. Supporting front-line DCF workers; and
5. Preventing crises like cyberattacks, lawsuits, billing errors, and federal audit penalties.

Protecting Child Safety and Well-Being and Ensuring Equity

Imagine a modern hospital serving thousands of patients without a functional electronic health record database. The hospital generally knows the names and ages of those it serves, but it must seek out individual doctors, nurses, and staff to ask what a patient’s treatment needs are. To find the room number for an admitted patient, staff must track down a paper chart at someone’s desk.



There is no searchable system to see what treatment a patient has received or what medications they are allergic to. When hospital officials are asked why they don't have such a system, they say they can't afford it.

Or think of a bridge. Every day, 40 school busses, each carrying 50 children, drive over the bridge. The bridge is old: its guardrails are only four feet high and there is no shoulder. The road is filled with potholes. Parents and bus drivers have been complaining for years that the kids traveling over the bridge are unsafe. But the state says it just doesn't have the money to fix the bridge. Nothing bad has happened, and there are other needs. It's cheaper to just put it off a little longer.

These metaphors may seem outlandish, but we believe they are reasonable analogies for the State of Vermont's current approach to DCF's child welfare information systems. When it comes to a full picture of the needs of the children in its care, DCF is essentially blind. It cannot reliably measure the needs of its children, their diagnoses, their allergies—even, sometimes, their location.¹¹ It cannot assess the conditions of placement of the children in its care. In an emergency, DCF does not have critical information at its fingertips that could be lifesaving. While these vital pieces of information are generally documented somewhere, the information is often scattered across multiple locations: paper case files, excel spreadsheets, unwieldy screens in the current system. These sources are disconnected, redundant, difficult to access, and subject to human error and typos. If you are wondering why something terrible hasn't already happened, consider the negative outcomes FSD-involved families and staff have experienced in recent years, and whether these could have been averted by a system that allows for effective communication, timely service referrals, and streamlined functionality directly related to safety.

On a systems level, DCF cannot analyze the community supports, treatment, and services the children in its custody need. It cannot accurately track, on a quantitative level, when children in foster care start services and when those services stop—a critical function for treatment and federal funding. It cannot measure the four corners of the high-end system of care discussed in this Report. It cannot craft a high quality—and least restrictive—residential system of care.

Without a reliable case management system, DCF also cannot engage in authentic equity justice work. It cannot adequately self-analyze to avoid unnecessary removals, identify kin who might prevent removal, or reliably track disability, religion, tribal identity, race, or sexual orientation. Without a new information system, DCF's current algorithmic tools, such as the Structured Decision-Making tool ("SDM"), introduced to mitigate bias, do the opposite. They become simultaneously more inaccurate and disproportionately powerful. These tools then begin to measure the deficits of the system itself rather than the safety of children and protective capacities of parents they are designed to assess.¹²



The OCYFA has been hearing about and discussing the data system in various forums since the Office came online. The reactions have varied. For stakeholders well familiar with child welfare in Vermont, the response has often been deflated, essentially “we’ve been asking for years and nothing has happened.” We have also heard the relativism of “Do you know how many other AHS systems need fixing?!” A few community members have even become impatient, wondering aloud why the OCYFA doesn’t work on more fundamental issues, such as the racial disproportionality of children in foster care. A common feeling is, “Why spend millions of dollars on a system for DCF when families need so much support?”

Those feelings are understandable, and they are not wrong. As discussed above, families *do* need support. There *are* other issues that need funding.¹³ But working on the new CCWIS system *is* racial justice. It *is* family support. It *is* child safety. And it *is* innovative new programs. It is a predicate to almost any equity initiatives in Vermont’s child welfare and juvenile justice systems. Addressing the problem is perhaps the most efficient path to systemic change in child welfare in Vermont. Not addressing it amounts to continued self-sabotage. If policymakers really want to compare the relative urgency of the various data systems in need of upgrading, we welcome the analysis. We see no other initiative that has the cost-benefit upside of CCWIS.

Intentional or not, Vermont’s continual refusal to address this clear and obvious problem sends a loud message to children, working class Vermonters, and communities of color that they just aren’t important as maintaining the status quo and balancing the budget.

