

Office of the Child Advocate Annual Report Fiscal Year 2021



The Commonwealth of Massachusetts
Maria Z. Mossaides, Director

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March 17, 2022

On behalf of the Office of the Child Advocate (OCA), I am pleased to present the OCA's Annual Report for Fiscal Year 2021 (FY21). The OCA was established by the Massachusetts Legislature in 2008 to serve both as an ombudsman to ensure that children and their families receive quality, effective, and timely services that meet their needs, as well as an independent overseer charged with identifying gaps in needed services and conducting investigations when necessary. The OCA performs these statutory functions while also working on issues that require deeper review through a project-based approach.

The OCA is unique among most of the OCAs in the nation in that we oversee state services to children and youth in the Commonwealth across the entire executive branch system. The scope of this mission is remarkable. We have access to information that allows us to see the Commonwealth's services from a bird's eye view such that we can map where the system works well and identify where there are gaps. It is because of this perspective that we recognize when there is room for innovative approaches to fill service gaps.

We have taken the step of being the first OCA in the country to be an incubator of pilot projects. For instance, in FY21 the OCA continued its work in identifying special populations of particularly at-risk children and young people who needed focused attention during the COVID-19 pandemic. These efforts included the launch of a pandemic housing stability and stabilization pilot targeted toward youth aging out of foster care who were facing homelessness. The OCA also worked with the Department of Mental Health to expand the set of resources available on the [HandholdMA](#) interactive website, which our agencies created with a team of mental health and child development experts to support parents who are worried about their child's mental health during this historically tumultuous time.

This report describes the OCA's statutorily mandated functions, which include reviewing Critical Incident Reports, reviewing reports of child abuse and neglect in institutional settings, and operating a Complaint Line to respond to concerns about the delivery of state services to children. Public awareness of our agency's ombuds function continues to grow each year, which we attribute to our success in resolving complaint line matters on behalf of children and families, as well as our work investigating cases that have drawn significant public attention. Later this year, the OCA will issue a separate report analyzing data and system-wide trends captured by the reports and complaint line inquiries our office received in FY21. In previous years, this data was published as a part of our annual reports. This new report will incorporate expanded measures and metrics

beyond what we had previously reported. We look forward to sharing this forthcoming report with the Legislature and the public later this spring.

The OCA also leads several statutorily created commissions and regularly initiates special projects related to our overall mission of improving the delivery of state services to children and youth. For example, in FY21 the OCA continued its work chairing the Juvenile Justice Policy and Data (JJPAD) Board. The JJPAD Board is charged with studying our juvenile justice system – including the implementation of the various juvenile justice changes enacted as part of 2018’s *An Act Relative to Criminal Justice Reform* – and making annual recommendations for further improvements. In November 2020 the OCA launched the first iteration of a [juvenile justice data website](#), an interactive website that gives policymakers, stakeholders, researchers, and members of the public greater access to data across the entities and processing points of the juvenile justice system. This report also describes the OCA’s FY21 statutorily mandated efforts chairing the Childhood Trauma Task Force and the Mandated Reporter Commission, and co-chairing the Task Force on Child Welfare Data Reporting and the Child Sexual Abuse Prevention Task Force.

We view the OCA as a unique neutral convener for bringing together stakeholders to address issues and make policy recommendations based on data and information. As an independent agency, we communicate regularly with the Massachusetts Legislature on many policy issues relevant to our work and/or expertise. Our FY21 Annual Report highlights several pieces of legislation the OCA has prioritized supporting during the 192nd Legislative Session. We understand that no state system will ever be perfect, but steady and measurable improvement is an attainable goal and we exist to hold the Commonwealth accountable to that goal. We take seriously the task set before us by the Massachusetts Legislature in our statute and we depend on the sincere commitment of state agencies to work in collaboration—if not always in agreement—toward a safe and supportive Commonwealth that provides our children with every opportunity possible to thrive.

Improving state services to children is a goal shared by everyone who wants to ensure the Commonwealth’s future. I would like to thank the Governor, the Legislature, our public sector colleagues, advocacy organizations, and families who bring their concerns and ideas to us on a daily basis. Without your support and partnership, the OCA could not successfully carry out its mission. Finally, I am grateful to the OCA’s staff for their tireless efforts on behalf of the Commonwealth’s children.

Sincerely,

A handwritten signature in dark ink, appearing to read "Maria Mossaides", followed by a long horizontal flourish line.

Maria Mossaides
Director, Office of the Child Advocate

FY21 OCA Staff List

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Director
“The Child Advocate”

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Senior Director of Quality Assurance

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Alicia Raphaelian
Quality Assurance Supervisor

Melissa Threadgill
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Legislative & Communications Director

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EXECUTIVE SUMMARY

The Office of the Child Advocate (OCA) is an independent executive branch state agency with oversight and ombudsperson responsibilities, established by the Massachusetts Legislature in 2008.¹ The OCA's mission is to ensure that children receive appropriate, timely and quality state services, with a particular focus on ensuring that the Commonwealth's most vulnerable and at-risk children have the opportunity to thrive. Through collaboration with public and private stakeholders, the OCA identifies gaps in state services and recommends improvements in policy, practice, regulation, and/or law. The OCA also serves as a resource for families who are receiving, or are eligible to receive, services from the Commonwealth.

The OCA executes its mission by:

- Overseeing and monitoring the services delivered by child-serving state agencies
- Improving the collection, use, and transparency of state agency data
- Identifying gaps in and concerns with how state agencies and systems serve at-risk children, and recommending and advocating for solutions, including changes to improve coordination across agencies
- Advising on and leading efforts for systemic change in policies, programs, and practices affecting vulnerable and at-risk children
- Serving as an ombudsperson, including providing information and referral support, for families who are receiving, or are eligible to receive, services from the Commonwealth
- Promoting child and family well-being

This report provides an account of the OCA's activities from July 1, 2020 to June 30, 2021. It is separated into six sections:

1. Statutory Functions of the OCA
2. OCA-Led Commissions
3. OCA Special Projects
4. Legislative Affairs
5. Initiatives and Committees

¹ The Office of the Child Advocate statute is [M.G.L. c. 18C](#).

STATUTORY FUNCTIONS OF THE OCA

The OCA has a number of statutorily mandated responsibilities; fulfilling these core functions is our top priority. The OCA's statutory functions include:

- ***Complaint Line:*** The OCA serves an ombuds function when the staff receives and responds to complaints and questions regarding state services provided to children and families through our Complaint Line. Any individual can contact the OCA to express concerns, ask questions, or receive resources and information about a service a child or young adult is receiving, or eligible to receive. When the OCA deems involvement necessary and appropriate, the OCA will bring a concerns to the appropriate state agency and assist in the effort to resolve the concern. The Complaint Line is a resource that can assist on an individual case basis that results in concrete outcomes for individual children. The information gathered on the Complaint Line also informs the OCA's policy work by providing on-the-ground context to the issues the OCA seeks to address.
- ***Review of Critical Incident Reports:*** The OCA's enabling statute requires that state agencies notify the OCA if a child or young adult who is receiving state services from that agency suffers a fatality, near fatality, serious bodily injury, or emotional injury. These are called critical incident reports (CIRs). Upon receiving a CIR, the OCA conducts an immediate administrative review to learn more about the circumstances of the incident and the reporting agency's involvement with the family. When the OCA determines the actions or inactions of the reporting agency may have contributed to the incident, or the child, young adult or family is not receiving quality services to meet their needs, we may request more information and conduct interviews with agency involved staff. The OCA's review of critical incident reports can lead to follow-up with state agencies about their work with the children and families involved, it also helps the OCA track trends which inform the OCA's policy work, and it can trigger the need for the OCA to launch a full investigation into an incident. The OCA's findings and recommendations in the publicly released [multi-system investigation report](#) into the death of David Almond is representative of the continuous feedback and accountability presented to the agencies as part of the OCA's core function of reviewing critical incident reports.
- ***Reviews of Abuse/Neglect in Out-of-Home Settings (Institutional Reviews):*** The OCA receives and reviews reports of child abuse and/or neglect that have been investigated and supported by Department of Children and Families (DCF) regarding any child in certain out-of-home settings. These out-of-home settings include, but are not limited to, foster care, congregate care programs, child care facilities, public schools, private schools, after-school and summer programs, school-funded transportation companies, and hospitals. OCA staff review, analyze and discuss each report. The purpose of this review is to evaluate the safety and well-being of the child(ren) involved, identify programmatic policy or practice concerns, and identify trends and patterns relating to the care of children in out-of-home settings. When determined necessary by the OCA, the office provides policy, practice, and case-specific feedback to the relevant state agencies involved. and practice feedback to the relevant state agencies.