Tracking AHS and DCF Outcomes, Complying with Federal Requirements, Managing and Drawing Down Federal Funds, and Improving Vermont’s Child Welfare Systems

All State child welfare agencies are subject to periodic federal audits and reviews, including those associated with Title IV-E programs, the Adoption and Foster Care Analysis and Reporting System (“AFCARS”), the National Child Abuse and Neglect Data System (“NCANDS”), the National Youth in Transition Database (“NYTD”), and others. Vermont’s audit findings have consistently noted the significant deficiencies of its data system, which in some cases are directly tied to errors and resulting sanctions. For example, any foster care maintenance expenses for which FSD claims Title IV-E reimbursement must be supported by documentation demonstrating that expenditures were made on behalf of an eligible child, for allowable services. If a payment is made for a child’s foster care placement during a time that they were in unlicensed care, or when they did not meet IV-E eligibility, this could result in an audit finding and require the State to repay funds and penalties to the federal government. These kinds of errors are unfortunately common due to the current information system’s inability to accurately collect and reflect the necessary up to date information.¹⁴



DCF is currently unable to reliably meet the requirements necessary to receive and/or maximize federal Title IV-E reimbursement in several areas. This manifests through errors and audit findings mentioned above, as well as the missed opportunities to draw down Title IV-E funding for foster care and prevention payments discussed throughout this Report. DCF is expending scarce General Fund dollars on expenses that could be reimbursed by federal funds if implemented in accord with federal requirements. The ability to meet the applicable requirements hinges in large part on a functional data system to accurately collect and report details related to IV-E eligibility, placement, service delivery, and payments. Unfortunately, DCF is unable to reliably meet these requirements, and therefore is unable to leverage federal funds in these areas.

Group care payments comprise potentially the most significant lost federal reimbursement due in part to DCF's data system inadequacies, which appears to have resulted in the annual addition of a line item added to the Department's budget beginning in Fiscal Year 2023 (July 1, 2022-June 30, 2023) to make up for these lost funds.¹⁵ This number is over \$1,000,000 for Fiscal Year 2024 (July 1, 2023-June 30, 2024) but is likely to increase in future years.¹⁶ This is the result of the federal Family First Prevention Services Act, discussed above in [Section 2.3](#), which incentivizes family-based placements for foster youth in part by limiting Title IV-E reimbursement for any group care settings to 14 days unless the facility is a Qualified Residential Treatment Program (QRTP).

Vermont has not yet elected to move forward with transitioning its group care providers to Qualified Residential Treatment Programs (QRTPs), a decision in part due to the costs and barriers related to the lack of an updated data system. Since approximately October 1, 2021, DCF has been unable to claim federal reimbursement for any foster care payments made to group care providers for stays beyond 14 days, and these costs are borne fully by state general funds. When paired with the fact that DCF has recently increased rates for these providers, the fiscal impact is significant and will likely increase over time.

The result is a precipitous drop in DCF's Title IV-E quarterly revenue from a high of about \$184,000 in the third quarter of calendar year 2020, to a low of \$11,500 in the fourth quarter of 2022, when the QRTP requirement went into effect. Claims remain significantly lower than before the QRTP requirement took effect, with the most recent claim for the quarter ending September 30, 2023 coming in around \$21,500 for the federal share. It is evident this drop is not primarily driven by a change in the number of youth in these placements, as the loss is reflected on a per-child basis as well. When calculated on a per-child basis, these figures correspond to a decline in the average quarterly draw-down per quarter for each IV-E eligible child in group placements from a high of about \$3,500 per child, to \$500 per child in the most recent claim submitted.¹⁷ In declining to move towards the best practice for children of limiting group care placements to only high quality, therapeutic, short term settings, Vermont is also forgoing what will quickly amount to millions of



dollars in federal revenue. While there are surely multiple drivers of this decision, the barriers posed by the current data system deficiencies are undoubtedly a significant factor.