OCA-LED COMMISSIONS

Since the agency's inception, additional statutory mandates have been created which charge the OCA with chairing several state commissions, either in the form of permanent functions or temporary assignments. These include:

- ***Juvenile Justice Policy and Data (JJPAD) Board:*** The [JJPAD Board](#) is charged with evaluating juvenile justice system policies and procedures, including the implementation of new statutory changes to the juvenile justice system, and making recommendations to improve outcomes.
- ***Childhood Trauma Task Force (CTTF):*** The [CTTF](#) is charged with determining how the Commonwealth can better identify and provide services to youth who have experienced trauma, with the goal of preventing future juvenile justice system involvement.
- ***Mandated Reporter Commission:*** The Child Health and Wellness Bill signed by Governor Baker on November 26, 2019 established the [Mandated Reporter Commission](#) ("MR Commission"). The Child Advocate chaired the MR Commission which was charged with reviewing the mandated reporter law and regulations for reporting child abuse and neglect, and making recommendations on how to improve the response to, and prevention of, child abuse and neglect. The MR Commission was comprised of statutory members who represented a wide range of viewpoints from public entities and groups who have extensive experience with mandated reporting in the Commonwealth. The Commission submitted its final report to the Legislature on June 30, 2021.
- ***Child Welfare Data Work Group (DWG):*** The DWG, which the OCA co-chairs with DCF, was charged with reviewing the list of legislatively-mandated DCF reports and issuing recommendations on the elimination of unnecessary reports and the design of new reports that would present information of the children and families served by DCF. In FY21, the DWG continued to work on designing and publishing public-facing reports on the demographics of children and families served by the Department, the outcomes for these children and families, and the operations of the department.
- ***The State Child Sexual Abuse Prevention Task Force: (CSAP Task Force):*** The OCA co-chairs the CSAP Task Force with the Executive Director of the Children's Trust. This group is charged with developing guidelines and tools for the development of sexual abuse prevention and intervention plans by organizations serving children and youth. The Task Force launched and operates www.safekidsthive.org, a first-of-its-kind customizable website to help child-and-youth-serving organizations prevent child sexual abuse before it happens.

OCA SPECIAL PROJECTS

The OCA leads several projects designed to promote the Commonwealth's ability to protect children from abuse and neglect, support overall child, youth, and family well-being, and improve the quality of state services to children. Many of these projects are initiated in partnership with other state agencies and designed to address system-level issues that cut across multiple agencies or sectors. Our special projects in FY21 included:

- **COVID-19 Pandemic Response:** Throughout the COVID-19 pandemic, the OCA focused on collecting information about gaps and challenges in providing children with needed services, identifying special populations of particularly at-risk children that need focused attention, and working with our partners to identify creative solutions to both in-the-moment crises and emerging/anticipated challenges. In FY21, these efforts included:
 - **HandholdMA Interactive Website:** In FY20, in partnership with the Executive Office of Health and Human Services (EOHHS) and the Department of Mental Health (DMH), the OCA launched [HandholdMA.org](https://www.handholdma.org), a family-friendly website created by a team of mental health and child development experts with tips, tools, and resources curated especially for parents who are worried about their child's mental health. The website was enhanced in FY21 with an expanded set of resources for parents of young children and adolescents.
 - **Transition Age Youth Housing Pilot:** The OCA leads a cross-secretariat working group to address the challenges of youth transitioning from state services to adulthood and to ensure there is timely planning for the delivery of needed services as youth transition to independent living, with the ultimate goals of preventing youth homelessness and supporting positive life outcomes for young adults who have been involved with various state systems. In partnership with EOHSS, in February of 2021, the OCA launched a pilot program in Worcester County, Springfield, and Holyoke, targeted toward youth aging out of foster care who are facing homelessness. The program connected these young adults to safe and stable housing opportunities as well as other services and supports. This program went statewide in FY22.
- **Youth Suicide Prevention:** To better understand youth suicide prevention efforts throughout the Commonwealth, in late FY21 the OCA launched the "Massachusetts Youth Suicide Prevention Initiatives Survey," which was widely distributed to child-serving state entities and organizational partners across the Commonwealth. In addition to the survey, the OCA conducted a series of informational interviews to understand the current policies, practices, and challenges that Massachusetts child-serving state agencies and their partners are facing in pursuing youth suicide prevention work. The OCA will release an analysis of this survey in the spring of Fiscal Year 2022.

- ***Collaboration with the Office of the Inspector General:*** In 2020 the OCA was invited to collaborate with the Office of the Inspector General (OIG) in an effort to improve the administration of DCF's contract with the Judge Baker Children's Center to run the agency's after-hours hotline. The OCA is able to leverage our clinical expertise, knowledge of DCF and child protection, and policy and oversight work to assist in this collaboration. This work, which has continued since 2020, focuses on improving the substantive and procedural work of the hotline by focusing on hotline staff trainings, staff performance metrics, call metrics, and consistency in decision-making between hotline staff and area office screening decisions.

LEGISLATIVE AFFAIRS

As an independent state agency, the OCA routinely communicates with the Massachusetts Legislature on pending legislation or any policy matter relevant to the OCA's work and/or expertise. In FY21, the OCA prioritized advocacy in support of several policy issues, including but not limited to the following:

- ***Child Fatality Review Transfer:*** The OCA supports legislation effectuating a transfer of chairmanship of the State Child Fatality Review Team from the Office of the Chief Medical Examiner to a joint chairmanship between the OCA and the Department of Public Health (DPH). This transfer would adequately reflect the role that DPH currently plays in facilitating the program, as well as the funding and the policy-setting specialization provided by the OCA. Legislation to this effect has advanced through the legislative process several times, and was most recently included in ***H.88, An Act relative to accountability for vulnerable children and families***, which passed the House in March 2021.
- ***Access to Juvenile Court Records:*** The OCA supports ***H.1558/S.922, An Act clarifying the child advocate's authority to access juvenile records***, which would give the OCA access to data on juvenile court records held by the state Department of Criminal Justice Information Services (DCJIS). Such access is critical to the OCA's work in the field of juvenile justice and would also allow us to better-fulfill requests for information we've received from the Legislature. The OCA also supports ***H.1579, An Act relative to juvenile court reporting requirements***, which would require the Juvenile Court to provide the OCA with information regarding key court performance measures in child abuse and neglect cases. The care and protection process is a critical determinant of the experience that a child has with DCF when the case requires legal involvement. Specific data reporting from the courts, as proposed in H.1579, is the bird's eye view that is critical to our unique ability to advocate on behalf of the Commonwealth's most vulnerable children.
- ***Center on Child Wellbeing and Trauma:*** In 2020, the Childhood Trauma Task Force (CTTF) recommended the creation of a Center on Child Wellbeing and Trauma (CCWT), supported with state funding, that would ensure all child-serving systems in Massachusetts are trauma-informed and responsive by providing child-serving systems with training, technical assistance,

coordination and practice advancement support. The Massachusetts Legislature generously appropriated \$1 million in the FY22 state budget to support the creation and initial operation of the Center. ***S.81/H.238, An Act Creating a Center on Child Wellness and Trauma***, would add the CCWT to the OCA's core statutory functions, thus ensuring there is administrative oversight of the Center and continuity of this work moving forward.

- ***DCF Data Legislation:*** In 2020, the Child Welfare Data Work Group proposed a comprehensive package of legislative reforms aimed at eliminating unnecessary DCF reports in favor of a redesigned reporting scheme that would require that DCF publicize relevant, timely, and critical data to the legislature and the public in a manner that is consistent with the way in which the data is gathered by DCF so that such data can be adequately analyzed. Legislation to codify this reporting scheme is proposed in several pieces of legislation this session. The OCA is committed to continuing to work with the Legislature to pass a bill updating DCF's reporting scheme this session.
- ***Bail Procedures for Justice-Involved Youth: S.923/H.1557, An Act updating bail procedures for justice-involved youth***, proposes eliminating the \$40 administrative bail fee imposed on justice-involved youth. Instead, subject to appropriation, the bail magistrate fee would be paid by the state Bail Administrators' office. The bill also requires the Bail Magistrate, rather than the Officer on Call at a police station, to make the decision about whether an arrested youth should be released or held on bail. These changes were recommended in 2019 by the state Juvenile Justice Policy and Data (JJPAD) Board, which the OCA chairs.