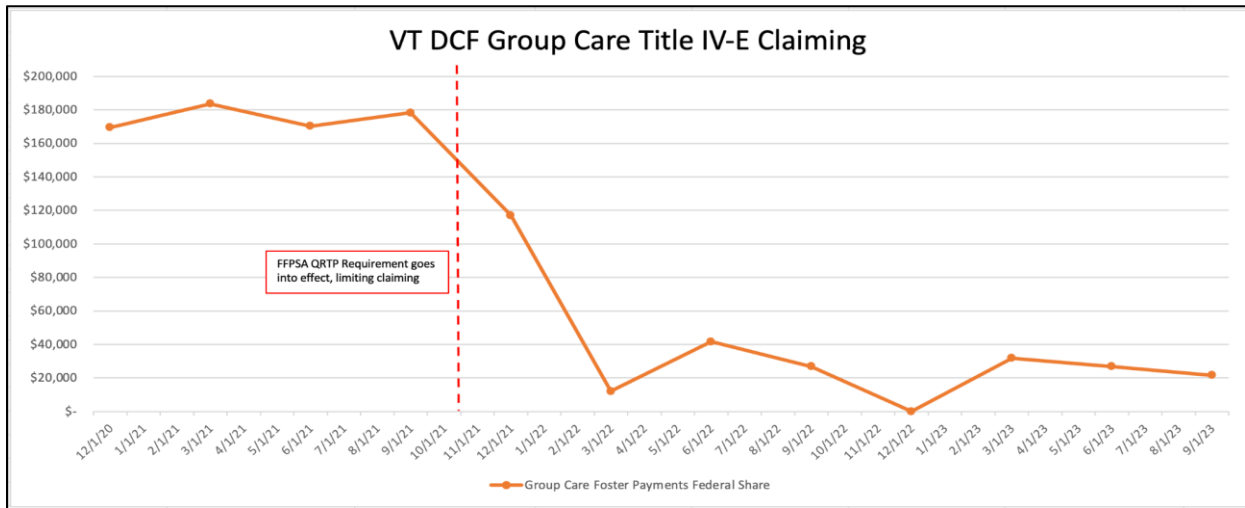


Figure 1 (above): Vermont DCF Group Care Title IV-E Claiming Over Time

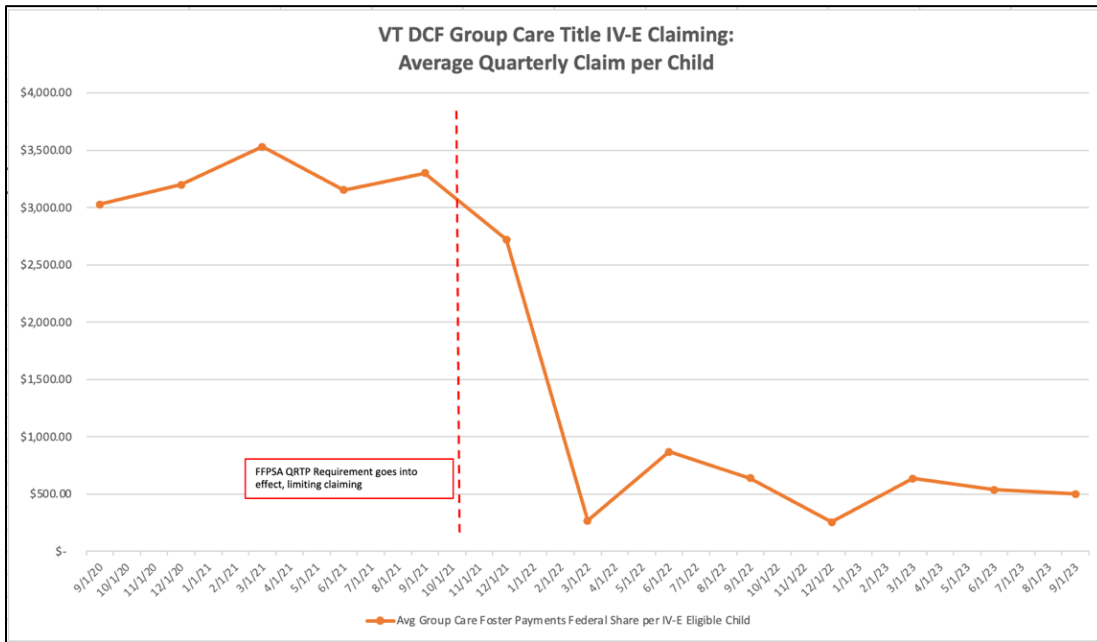


Figure 2 (above): Vermont DCF Group Care Title IV-E Claiming: Average Quarterly Claim Per Child Over Time



Prevention Services and Legal Representation

As discussed throughout this Report, Federal Title IV-E funding is available to reimburse a wide range of activities and expenses. Unsurprisingly, these processes and documentation requirements are heavily dependent on a functional data system. General categories of claiming include foster care, adoption assistance, guardianship assistance, and prevention activities.

Foster care is often the largest area of claiming, and allowable costs include the categories of maintenance, administration, and training. Examples of allowable maintenance expenses include:

- food;
- clothing;
- shelter;
- daily supervision;
- school supplies;
- a child’s personal incidentals;
- liability insurance with respect to a child;
- reasonable travel to the child’s home for visitation, and reasonable travel for the child to remain in the school in which the child is enrolled at the time of placement; and
- In the case of institutional care, the reasonable costs of administration and operation of such institutions as are necessarily required to provide the items described above.¹⁸

In the category of administrative costs, funds are intended to support “administrative expenditures necessary for the proper and efficient administration of the title IV–E plan,” including:

- Referral to services;
- Preparation for and participation in judicial determinations;
- Placement of the child;
- Development of the case plan;
- Case reviews;
- Case management and supervision;
- Recruitment and licensing of foster homes and institutions;
- Rate setting;
- A proportionate share of related agency overhead;
- Costs related to data collection and reporting.¹⁹

In the area of judicial determinations and court-related activities, possible application of IV-E funds is significant, as detailed in the 2021 Information Memorandum titled “Utilizing Title IV-E Funding to Support High Quality Legal Representation for Children and Youth who are in Foster



Care, Candidates for Foster Care and their Parents and to Promote Child and Family Well-being.”²⁰ Allowable activities can include those performed on behalf of IV-E eligible children that are candidates for foster care, or those in foster care, and include participating in case planning meetings, providing legal interpretations, preparing legal briefs, and other related activities. While expenses must be claimed by the Title IV-E agency (i.e. DCF), they may be provided by social workers or other agency staff, or through an MOU or contract with partners, including the Office of the Defender General, the Vermont Judiciary, and community organizations, such as Vermont Legal Aid or the Clinic at Vermont Law School. Additionally, a recently proposed federal rule change details further flexibilities and allowable costs related to foster care legal representation, as explained above in [Section 2.3](#), which could be opened through an updated system.²¹

While these options are available now to DCF, the current data system appears to be insufficient to effectively implement and claim federal reimbursement for many of them. This limits access to federal revenue, and negatively impacts children and families that would benefit from these services.

Data Collection on Transition-Aged Youth

While DCF offers some services to youth who have aged out of foster care, it does not have an approved plan to draw down federal money to support youth once they have reached age 18 and can legally manage their own lives. Vermont’s lack of a modern information system has been a clear obstacle to implementing extended foster care in Vermont.²² Vermont’s most recent National Youth in Transition Database review indicates significant data collection issues in the way DCF tracks older youth, including incorrectly reporting foster care status, technical problems, and “programmatically issues ... causing the data of these elements to be unreliable.” “Vermont has practice issues related to data quality that need to be addressed,” the Children’s Bureau wrote. “Workers are not consistently entering information for date of birth, sex, Hispanic or Latino ethnicity, and education level” and “Vermont is not reporting federally recognized Tribes.”²³

Decision-Making: Courts

Vermont’s court system also relies on the functioning of an effective data information system for DCF. Courts’ ability to achieve the goals of ensuring the safety of children, preventing unnecessary removals, and establishing permanency, such as return to birth parents or adoption, relies on the interpretation by judges of reliable DCF data drawn from a high-quality case information system. As one former federal official on the National Judicial Opioid Task Force put it, “we believe very strongly that judges and attorneys play absolutely critical roles in prevention in and out of the courtroom and that judicial support for robust community-based prevention programs and enhanced attention to reasonable efforts will have a ripple effect across the justice system by



helping children and families stay safe and healthy and avoid juvenile justice and child welfare involvement. Prevention is the work of the courts.”²⁴

Every CHINS case relies on a DCF Family Services Worker’s ability to bring accurate, timely, and relevant information to court that clearly identifies the risks and protective capacities of children, youth, and families. The UVM Drivers of Custody report found “irregularities” in the use of the SDM tool, in which a “large percentage” of cases the researchers reviewed did not have safety assessments completed prior to the worker making removal recommendation.”²⁵ This means that DCF was asking a judge to place a child in foster care without a clear understanding of the actual danger the child faced. There obviously could be many reasons for these systemic breakdowns, but the time it takes workers to generate even the most basic information undoubtedly plays a big role. DCF’s current data systems do not give workers the tools they need to create high quality court reports. And that means that judges don’t have the information they need to make critical decisions.

Decision-Making: Legislative Information and Data Related to Restraint and Seclusion, Child Injury, and Fatalities

Without a reliable child welfare information system, the Vermont legislature does not have an accurate picture of the needs of Vermont’s children, youth, and families. One recent example is the September 1, 2023, “DCF Raise the Age, High End System of Care Status Update.” The data analysis section of that report is just one paragraph long and contains very little qualitative or quantitative data. It does not answer even the most basic questions about youth in the “High-End System of Care,” such as:

- How many young people currently make up the high-end system of care?
- Of those youth, how many are adjudicated delinquent, how many are affected by Raise the Age, how many are youthful offenders, and how many have ongoing CHINS involvement?
- Of those youth, what are their needs, in terms of physical health, mental health, education, and community involvement?
- What treatment are those youth currently receiving, and for those who are not getting the treatment they need, what treatment modalities would make up the gap?
- How is DCF affected by having to share “contracted beds” with other Vermont entities, such as the Department of Mental Health (“DMH”), and the Department of Aging and Independent Living (“DAIL”)?

DCF’s use of the gap between current and pre-pandemic residential treatment capacities is an insufficient metric to envision our future system of care. If this system is truly designed to support children and youth, at some point their needs have to be assessed. (To be clear, confidentiality is



not the issue here—we are talking about aggregate data). We believe DCF’s data systems are the main reason that this information is not included in their reports. The first step to strengthening that foundation is acknowledging its shortcomings.

Relatedly, DCF’s data system issues also affect the mandate of the OCYFA itself. One central reason for the creation of this Office was to improve DCF’s informational transparency.²⁶ The OCYFA enabling statute requires DCF to notify the OCYFA of all incidents of actual physical injury to children or young people in DCF custody, or youth at significant risk of such harm, as well as instances of restraint or seclusion of any child or youth in custody of the Commissioner.²⁷ While DCF submitted about 30 reports of injuries or children at risk of injuries to us in 2023 (see [Section 3.3](#)), it has sent only *one* restraint/seclusion data set for *one* facility in the Office’s first eight months in existence. One reason for this failure is the way data on restraints and seclusions flows to DCF from hospitals, licensed treatment facilities, unlicensed placements, and schools—each of which have separate obligations, definitions, and licensing requirements. These intricacies are hard to track even with a good data system, but without one, they are almost impossible. Without a new data system, DCF cannot follow its statutory obligations to the OCYFA, the legislature, and our constituencies.

Decision-Making: Administrative Information and Substantiation Registry

On October 22, 2022, the Vermont Parent Representation Center (“VPRC”) released a report called “Broken System, Broken Promises,” calling for wholesale overhaul of the process DCF uses to “substantiate” people for abuse and neglect.²⁸ In its own review of 30 substantiation cases, VPRC found that DCF’s investigations were inconsistent and inadequate to determine fact from hearsay, that substantiations were guided by DCF’s internal and unstated assumptions, and that DCF’s inability to maintain evidence, investigative files, and forensic interviews in a centralized location negatively impacted the substantiation and appeals process.²⁹ DCF has since committed to reforming the substantiation process. Multiple legislative proposals are pending for the 2024 session.

The substantiation system—both in its current form, and in the proposals to amend it—relies on information that DCF reviews at the district level, presents to an internal DCF reviewer if the substantiation is appealed, is heard by the Vermont Human Services Board if appealed again, and then is potentially adjudicated by the Vermont Supreme Court. While the VPRC report did not name the issue explicitly, many of the inconsistencies and failings of the current substantiation process are magnified by the current data system. VPRC has proposed raising the legal threshold required to substantiate from the “reasonable person” standard to “a preponderance of the evidence.” This subtle but significant change relies on the presentation of a reliable evidentiary record—by DCF *and* the appealing party—to the adjudicating body, whether that body is the DCF



Central Review and Registry Unit (“CRRU”), the Vermont Human Services Board, or the Supreme Court of Vermont.³⁰

Data accuracy is especially important to potential legislative amendments to the substantiation process because research shows that a high standard of proof decreases the probability of substantiation by up to 14 percent, largely in cases that are harder to prove (with virtually no change in cases that are easier to prove). This means that under a preponderance of the evidence standard, fewer people would be unnecessarily substantiated, which is the desired result of reforms, but also that there would be some cases that could not be substantiated even though maltreatment had occurred. The ability of our systems to reduce unnecessary substantiations while also ensuring that we have guardrails to protect children is directly dependent on a data system that can produce reliable, efficient, and relevant information. CCWIS is crucial to the long-term success of substantiation reform.³¹

Supporting DCF Workers

Front-line DCF workers—especially Family Services Workers—carry the primary emotional burden of working with DCF’s current data system. The health and welfare of DCF workers is intimately connected to the experiences of children, youth, and families in the child welfare system. Worker safety has reached a critical point in recent years with several incidents impacting daily functioning and morale across the Department. Worker stress harms individuals and contributes to staffing shortages, but it is also strongly correlated with increased removals of children into foster care. The higher a DCF worker’s general stress level, the more likely they are to favor bringing children into care in general.³²

Working with the current DCF data systems—FSDNet and SSMIS—is taxing on workers. It is an aggravating factor that elevates the stress of a job that is already a challenge. OCYFA conducted an anonymous survey of DCF workers about their experiences working with the current system and the responses were overwhelming.³³ One worker wrote:

“SSMIS is [almost] older than I am. ... It is incredibly hard to use, still uses the escape button, doesn’t connect with a mouse. It is hard to move from one panel to another. When looking for historical information you often need to look in multiple locations to piece together a narrative of what actually occurred. ... Some pieces of FSDNet are simply not used, the risk assessments in FSDNet are not actually the risk assessments we use. When looking up intakes, they do not organize chronologically and don’t have a filter option, so to gather a full history, you need to write or type the information elsewhere to get a chronological understanding of a family’s involvement. This system is severely lacking in any organized way to identify family members, ICWA status or important events. For example, our cases are opened under custodial parents, most often mothers. I have no



way of looking up a father and then identifying that he has three children with different mothers. I also don't have a way of looking up addresses."³⁴

A supervisor wrote:

"If a safety issue exists at [a placement] and I assigned to employee A, I have no way of looking up that address to see if any other employee is also working in that home/apartment with another family. SSMIS and FSDNet also don't speak to each other so we are often duplicating or triplicating our work. For example, if demographic information is wrong in the report and I find that out when I meet with a family, I then have to update this in FSDNet in the intake. I then need to tell admin to update in SSMIS. If I want childcare on that case, I then need to email all the demographic information to our childcare partners because even though they can "see" SSMIS on their end, when I [enter it], it doesn't show all of the information."

In various venues and meetings, we heard or experienced other examples:

- DCF workers fielding non-applicable reports of at the Centralized Intake and Emergency Services abuse and neglect hotline ("CIES")—such as callers complaining about not having received their Social Security check—must spend significant time clicking through mandatory "screens" before moving on to calls that truly involve the safety of children.³⁵
- DCF workers cannot upload pictures or videos to FSDNet because of the risk it will crash and they will lose their not-yet-saved work. The visual information is therefore kept separately from written descriptions of the same incident.
- Even absent any attempt to upload files, crashes and lost data frequently occur.
- SSMIS is so challenging that only one person per office enters placement data in the system. This leads to backup copies being kept on paper, resulting not just in lost information, but the potential for late claiming and billing if that one person is out of the office.
- At several crisis points, such as during the pandemic and the recent flooding, the only way DCF knew where the children in its care were placed was through individual physical notebooks with printed and handwritten information.
- CIES intakes accepted for investigation or assessment are sometimes "appended" multiple times over days or weeks, presenting challenges to decipher new information and allegations from old.³⁶

As mentioned above, FSDNet and SSMIS complicate the use of the Structured Decision-Making tool ("SDM") that DCF uses to avoid systemic bias. The UVM Drivers of Custody report reviewed a set of cases in which DCF found a child to be "unsafe" and in which the children in question did *not* enter custody within a year. "We hypothesized that this group of cases could provide valuable



insight into child protection practices and/or services that effectively prevented custody. We completed case reviews on 18 such cases. Ten of these cases appeared to be data glitches in which custody episodes did occur according to affidavits and case files but information about custody was not present in the administrative data sets or unable to be linked using the administrative data,” the researchers wrote.³⁷

The UVM report also made clear that DCF workers are overusing two SDM assessment categories that are “only supposed to be used sparingly and allow more room for risk versus concrete or specific evidence of immediate danger.”³⁸ DCF worker usages of these two miscellaneous categories comprised 29% of SDM tool assessments in the cases analyzed by UVM. The results of the UVM case study have the markings of workers pressed for time and unable to generate crucial information needed to make custody decisions. For DCF to continue to spend significant time, energy, and money investing in an algorithmic data tool while at the same time relying on a data system that struggles to produce even basic front-end input is like investing in excellent snow tires when your engine is spewing smoke.

There are 178 Family Services Worker positions in the state.³⁹ If each worker loses two hours of productivity a week (which by all accounts is a conservative estimate), that is almost 18,000 hours a year, or \$676,400 in lost wages.⁴⁰ This is obviously a rhetorical way of measuring fiscal impact, but it serves to make the point that lost productivity should matter when we assess the true cost of a new comprehensive child welfare information system.

Under these conditions, it is a testament to the commitment of the DCF child welfare workforce that there are *only* 20 vacancies out of the 178 FSW positions in the state.⁴¹ One of the clear strengths of DCF is its committed front-line workers. But as the recent call to “bring in the National Guard” demonstrates, that workforce is near a breaking point.

Preventing Crises Like Cyberattacks, Lawsuits, Billing Errors, and Federal Audit Penalties

By one estimate, 80% of what is happening in DCF policies is not part of the digital information workflows on SSMIS and FSDNet.⁴² This means that workers, supervisors, billing personnel, and everyone else who works with these systems must get creative. Unfortunately, creativity means redundancies, such as duplicating SSMIS information in an excel spreadsheet. Transferring redundant data wastes time and presents opportunities for error.