INITIATIVES AND COMMITTEES

The OCA participates as a member on over a dozen initiatives and committees across the state that work toward improving the lives of children and young adults in the Commonwealth. Involvement with these groups helps to inform and educate OCA staff about work being done across the state on issues involving children and provides an opportunity for us to share information and help synchronize policy. For the purposes of this report, the OCA has broken down this work into two general categories: **Child and Family Safety and Wellbeing** and **Children's Mental and Behavioral Health**. Learn more about each aspect of this work on pages 38-42.

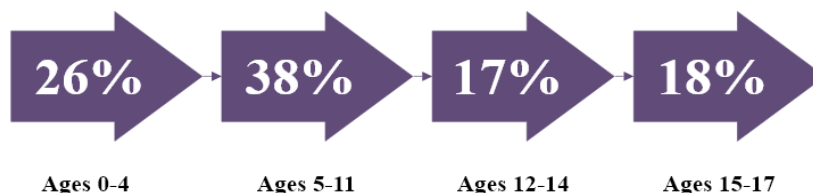
DATA SNAPSHOT OF CHILDREN IN MASSACHUSETTS

As a framework for the OCA's FY21 Annual Report, the following statistics provide an overall snapshot of the demographics of children residing in Massachusetts.² The data was retrieved from the Massachusetts Kids Count Data Center and is an estimate for Calendar Year 2020 (January 1, 2020—December 31, 2020), unless otherwise noted.³

Total Number of Children in Massachusetts (2020)



Massachusetts Child Population by Age Group (2020)



MA Population by Race and Ethnicity	Fast Facts on MA Children
• White (Non-Hispanic): 60% • Hispanic or Latino: 19% • Black (Non-Hispanic): 9% • Asian (Non-Hispanic): 8% • Two or More Race Groups (Non-Hispanic): 4% • American Indian and Alaskan Native: <.5% • Native Hawaiian and Other Pacific Islander: <.5%	• 12% of children live below the poverty line (Kids Count 2019) • 14% of children have experienced two or more adverse experiences (Kids Count 2018-2019) • 25% speak a language other than English at home (Kids Count 2019) • 30% are foreign-born or reside with at least one foreign born parent (Kids Count 2019)

² For the purposes of this report, the term "children" refers to any individual under the age of 18, "youth" refers to any individual between the ages of 14-18, and "young adult" refers to any individual between the ages of 19-22, unless otherwise stated.

³Kids Count Website: <https://datacenter.kidscount.org/data#MA/2/0/char/0>

SECTION 1: STATUTORY FUNCTIONS of the OCA

COMPLAINT LINE

As part of its statutorily mandated ombudsman function (M.G.L. c. 18C § 5), the OCA operates a Complaint Line Monday through Friday, 9:00AM. – 5:00PM., to receive and respond to complaints and questions regarding state services provided to children, young adults, and families. However, OCA staff routinely monitor the Complaint Line on weekends to respond to any immediate concerns.

OCA Ombudsman Statute (M.G.L. c. 18C § 5)

“...(c) The child advocate shall receive complaints relative to the provision of services to children by an executive agency and shall review and monitor the complaints that reasonably cause him to believe that a child may be in need of assistance and to ensure that the complaint is resolved. If the complaint is not resolved by the relevant executive agency within a reasonable period of time in light of the circumstances, if the resolution is determined to be unsatisfactory to the child advocate, or if the complaint reasonably causes the child advocate to believe that a child may be in need of immediate assistance, the child advocate may conduct an investigation and upon completion of the investigation, the child advocate may provide relevant information in the form of a report to any relevant agencies and request a meeting, if necessary, to review the investigation and accompanying report.”

Family members, foster parents, advocates, attorneys, and other individuals contact the OCA to express concerns, ask questions, or receive resources and information about a service a child or young adult is receiving, or eligible to receive. For up-to-date Complaint Line contact information, please visit the OCA’s [website](https://www.mass.gov/oca-complaint-line) at: <https://www.mass.gov/oca-complaint-line>

OCA staff members provide support to individuals seeking help in identifying or navigating resources related to the health, education, safety and/or the well-being of any child or young adult in the Commonwealth. OCA staff can assist individuals with resolving a problem that involves a state agency by providing information and referrals as needed.

The OCA keeps information received on the Complaint Line in a confidential database. This helps the OCA track issues that impact children, young adults and their families, assists in establishing priorities for future research and evaluation projects, guides OCA staff in identifying additional resources, and enhances our ability to respond to individuals who contact our office.

Not all Complaint Line contacts are a complaint or a concern. Rather, some individuals contact the OCA seeking only information and referrals. To distinguish between these two types of contacts, the OCA has designated two categories for the Complaint Line:

1. **Complaint:** An individual expresses dissatisfaction or disagreement about services being provided to a child or young adult of the Commonwealth.
2. **Information and Referral:** An individual requests information, referrals, or education on a specific topic and does not express dissatisfaction with any agency or program that provides services to a child or young adult of the Commonwealth.

In FY21, the number of individuals who contacted the OCA Complaint Line increased from FY20 with the largest increase in the second half of the fiscal year. The OCA attribute this increase, in part, to the pandemic and March 31, 2021 release of [A Multi System Investigation into the Death of David Almond](#). Consistent with FY20, parents are the individuals who most commonly contact the Complaint Line. Individuals categorized as “Other” were the second most common in FY20, whereas grandparents were the second most common in FY21.

More detailed information about the OCA’s FY21 Complaint Line data will be provided in a forthcoming separate FY21 Data Report.

REPORTS OF ABUSE AND/OR NEGLECT IN OUT-OF-HOME SETTINGS

The Massachusetts Mandatory Reporter Law (M.G.L. c. 119 § 51B(l))⁴ for child maltreatment requires the OCA receive from Massachusetts Department of Children and Families (DCF) reports of abuse and/or neglect⁵ that have been investigated and supported regarding any child in certain out-of-home settings. These out-of-home settings include foster care, congregate care programs, childcare facilities, public schools, private schools, after-school and summer programs, school-funded transportation companies, and hospitals.

Compared to FY20, the number of reports of abuse and/or neglect that have been investigated and supported by DCF decreased in FY21, which is the direct result of the national decline in the number of abuse and/or neglect reports filed during this time period and attributed to the pandemic. The number of supported reports of abuse and/or neglect received across childcare, congregate care and public-school settings decreased from FY20 to FY21, but the number of reports about foster care settings remained about the same. **Detailed data and analysis about our FY21 report of abuse and/or neglect in out-of-home settings will be provided in a separate FY21 Data Report.**

OCA staff review, analyze and discuss each report from DCF. The purpose of this review is to evaluate the safety and well-being of the child(ren) involved and the quality of the DCF investigation. In select circumstances, the OCA will request supplemental information regarding the incident through collaboration with the agencies involved, such as the licensing agency.⁶ The OCA requests this information to review any challenges the individual out-of-home setting is experiencing, such as workforce retention, training, or unclear programmatic policy. The OCA also examines trends and patterns relative to the care of children who are not in their homes, and systematic and cross-agency issues. When determined necessary by the OCA, we provide policy, practice, and case-specific feedback to the relevant state agencies involved.

The OCA will identify an out-of-home setting for an in-depth administrative review when there is concern that a failure to follow policy and/or practice placed a child at increased risk of injury or the child suffered a fatality, near fatality or serious bodily injury. OCA reviews include gathering in-depth background information on the out-of-home setting, the provider agency responsible for the management of the out-of-home setting, a comprehensive review of prior reports of abuse and/or neglect filed on the out-of-home setting, and, in selected reviews, non-compliance reports and corrective action plans from the licensing agency involved.

⁴ See: <https://malegislature.gov/laws/generallaws/parti/titlexvii/chapter119/section51b>

⁵ A report of abuse and/or neglect filed with DCF is a “51A” report. The “51B” report is the DCF investigation into the allegations of abuse and/or neglect (M.G.L. c. 119 § 51B). See: <https://malegislature.gov/laws/generallaws/parti/titlexvii/chapter119/section51b>

⁶ The Department of Early Education and Care (EEC) is responsible for the licensing of childcare programs, congregate care programs and foster care placement agencies. The Department of Mental Health (DMH) licenses and monitors acute private and general hospitals with inpatient psychiatric units in Massachusetts.

In addition to our analysis of concern for abuse and/or neglect in individual out-of-home settings, the OCA aggregates the information learned from these reviews to identify gaps or trends in policy or practice across out-of-home settings.

More detailed information about the OCA's FY21 data on abuse and/or neglect in out-of-home settings will be provided in a forthcoming separate FY21 Data Report.

CRITICAL INCIDENT REPORTS

The mandate of the OCA is broad. In addition to receiving and reviewing DCF reports of abuse and/or neglect that have been investigated and supported regarding children in certain out-of-home setting, the OCA's enabling statute requires state agencies⁷ providing services to children or young adults to notify the OCA if a child or young adult suffers a fatality, near fatality, serious bodily injury, or emotional injury. These are called critical incident reports (CIRs).

OCA's Critical Incident Definitions

State agencies are required to submit "critical incident reports" to the OCA when the incident meets the following definitions:

Fatality: A fatality occurs when a child or young adult between the age of birth to 22 dies.

Near Fatality: Near fatal injuries are accidental, the result of a medical condition, or the result of abuse and/or neglect. A near fatality designation is dependent on verbal certification by a physician that the child or young adult's condition is considered life-threatening.

Serious Bodily Injury: Serious bodily injuries are accidental, the result of an underlying medical condition, or the result of abuse and/or neglect and lead to bodily injury "which involves a substantial risk of death, extreme physical pain, protracted and obvious disfigurement or protracted loss or impairment of the function of a bodily member, organ or mental faculty or emotional distress." (M.G.L. c.185 § 5)

Emotional Injury: An emotional injury occurs when a child or young adult is known to witness the fatality or life-threatening incident of an individual related to an unexpected medical event, overdose, violent act, or suicide.

Other: A state agency will sometimes report incidents that do not meet the definition of a critical incident, but the agency believes the incident is important to share with the OCA. An example of this type of discretionary report might involve an altercation between youth placed in an out-of-home setting or incidents of violence in the community that involve children receiving services.

The death or serious bodily injury of a child or young adult is a significant event that deserves prompt attention. While only the Office of the Chief Medical Examiner can make the final determination regarding the cause and manner of death, the report of a critical incident to the OCA

⁷ During FY21, the following EOHHS agencies reported critical incidents concerning the children and young adults they serve: Department of Children and Families (DCF), Department of Developmental Services (DDS), Department of Mental Health (DMH), Department of Public Health (DPH), Department of Youth Services (DYS). DCF report critical incidents if a child and/or young adult was involved in a report of child abuse and/or neglect intake, investigation, or open case at the time of the incident or within the preceding 12 months. DDS, DMH, DPH and DYS report critical incidents if a child and/or young adult is receiving services from their agency at the time of the incident.

provides timely information about the nature and circumstances of the event that led to the injury or death of a child or young adult.

The number of Critical Incident Reports (CIRs) received by the OCA increased slightly in FY21. The same is true for the number of CIRs received from the Department of Children and Families (DCF). The number of fatalities remained about the same, but number of emotional injuries decreased from FY20 to FY21. The number of overdoses and attempted suicides increased, and the number of suicides reported in CIRs remained about the same from FY20 to FY21. **Detailed data and analysis about the OCA's FY21 critical incident reports will be provided in a forthcoming separate FY21 Data Report.**

The OCA categorizes and analyzes all critical incidents and events that led to the injury or death of the child or young adult involved. We use the information learned from these reported incidents to determine policy and/or practice changes that could be instituted or refined to prevent future risks to children, to determine whether there are trends or patterns that may need to be addressed by new policies, procedures, and/or changes in law or regulation, and to identify trends where the Commonwealth would benefit from greater data gathering and analysis. In limited circumstances, the OCA will request the reporting agency's senior management to also conduct an immediate review and provide their findings and recommendations to the OCA.

When the OCA receives a critical incident report, we conduct an immediate administrative review to learn more about the circumstance of the incident and the reporting agency's involvement with the family. For critical incident reports received from DCF, we focus our review on whether there was a missed opportunity for DCF to assist the family and protect the child and assessing case practice and compliance with DCF policies and procedures. For children and young adults receiving services from agencies other than DCF, OCA staff request additional information in select cases to review policy and case management practices.

When the OCA determines through an administrative review that the actions or inactions of a reporting agency may have contributed to the incident, or the child, young adult or family is not receiving the appropriate services to meet their needs, we may initiate an investigation. An investigation could include a request for additional state agency records, relevant agency policies, and interviews with departmental staff to learn more about the family history and involvement with the agency. This information is helpful to identify case practice concerns specific to the child and family involved, as well as system-wide patterns and trends about child maltreatment, injury, suicide and other issues or associated risk factors. When the OCA identifies an individual case practice concern or system-wide pattern or trend either through an administrative review or investigation, we contact the agency involved to share information and promote accountability. If a systemic issue is identified, the OCA will seek the policy, practice or legislative changes necessary to address the issue.

The OCA is committed to working across the various child-serving systems, and particularly in collaboration with state agencies, to prevent the physical harm and/or death of all children and

young adults. The OCA will continue to work with the reporting agencies to develop strategies aimed at protecting children's safety.

INVESTIGATIVE REPORT ON THE DEATH OF DAVID ALMOND

On October 23, 2020, the OCA received a critical incident report from the Department of Children and Families (DCF) about the death of 14-year-old David Almond, the serious bodily and emotional injury of his twin brother Michael and the emotional injury of their younger paternal half-sibling, Aiden.⁸ Consistent with OCA practice, we conducted an immediate administrative review to learn more about the circumstances of the event and DCF's involvement with the family. The DCF critical incident report detailing the harm that came to David, Michael, and Aiden was of such an extreme nature that the OCA initiated a full-scale multi-system investigation. The Secretary of the Executive Office of Health and Human Services also requested an investigation. This investigation is based on the unique circumstances of the situation – the egregiousness of David's death, the harm to Michael and Aiden, the vulnerability of David and Michael's disability profile, the interplay of the multiple state systems involved, and the complications the COVID-19 pandemic had on the provision of services to this family.

Through this investigation, the OCA determined that collectively and individually, the state systems involved lacked general knowledge about disabilities, and the lack of specific knowledge of how these children's disabilities presented in them as individuals resulted in state systems overlooking the capacity of the caregivers and the risk factors and warning signs that precipitated David's death. This was compounded by the unprecedented strain the COVID-19 pandemic is having on the Commonwealth's children and families and on the public and private entities that provide support to them. The pandemic has required that state systems continuously shift and alter their operating procedures to continue their work in a manner that is safe. This shifting resulted in some confusion regarding policies and procedures, prioritization of some policies and procedures over others, and extensive new and changing guidance for practitioners to internalize in trying to meet the requirements of their roles.

On March 31, 2021 the OCA released [A Multi System Investigation into the Death of David Almond](#), which explicitly identified 26 recommendations for policy, procedure and practice improvements among the Department of Children and Families, the Department of Elementary and Secondary Education, the Massachusetts Juvenile Court and the Massachusetts Probation Service. It is the OCA's obligation to critically examine David's death, and all deaths and serious injuries to children receiving state services and ask how we, as a Commonwealth, can do better. Once the OCA became aware of how many state agencies, entities, and providers were involved with this family prior to the death of David, the OCA recognized that an investigation into this case was an opportunity to engage in a public discussion of the strength of our state system of service provision to children and families.

Governor Baker committed to expeditiously implementing all the OCA's recommendations for the executive branch state systems involved. The OCA is equally committed to ensuring there is increased protections and safety nets for all children in the Commonwealth. We are continuously monitoring the state entities commitment and progress on the implementation – including actively

⁸ Aiden is a pseudonym to protect this child's identity and privacy.

advising on policy and practice updates and development. Additionally, we continue to reach out to legislators, service providers, advocates, and caregivers about the [OCA Complaint Line](#) and ask them to alert the OCA if they have trouble accessing needed services or have a concern for a state agency's involvement with a child and family. The OCA has dedicated and skilled staff who will listen to an individual's concerns and provide resources, information, and other options to assist with addressing the problems brought to our attention.