The data systems also mean DCF struggles to track elements necessary to pay its vendors. According to one DCF employee, the state’s reputation for paying its bills promptly has suffered in recent years as the data system becomes more and more outdated. There have been multiple instances of paying the wrong vendor, or at least not paying the right one. For any entity thinking of doing business with the State of Vermont, DCF’s ability to pay its bills accurately and timely is certainly a factor, especially given the administrative burdens involved with any state entity. These



factors should also be considered when assessing the number of unanswered Requests for Proposal (“RFPs”) DCF has issued in recent years.⁴³

SSMIS and FSDNet also weigh on DCF’s internal administrative functioning. Due to the systems’ fragility, standard practice is for just one person in each office to handle standing administrative tasks. Because each of these point people also has other responsibilities, the time they spend on SSMIS and FSDNet detracts from other important projects. Their crucial roles also impact their time off. The same zero-sum phenomenon applies to the one programmer who fully understands how to program the systems. If DCF has to “add screens,” the ripple effects are onerous. And if this one programmer decides to take another job, could DCF attract another? Would anyone with programming skills take the time to learn an obsolete system in an obsolete language?

Another underexplained aspect of the impact of the data system relates to DCF’s role in licensing foster homes and facilities. DCF’s ability to assess the safety of these entities is limited by the data system. For example, SSMIS cannot produce a report that cross-references privately licensed homes in the licensing process with a list of the children currently residing in those homes. The reasons for such a review are obvious: if a critical incident occurred, the database may not reflect where children are actually placed. Additionally, DCF cannot search FSDNet intakes by facility type or facility name. This can impact the assessment for licensure for problematic facilities and also contributes to inaccurate public information request responses. The result is that DCF engages in a labor- and time-intensive workaround that has the potential for errors that directly impact child safety.

Finally, the DCF system is a sitting duck for a cyberattack. Recent incidents at the University of Vermont Medical Center and Vermont Legal Aid serve as warning signs of what could happen to DCF. Cybercriminals routinely seek out systems that contain invaluable information, are easy to attack, and are backed by sufficient money to pay ransom. The safety implications of DCF being cut off from the most basic information about the children in its care are substantial. And the optics and technical aspects of such a situation could mean that the State would have to pay the ransom demanded.

The UVM Medical Center attack cost the hospital more than \$65 million—and no data was actually breached.⁴⁴ The costs came largely from having the system down for weeks while malware was removed. “While it was a significant inconvenience and a big financial hit, the fact that no data was breached was huge,” one UVM official said.⁴⁵ In testimony in front of the United States House of Representatives, the UVM Medical Center president said that dealing with the cyberattack was “much harder than the pandemic by far.”⁴⁶



Conclusion: Looking Forward to a New Data System

Transitioning to CCWIS will not be simple. At a minimum, it will require support from the legislature and the leadership of the Vermont Agency of Human Services. But there are some advantages to Vermont’s late-mover status. For one, in recent years CCWIS systems have gotten cheaper as more states need CCWIS services and companies compete for their business. Starting a system from scratch is challenging, but also brings the benefit of being able to design from the ground up, leverage lessons learned by other states, and gather feedback on particular vendors once bids are in. The costs of a new system will be significant, but those costs must be weighed against the costs of the current system, the cost of continuing to wait, and the cost of implementing a new system incrementally. Federal systems are only likely to increase their reliance on digital protocols like CCWIS as time goes on. Vermont’s opportunities to create innovative programs will only grow. Recent federal rulemaking by both the Trump and Biden administrations demonstrates the expanding ability of states to exercise creative flexibility under federal regulations. Vermont’s policymakers at every level should think holistically about the true costs of a new system and act boldly in the name of fiscal and programmatic efficiency. A new Comprehensive Child Welfare Information System will bring benefits to Vermont’s children, youth, and families and its child welfare workforce that will be utterly consequential.

OCYFA RECOMMENDATIONS REGARDING DCF’S DATA SYSTEMS

1. The State of Vermont should fully fund and onboard a Comprehensive Child Welfare Information System (“CCWIS”) using the 50% federal match and exploring financing mechanisms that do not demand cuts in DCF’s programs or services.
2. In implementing CCWIS, DCF should solicit input and leverage expertise from young people, foster parents, kinship providers, and the Division of Racial Justice Statistics within the Vermont Office of Racial Equity.

¹ (Vermont Citizens Advisory Board 1).

² (Duffort, Vermont’s foster care IT system predates the internet — and puts kids at risk).

³ Unless otherwise noted, citations in this paragraph from personal conversation with DCF official, October 31, 2023.