SECTION 2: OCA-LED COMMISSIONS

JUVENILE JUSTICE POLICY AND DATA BOARD

The OCA chairs the [Juvenile Justice Policy and Data \(JJPAD\) Board](#), which was created as part of *An Act Relative to Criminal Justice Reform* (Chapter 69 of the Acts of 2018). The Board is a permanent entity that is chaired by the Child Advocate and comprised of members representing a broad spectrum of stakeholders involved in the juvenile justice system.

The Legislature charged the JJPAD Board with evaluating juvenile justice system policies and procedures, making recommendations to improve outcomes based on that analysis, and reporting annually to the Governor, the Chief Justice of the Trial Court, and the Legislature. The statute creating the JJPAD Board also placed a special emphasis on improving the quality and availability of juvenile justice system data, including data on racial and ethnic disproportionality, and assessing the quality and accessibility of community-based services, including diversion programming. The JJPAD Board is charged with evaluating juvenile justice system policies and procedures, as well as the implementation and impact of statutory changes to the juvenile justice system and making recommendations to the Legislature for further improvements.

The JJPAD Board has two subcommittees – a Data Subcommittee and a Community-Based Interventions Subcommittee – both of which are chaired by the OCA. The Childhood Trauma Task Force, described in more detail below, also operates under the umbrella of the JJPAD Board.

FY21 ACTIVITIES AND ACCOMPLISHMENTS

Ongoing System-Level Analysis of Juvenile Justice System:

- In the fall of 2021, the JJPAD Board, which the OCA chairs, released a report with [recommendations](#) for supporting youth and preventing further delinquency, following an exploration into how the COVID-19 pandemic has affected youth's current—as well as possible future—involvement with the Massachusetts juvenile justice system. The report's analysis, most of which was conducted by OCA staff in FY21, draws from research on risk factors of juvenile justice involvement, delinquency prevention, and positive youth development. The report outlines numerous concrete actions state government actors – from legislators who allocate funding to individual practitioners who work with youth on a day-to-day basis – can take to mitigate the impact the pandemic has had on youth and support their positive development. The report is available at <https://www.mass.gov/doc/covid-19-and-the-massachusetts-juvenile-justice-system-jypad-report-october-2021/download>.

Improving Aggregate Data Collection:

Accurate, accessible data on the use of the juvenile justice system is an important tool for helping us understand how our system functions and how it can be improved. In particular, analysis that looks at data broken down by the race/ethnicity of the youth can help us better understand the disparities that exist in our system and how we might address them. It is for this reason that the JJPAD Board, under the leadership of the OCA, has prioritized improving the availability and public accessibility of juvenile justice system data. In FY21, this work included:

- In November 2020, the JJPAD Board issued its [second annual report](#), which includes data on youth interactions with a variety of justice system entities and process points, including arrests, court filings, detention, probation and commitments to the Department of Youth Services. The report also examined the data in a variety of ways, including by the youth's race/ethnicity, age and gender; by the offense type/severity; and by geography. The 2020 report improved upon the 2019 report by including additional data elements, including data on arraignments, dangerousness hearings, youthful offenders, and a variety of additional data elements from the Department of Youth Services, including data on youth who identify as LGBTQ+.
- In November 2020, the JJPAD Board also released [Recommended Data Reporting Standards](#) for juvenile justice and child-serving entities to use when reporting key demographic variables to the OCA for JJPAD reports. There are currently no state-level requirements that entities report data broken down by specific categories (e.g. race, ethnicity, gender identity, sexual orientation) in any particular way, which makes it difficult to impossible to measure any big-picture trends, disparate impact, and/or gaps/challenges across the entire juvenile justice system. The goal of these Data Reporting Standards is to bring more continuity and clarity to the way these important data elements are collected and reported.
- As recommended in the JJPAD Board's [June 2019 report on juvenile justice system data](#), and as envisioned by the Legislature in *An Act Relative to Criminal Justice Reform*, the OCA worked in partnership with the Executive Office of Technology Services and Security (EOTSS) and the JJPAD Data Subcommittee to launch a [juvenile justice system data website](#). This interactive website, which makes aggregate juvenile justice system data publicly accessible, went live in November 2020. From November till the end of FY21, there were 4,689 unique pageviews on the site.

Expanding and Improving Community-Based Interventions:

The JJPAD Board was also charged by the Legislature with studying the quality and accessibility of community-based services, including diversion programming, with the goal of connecting youth with needed services earlier and reducing the number of youth entering and moving through the juvenile justice system. In FY21, that work included:

- In March 2021, the JJPAD Community-Based Interventions released the Massachusetts Youth Diversion Program [Model Program Guide](#). The Guide contains recommendations on

program design and delivery for the Diversion Learning Lab project that was recommended in the JJPAD Board's [2019 report on diversion](#). It is the product of over a year of Subcommittee work and was developed based on research on successful diversion programs in Massachusetts and across the nation. It is intended as a recommended starting point for the Learning Lab project, understanding that lessons will be learned in the implementation process resulting in necessary changes in program design and delivery.

- In the spring of 2021, the OCA and the Department of Youth Services (DYS) announced a partnership to launch a three-site diversion pilot program (“Learning Lab”), using the Model Program guide as a starting point. With funding provided by the OCA, DYS issued a competitive Request for Proposals for diversion coordination providers in FY21, and the project officially kicked off in October 2021. The goal of this project is to implement diversion programming based on the JJPAD Diversion Model Program Guide (including conducting evidence-based assessments and matching diversion services to the specific needs of each youth), study the results, and make adjustments to the program model as needed. Ultimately, the OCA hopes this model can expand statewide to ensure youth across the Commonwealth have access to high quality diversion services.
- In the spring of 2021, the JJPAD Board initiated a new project focused on the Child Requiring Assistance (CRA) system. The project, which is led by the Community-Based Interventions subcommittee, includes taking a retrospective look at the impact of the 2012 [CHINS Reform](#) legislation and identifying opportunities for further improvements to the system, including opportunities to increase CRA prevention efforts. This project will continue through FY22 and result in a legislative report in Calendar Year (CY) 2022.

CHILDHOOD TRAUMA TASK FORCE

The OCA chairs the [Childhood Trauma Task Force](#) (CTTF), which was also created by *An Act Relative to Criminal Justice Reform* (Chapter 69 of the Acts of 2018). The CTTF is charged with determining how the Commonwealth can better identify and provide services to youth who have experienced trauma, with the goal of preventing future juvenile justice system involvement.

The membership of the Childhood Trauma Task Force is statutorily derived from the membership of the JJPAD Board, and so in practice the CTTF operates as a JJPAD subcommittee.

Childhood trauma is widespread. It is estimated that 26% of children in the United States will witness or experience a traumatic event before the age of four.⁹ Additionally, some children – including Black and Hispanic/Latinx children as well as children living in poverty – face more systemic challenges and are therefore significantly more likely to experience trauma, and to experience it more frequently.¹⁰ That disproportionate experience of trauma is an early source of systemic inequity, the impact of which can be seen in our educational, health care, judicial, and social service systems.

Recognizing the complexity and scale of the group’s assignment, the Legislature created the CTTF as a permanent entity. Learn more about the CTTF here: <https://www.mass.gov/lists/childhood-trauma-task-force-cttf>

FY21 ACTIVITIES AND ACCOMPLISHMENTS

- In December 2020, the CTTF issued [“From Aspiration to Implementation: A Framework for Becoming a Trauma-Informed and Responsive Commonwealth.”](#) The report included a 20-page framework laying out five Guiding Principles for establishing a Trauma-Informed and Responsive (TIR) approach in an organization as well as five Domains in which the Guiding Principles should be applied. The 2020 report also included CTTF’s recommendations for how the Commonwealth can support organizations wanting to become TIR, including as a primary recommendation that the state fund the development of a Center on Child Wellbeing and Trauma to provide training and technical assistance to child-serving organizations. Funding to support the launch of the [Center on Child Wellbeing and Trauma](#) was included in the OCA’s FY21 budget appropriation, and the Center, which is a joint project between the OCA and the Commonwealth Medicine division of the UMass Chan Medical School, officially launched in October 2021.
- In the spring of 2021, the CTTF began a project focused on how the Commonwealth can do a better job identifying and providing services to children and youth who have experienced trauma, with a particular focus on trauma screening practices in various child-serving

⁹ 1 Briggs-Gowan, M. J., Ford, J. D., Fraleigh, L., McCarthy, K., & Carter, A. S. (2010). Prevalence of exposure to potentially traumatic events in a healthy birth cohort of very young children in the northeastern United States. *Journal of Traumatic Stress*, 23(6), 725–733.

¹⁰ 2 Sacks, V. & Murphey, D. (2018). The prevalence of adverse childhood experiences, nationally, by state, and by race or ethnicity. *Child Trends*. <https://www.childtrends.org/publications/prevalence-adverse-childhoodexperiences-nationally-state-race-ethnicity>

sectors (e.g. K-12 pediatrics, education, child welfare). The CTTF issued an interim report on this topic in December 2021, which is available [on our website](#).

MANDATED REPORTER COMMISSION

The Child Health and Wellness Bill signed by Governor Baker on November 26, 2019 established the [Mandated Reporter Commission](#)¹ (“MR Commission”). The Child Advocate chaired the MR Commission which was charged with reviewing the mandated reporter law and regulations for reporting child abuse and neglect, and making recommendations on how to improve the response to, and prevention of, child abuse and neglect. The MR Commission was comprised of statutory members who represented a broad range of public entities who have extensive experience with mandated reporting in the Commonwealth.

The MR Commission began meeting in February 2020 and all meetings were open to the public pursuant to the Open Meeting Law. As a result of the Covid-19 pandemic, MR Commission meetings convened virtually starting in March 2020 and remained virtual until the completion of the Commission’s work in June 2021. The MR Commission submitted a Status Report ([Mandated Reporter Commission Status Report | Mass.gov](#)) to the Legislature in December of 2020 detailing the work of the MR Commission and the MR Commission’s commitment to gaining feedback from the public on the proposals before the MR Commission.

Through its work, the MR Commission recognized that hearing from mandated reporters themselves, and from the public who experience reporting, was critical to understanding the reality of mandated reporting. After detailing the MR Commission’s own considerations on potential changes to the mandated reporting law, the MR Commission opened the discussion up to the public in the form of public hearings and a public comment period for the submission of written comments. It was necessary for the MR Commission to outline the scope of the issues first so that the MR Commission could gather valuable feedback from the public on the content of the work of the MR Commission, but also hear from the public about potential consequences and outcomes of any potential changes to the law that the MR Commission had failed to foresee.

The public comment period resulted in many voices expressing dismay that the MR Commission failed to grasp the gravity of the effect that mandated reporting has on certain segments of the population: particularly Black, Indigenous, and People of Color (“BIPOC” groups). The MR Commission acknowledged the gaps in available data to help guide its work in this area while simultaneously benefitting from the data on disproportionality that DCF was in the process of collecting, analyzing, and presenting as part of the work of DCF and the OCA in the Data Work Group. Serious concerns were raised in the public comment period about the effectiveness of child protective services to benefit families and the role that mandated reporting plays in bringing people, often people from disenfranchised populations, to the door of child protective services.

The MR Commission reviewed and discussed the public commentary about the MR Commission’s work and found that some of the gaps between the work of the MR Commission and the public commentary were too fundamental to be bridged through the MR Commission’s efforts to fulfill its statutory mandate. The MR Commission’s work aimed at refining, clarifying, and narrowly tailoring the mandated reporter statute to meet the goal of quickly and effectively identifying child abuse and neglect. A portion of the public commentary focused on the detrimental effects of

mandated reporting on families and communities. The concerns expressed represent the historic tension underlying state-mandated child protective services. The complexity of the discussion resulted in the MR Commission determining that it was unable to issue recommended statutory changes to the Legislature, as required by the MR Commission's statute. The MR Commission issued a final report which documented the detail of the issues addressed by the MR Commission and summarized the deliberations of the MR Commission.

The MR Commission submitted its final report to the Legislature in June 2021 ([Mandated Reporter Commission Final Report | Mass.gov](#)). The MR Commission's work concluded with the submission of the final report.

The Final Report Summary written by the Child Advocate in her role as Chair of the Commission noted, in part:

"Mandated reporting may seem, on its face, to be an uncomplicated idea. The idea that individuals would call upon their knowledge as adults and as professionals to identify when children are being abused and/or neglected and report that information to child protective services is deceptive in its simplicity.

The reality, as understood and grappled with by this Commission, is that mandatory reporting is an extraordinarily complex issue. Commission members have understood that the topic requires careful weighing of many factors: the imperative to protect children from abuse and neglect whenever possible, the value of the integrity of the family unit, the trauma that can accompany child protective services involvement, the trauma that can come when child protective services does not become involved, the sometimes illusive line between a circumstance when a child is in need of resources and a circumstance when a child is in need of protection, the possibility that fear of state involvement will prevent families from accessing resources, and the reality that even mandated reporters will not always recognize the signs of distress when they see them.

In addition to these factors is a deep concern that a system that relies on individual judgment determinations is inextricably tied to individual biases and structural racism, ableism, and classism. We know better than to rely on the seeming neutrality of statutory language and we also know that unanticipated consequences will inevitably come with any change to law or policy."

The MR Commission's final report is an accurate portrayal of the work of the MR Commission, puts forward valuable ideas for next steps, and is hopefully the start of a well-informed and detail-driven conversation about the future of mandated reporting in the Commonwealth. The OCA was privileged to chair the MR Commission, which was a historic and critical opportunity to bring expert voices to the table to discuss mandated reporting. The OCA thanks the MR Commission members who consistently delved into difficult and complex issues in order to further the public discussion on mandated reporting.

The OCA remains committed to revision of the mandated reporter law to ensure an effective process of reporting child abuse and neglect. The OCA has continued to focus on the issue of mandated reporting in the Commonwealth and has dedicated time and resources to practical next steps in its FY22 work.

CHILD WELFARE DATA WORK GROUP

Over the past decade, the Legislature increased the number of statutorily mandated reports DCF is required to produce. Often, these new reports and requests for data have been a response to the changing needs and emerging concerns regarding children and families served. As new reports were added, older reports were not always revisited; reports that were requested in response to a specific event, and may no longer be relevant, remain on the books. In recent years, as DCF has transitioned between Commissioners and undergone major structural changes, it has been challenging to keep up with the increased volume of reports in a timely manner. Generating reports that may no longer be used, or do not add value to policymakers or the public, drains limited resources that could be more productively deployed.

In response concerns about outdated reporting requirements raised by the Child Advocate and DCF, the Legislature statutorily mandated the creation of a Child Welfare Reporting Task Force (which later became known as “Data Work Group” or “DWG”) in [Section 128 of Chapter 47 of the Acts of 2017](#). The DWG was charged with developing *“basic data measures, progress measures and key outcome measures to inform the legislature and the public about the status and demographics of the caseload of the department of children and families, the department’s progress in achieving child welfare goals, including safety, permanency and well-being, the status of proceedings in the juvenile court department that involve children in the department’s caseload and the status of children who are or have been involved in both the child welfare and juvenile justice systems.”*

The DWG consisted of the following members or their designees¹¹:

- Executive Branch Agencies: Executive Office of Health and Human Services, DCF (Co-Chair), and the OCA (Co-Chair);
- Legislative Branch: Senate and House Committees on Children, Families and Persons with Disabilities;
- Judicial Branch: Committee for Public Council Services;
- Advocacy Entities: Children’s League of Massachusetts, Massachusetts Law Reform Institute, Massachusetts Society for the Prevention of Cruelty to Children; and
- Child Welfare Experts: Kennedy School Professor and Purchase of Service providers.

The DWG began meeting monthly beginning in September 2017. *Section 129 and 152 of Chapter 47 of the Acts of 2017* establish an end date for the DWG effective February 1, 2022. The DWG’s work during this time included:

- The redesign of DCF’s Quarterly Profile, Fair Hearing, and Foster Care Review reports;
- The creation of DCF’s Annual Report;
- A review of DCF’s data during the COVID-19 pandemic; and

¹¹ The Juvenile Court determined that although it would not be appropriate for them to participate in the DWG, they would nonetheless review and comment on the drafts if requested.

- A review of DCF's data on racial and ethnic disparities, sexual orientation and gender identity (SOGI), and outcome measures

The DWG's meeting materials can be found at: <https://www.mass.gov/lists/data-work-group-meetings>.

The DWG's final report to the Legislature is forthcoming in Spring 2022.