⁴ (Duffort, Vermont’s foster care IT system predates the internet — and puts kids at risk).

⁵ (U.S. Department of Health & Human Services, Administration for Children and Families) and (Vermont Citizens Advisory Board).

⁶ (U.S. Department of Health & Human Services, Administration for Children and Families).

⁷ (Vermont Department of Finance & Management - Budget & Management Division 799-881, 351-390).

⁸ See (Vermont Legislative Joint Fiscal Office).

⁹ DCF’s mission is “to foster the healthy development, safety, well-being, and self-sufficiency of Vermonters.” See DCF website.

¹⁰ Figures cited here are from meeting with DCF officials and Justices from the Vermont Supreme Court, October 16, 2023.



¹¹ See generally (Duffort, Vermont’s foster care IT system predates the internet — and puts kids at risk).

¹² The 2021 UVM Drivers of Custody report found that “a comprehensive data system would likely facilitate more data-driven practice, lead to more efficient casework, and decrease confirmation bias or ‘hunch-based’ custody decisions that can be steeped in racial and socioeconomic bias.” (University of Vermont Department of Education and Social Services 28).

¹³ One response we heard more than once was essentially, “Do you have any idea how many data systems within AHS need to be updated?!” In response, we might ask, is there any other system that is as important as this one? Is there any other way to spend money that would have a bigger impact?

¹⁴ Information in this section based on discussions with DCF officials unless otherwise noted.

¹⁵ (Vermont Legislative Joint Fiscal Office). While the referenced budget and federal claiming information provide some insight into lost federal revenue, it is unfortunately very challenging to calculate the exact impact due to inadequacies of the current data system—a circular problem.

¹⁶ (Vermont Department of Finance & Management - Budget & Management Division 839).

¹⁷ Figures are drawn from an internal OCYFA review of the State of Vermont’s quarterly CB-496 submissions for foster care, which claim Title IV-E reimbursement for allowable activities. Data points from line item 1c “Agency Maint. Payments- Non-specified Setting Child Care Institution.”

¹⁸ 42 U.S.C. § 675. Additional information available at (U.S. Department of Health & Human Services, Administration for Children and Families), Section 8.3B.1.

¹⁹ 45 CFR § 1356.60; (U.S. Department of Health & Human Services, Administration for Children and Families), Section 8.3B.1.

²⁰ (U.S. Department of Health & Human Services).

²¹ (American Bar Association Center on Children and the Law).

²² See (Child Welfare Information Gateway).

²³ (U.S. Department of Health & Human Services, Administration for Children and Families)

²⁴ (National Center for State Courts 9).

²⁵ (University of Vermont Department of Education and Social Services 137). “As previously mentioned, data on service provision was not captured in a systematic way. These data were found in narrative form in affidavits but were time intensive to identify for the purposes of a case review.” (University of Vermont Department of Education and Social Services 141). See also (Vermont Parent Representation Center 9), alleging that DCF “writes investigative reports that are often poor in quality and accuracy, contain misinformation and outdated material, and are often based on assumptions rather than facts, yet these reports serve as basis for DCF affidavits and CHINS petitions.”

²⁶ See, e.g. 33 VSA § 3203.

²⁷ 33 VSA § 3206.

²⁸ (Vermont Parent Representation Center).

²⁹ (Vermont Parent Representation Center 19-24).

³⁰ See 33 VSA § 4916b, Vermont Rule of Appellate Procedure Rule 13, 3 V.S.A. § 3091.

³¹ For example, it appears that at least 40% of VPRC’s 30 cases reviewed involved teens. It would be useful to analyze these cases to understand the supports the families and youth need.

³² (University of Vermont Department of Education and Social Services 127).

³³ We expected to get four or five replies. We got 30.

³⁴ Quotes this section from internal survey.

³⁵ Personal correspondence with DCF official, 11.6.23.

³⁶ “Appends” were present in 13% of OCYFA intakes.

³⁷ (University of Vermont Department of Education and Social Services 141).

³⁸ Citations this paragraph from (University of Vermont Department of Education and Social Services 136). In an email in response to a draft of this Report, DCF said that they have addressed and corrected this problem.

³⁹ Email DCF to OCYFA.

⁴⁰ 178 FSWs x 50 weeks x 2 hours = 17800 hours x \$38. See (ZipRecruiter).

⁴¹ Email DCF to OCYFA.



⁴² Personal communication, DCF to OCYFA.

⁴³ This paragraph based on personal communications with DCF.

⁴⁴ See (Benninghoff).

⁴⁵ (Benninghoff).

⁴⁶ (Gholston).