CHILD SEXUAL ABUSE PREVENTION TASK FORCE

The Child Sexual Abuse Prevention Task Force (CSAP Task Force) was established by the Legislature in 2014 (Section 34 of Chapter 431 of the Acts of 2014) to develop guidelines and tools for the prevention of child sexual abuse by organizations serving children and youth, and to increase public awareness about child sexual abuse, including how to recognize signs, minimize risk and act on suspicions or disclosures of such abuse. The CSAP Task Force is a public-private collaboration of 28 offices, agencies, and child-and-youth serving organizations. This multidisciplinary team is co-chaired by the Child Advocate and the Executive Director of the Children's Trust.

Since the FY17 release of the CSAP Task Force report "[Guidelines and Tools for the Development of Child Sexual Abuse Prevention and Intervention Plans by Youth Serving Organizations in Massachusetts](#),"¹² the CSAP Task Force has focused on creating a first-of-its-kind website, [Safe Kids Thrive](#) which was launched in FY20, which builds on the report and provides youth serving organizations customizable planning tools and learning modules to address the topics identified as essential to safe environments in the original report:

The pandemic interrupted plans for a large public release of the Safe Kids Thrive website. However, outreach efforts directed at youth serving organizations has resulted in a large number of users as evidenced by the following:

FY21 SAFE KIDS THRIVE HIGHLIGHTS

- 23,514 unique website visitors
- 77% percent of all website visitors from Massachusetts
- Over 250 organizations trained

In FY19, the CSAP Task Force launched a new working group, which consisted of representatives from the Children's Trust, OCA, DCF, DPH, DYS, Children's Advocacy Centers (CACs), the Massachusetts Adolescent Sexual Offender Coalition, the Attorney General's Office and the District Attorney's offices to address issues associated with children and youth exhibiting problematic sexual behaviors.

¹² For more information see https://www.enoughabuse.org/images/stories/Child_Sexual_Abuse_Prevention_Task_Force_Report.pdf

SECTION 3: SPECIAL PROJECTS

COVID-19 RESPONSE

The Coronavirus Disease 2019 (COVID-19) pandemic has significantly impacted the lives of the Commonwealth's children and families and the systems that serve them. Beyond getting sick, many young people are experiencing social and emotional challenges as a result of the pandemic. Trauma faced in childhood can continue to affect them across their lifespan. Throughout the pandemic, the OCA has continued its ongoing core work of ensuring equitable access to quality state services for children in the Commonwealth. The OCA has also been able to apply our knowledge about the system and leverage our relationships to identify consequences of the crisis and recommend actionable next steps for the Commonwealth. The OCA recognizes the pandemic has impacted all children, but particularly children who were already experiencing trauma, were in a vulnerable state, or who were receiving services from a state agency.

Examples of the OCA's COVID-19 response during FY21 include:

- **OCA Complaint Line:** The OCA remains in constant contact with legislators, service providers, advocates, and others who work with children and families to provide them with information about the OCA's Complaint Line and encourage outreach to the OCA if they have trouble accessing needed services. The OCA serves as a resource connecting people to services, but also compiles data on the information received. The OCA gathered and analyzed COVID-19 related complaints and brought any systemic concerns to the attention of the state agency involved in an expedited fashion. More information about the Complaint Line can be found on pages 11- 12.
- **Housing Pilot for Transition Age Youth:** In partnership with EOHSS, the OCA launched a housing stability and support pilot program in February of 2021 targeted toward youth aging out of foster care who are facing homelessness during the pandemic. The goal of this pilot is to redesign the way the Commonwealth handles the challenges faced by transition-age youth (TAY) and to create a uniform standard and model for early planning and continued support for this population. More details about this pilot can be found on page 32.
- **Handhold MA Interactive Website:** In FY20, the OCA worked with the Department of Mental Health and EOHHS to design and launch an interactive website called "HandholdMA." This website provides family-friendly information on helping kids build resiliency, tips on managing lower-level behavioral issues, advice on when a child needs a more intense intervention, and a guide to available state and community behavioral health resources. In FY21, the OCA and DMH partnered again on an expansion of the website, adding in additional content specific to the needs of parents of infants, toddlers and adolescents and other modifications to the site to improve the user experience. The website, which is available in multiple languages, can be found here: <https://handholdma.org/>

- **JJPAD Report on the Impact of the Pandemic on Juvenile Delinquency and the Juvenile Justice System:** In the fall of 2021, the JJPAD Board, which the OCA chairs, released a report with [recommendations](https://www.mass.gov/doc/covid-19-and-the-massachusetts-juvenile-justice-system-jypad-report-october-2021/download) for supporting youth and preventing further delinquency, following an exploration into how the COVID-19 pandemic has affected youth’s current—as well as possible future—involvement with the Massachusetts juvenile justice system. The report’s analysis, most of which was conducted by OCA staff in FY21, draws from research on risk factors of juvenile justice involvement, delinquency prevention, and positive youth development. The report outlines numerous concrete steps state government actors – from legislators who allocate funding to individual practitioners who work with youth on a day-to-day basis – can take to mitigate the impact the pandemic has had on youth and support their positive development. The report is available at <https://www.mass.gov/doc/covid-19-and-the-massachusetts-juvenile-justice-system-jypad-report-october-2021/download>.

As we move forward with the understanding that many of the initial extremes of the pandemic, such as isolation from peers and school, have largely receded for those who are not medically fragile, the OCA continues to recognize, adapt to, and respond to the dangers of the pandemic on children and families. Our focus has shifted from dealing with some of the initial effects of the pandemic, to utilizing lessons learned during this unprecedented time for strengthening supports for children and families across the Commonwealth.

TRANSITION AGE YOUTH HOUSING PILOT

For the last several years, the OCA has participated in efforts to examine how the Commonwealth can better support the needs of youth and young adults who are receiving state services and embarking on a path into adulthood. This population of young people is commonly referred to as “Transition Age Youth” or “TAY.”

In conjunction with the Executive Office of Health and Human Services, an inter-secretariat work group consisting of EOHHS agencies (DCF, DMH, DTA, DDS) and DHCD began meeting in early FY20 to explore TAY supports. The OCA engaged Commonwealth Medicine in providing an assessment of the range of services that each state agency provided to transition age youth, and to identify national best practices. As part of this process, Commonwealth Medicine sought provider and youth stakeholder input and researched best practices for transition-age youth programming from other states. This work concluded with recommendations to improve outcomes for emerging adults engaged in the state’s systems of care.

The working group was reviewing the research when the COVID-19 began, and the group immediately pivoted to focus on urgent needs of transition-aged youth at-risk of experiencing homelessness, disrupted education, unemployment, behavioral health challenges, and more. In January 2021, the OCA, EOHHS, and the Unaccompanied Homeless Youth Commission successfully launched the first phase of a Housing Stability and Support Program (HSSP) pilot in Springfield, Holyoke, and Worcester that served young people, ages 18-21, who opted-out of post-18 DCF care. Through a cross-agency state government team and community services providers at LUK Inc., the City of Springfield and the Center for Human Development (CHD), these young adults were connected to housing, education, employment, transitional assistance programs, and other on-going supports as needed. State government partners supporting this pilot also include DCF, Department of Mental Health (DMH), Department of Developmental Services (DDS), Department of Transitional Assistance (DTA), Department of Housing and Community Development (DHCD), the Department of Youth Services (DYS), MassHealth, and the UMass Chan Medical School .

The pilot was supported by a \$300,000 earmark in the OCA’s FY21 budget, along with additional funds provided by EOHHS. Due to preliminary data showing the pilot program to be successful in assisting this population, the Legislature allocated \$300,000 in funding to expand this pilot program to additional locations across the state in FY22. Full pilot program evaluation results are expected back in Fiscal Year 2022.

YOUTH SUICIDE PREVENTION

As part of the OCA's focus on preventable childhood injury and death and following a review of a decade's worth of trend data, the OCA has prioritized addressing youth suicide. Youth suicide is a highly preventable but serious public health concern. Childhood, adolescence, and young adulthood are important social, emotional and brain development periods; as such, suicide prevention efforts for youth vary from those aimed at adults.

During FY20, the OCA researched youth suicide among different cohort groups and released a report entitled, "[Youth Suicides in Massachusetts: A Cohort Perspective in National Context](https://www.mass.gov/doc/oca-report-on-youth-suicide-in-massachusetts/download)." The OCA took a comprehensive look at youth suicide in Massachusetts across all categories of children and young adults and focused in on our most vulnerable populations, including youth involved with the child protection and juvenile justice systems. The report is available at:

<https://www.mass.gov/doc/oca-report-on-youth-suicide-in-massachusetts/download>

To better understand youth suicide prevention efforts throughout Massachusetts, in May 2021 the OCA launched the "Massachusetts Youth Suicide Prevention Initiatives Survey," which was widely distributed to child-serving state entities and organizational partners across the Commonwealth. In addition to the survey, the OCA conducted a series of informational interviews to understand the current policies, practices, and challenges that Massachusetts child-serving state agencies and their partners face in pursuing youth suicide prevention work. The OCA will release an analysis of this survey in the spring of Fiscal Year 2022 and hopes these efforts will make strides toward resolving a largely preventable public health issue—one that has unfortunately been exacerbated by the current pandemic and its impact on children and families' mental health, economic security, and sense of safety.

COLLABORATION WITH THE OFFICE OF THE INSPECTOR GENERAL

The Office of the Inspector General (OIG) has been working with DCF for several years to improve the administration of the agency's contract with the Judge Baker Children's Center (JBCC) to run DCF's after-hours hotline. In 2020 the OCA was invited to collaborate with the OIG in this effort and the OCA has continued this work through FY21. The OCA is able to leverage our clinical expertise, knowledge of DCF and child protection, and policy and oversight work to assist in this collaboration. This work focuses on improving the substantive and procedural work of the hotline by focusing on hotline staff trainings, staff performance metrics, call metrics, and consistency in decision-making between hotline staff and area office screening decisions. The OCA is grateful for the opportunity to collaborate with the OIG in this manner.

SECTION 4: LEGISLATIVE AFFAIRS

As an independent agency charged with making recommendations for the improvement of services and the protection of children, the OCA communicates regularly with the Massachusetts Legislature. The OCA routinely provides testimony for bills before the Legislature on the many issues that impact children. The OCA has also served as a partner to the Legislature in designing and analyzing bills on any matter relevant to the OCA's work and/or expertise. The OCA has prioritized advocacy on a number of policy issues during the 192nd Legislative Session, some of which include the following pieces of legislation:

CHILD FATALITY REVIEW TRANSFER

The OCA is an active participant in the Massachusetts Child Fatality Review (CFR) program and a member of the State Child Fatality Review Team. The CFR program's charge is to decrease the incidence of preventable child fatalities and near fatalities in the Commonwealth. The program is comprised of local child fatality teams and a state child fatality team.

The State CFR Team is currently chaired by the Office of the Chief Medical Examiner. In FY17-FY18, at the request of the State CFR Team, the OCA conducted a needs assessment of the CFR program, in which we recommended transferring oversight of the CFR program to a joint chairmanship between the Department of Public Health (DPH) and the OCA (the model followed by most states). The proposal has the support of the Secretaries of EOHHS and EOPSS, and the OCA is currently funding positions at DPH to facilitate the continued work of the CFR program. The OCA is seeking legislation effectuating a transfer of the chairmanship from the Office of the Chief Medical Examiner to a joint chairmanship between the OCA and DPH.

This transfer would adequately reflect the role that DPH currently plays in facilitating the program as well as the funding and the policy-setting specialization provided by the OCA. The proposed legislation would also add the Department of Early Education and Care (EEC) to the state CFR team. Legislation to this effect has advanced through the legislative process several times, and was most recently included in [H.88, An Act relative to accountability for vulnerable children and families](#), which passed the House in March 2021.

ACCESS TO JUVENILE COURT RECORDS

The OCA currently has statutory authority to access court records as well as criminal offender record information (CORI) reviews. Although the courts have permitted the OCA access to individual files on a case-by-case basis for the purposes of investigations, we have been denied access to data on juvenile court records held by the state Department of Criminal Justice Information Services (DCJIS) because the OCA's statute does not explicitly authorize access to juvenile records from DCJIS.

The OCA believes that such access is critical to our work in the field of juvenile justice. Having access to this data would also allow us to better-fulfill requests for information we have received

from the Legislature. This session [H.1558/S.922](#), *An Act clarifying the child advocate's authority to access juvenile records*, was filed to resolve this issue.

The OCA also supports [H.1579](#), *An Act relative to juvenile court reporting requirements*, which would require the Juvenile Court to provide the OCA with information regarding key court performance measures in child abuse and neglect cases. Currently, the OCA has statutory authority to access to “relevant records held by the clerk of the juvenile court and the clerk of the probate and family court records.”¹³ The Trial Court has interpreted this to mean that the OCA has a right to access to individual case files for the purpose of investigations, but does not have a right to access to what they deem to be “bulk” data under Trial Court rules.

While the OCA can request the court file for any individual child, this information does not tell us about the common barriers to safety and timely permanency that trend data would provide to us. The OCA will receive anecdotal information about issues with care and protection cases, but cannot actively examine, discuss, or seek to promote changes when data about the process is not available to us. The care and protection process is a critical determinant of the experience that a child has with DCF when the case requires legal involvement. Specific data reporting from the courts, as proposed in H.1579, is the bird’s eye view that is critical to our unique ability to advocate on behalf of the Commonwealth’s most vulnerable children.

CENTER ON CHILD WELLBEING AND TRAUMA

In 2020, the CCTF recommended the creation of a Center on Child Wellbeing and Trauma (CCWT), supported with state funding, that would ensure all child-serving systems in Massachusetts are trauma-informed and responsive by providing child-serving systems with training, technical assistance, coordination and practice advancement support. The Massachusetts Legislature generously appropriated \$1 million in the FY22 state budget to support the creation and initial operation of the Center, which launched in October 2021. This session, Senator Harriet Chandler and Representative Kay Khan filed legislation, [S.81/H.238](#), *An Act Creating a Center on Child Wellness and Trauma*, that would add the CCWT to the OCA’s core statutory functions, thus ensuring there is administrative oversight of the Center and continuity of this work moving forward. Learn more about the Center on Child Wellbeing and Trauma at <https://childwellbeingandtrauma.org/>.

DCF DATA LEGISLATION

In 2020, the [Data Work Group](#), co-chaired by the OCA and DCF, proposed a comprehensive package of legislative reforms aimed at eliminating unnecessary DCF reports in favor of a redesigned reporting scheme that would require that DCF publicize relevant, timely, and critical data to the Legislature and the public in a manner that is consistent with the way in which the data is gathered by DCF so that such data can be adequately analyzed. The proposed bill language was the result of exhaustive technical and substantive conversations over a long period of time and resulted in DCF

¹³ M.G.L. c18C s.6

creating and submitting its first ever comprehensive annual report in 2019.¹⁴ The updated reporting scheme created by the Data Work Group also includes the collection of racial disproportionality and Sexual Orientation and Gender Identity (SOGI) data, which were previously not included in DCF's older reports.

Legislation to codify the reporting scheme was introduced in several pieces of legislation during the current legislative session.¹⁵ The OCA, as co-chair to the DCF Data Work Group, and in the OCA's own capacity of advocating for better access to data to improve services for children, is committed to continuing to work with the Legislature to pass a bill updating DCF's reporting scheme this legislative session.

BAIL PROCEDURES FOR JUSTICE-INVOLVED YOUTH

In 2019, the JJPAD Board, which is chaired by the OCA, recommended eliminating the \$40 administrative bail fee imposed on justice-involved youth and amending juvenile arrest procedures to require the Bail Magistrate, rather than the Officer in Charge, to make the decision about whether an arrested youth should be released or held on bail. Under current law, the Officer in Charge at the police station is given the authority to release a youth or call the Bail Magistrate to make a bail determination. This has led to confusion and inconsistent practices across the state.

S.923/H.1557, *An Act updating bail procedures for justice-involved youth*, proposes codifying this JJPAD recommendation into law. This legislation also codifies the standing order issued by the Executive Office of the Trial Court during the COVID-19 pandemic, giving Bail Magistrates the authority to administer any oath or required affirmations while taking bail through telephone or virtual options, in addition to the traditional in-person measures. It would also permit bail to be paid through a virtual or mobile payment option.

¹⁴ [H.4083](#) was filed by Representative Kay Khan in September of 2019 during the 191st legislative session. H.4083 would have codified the first series of recommendations from the Data Work Group into law. However, this legislation was not enacted into law. Similar legislation ([H.88](#), [H.239](#), and [S.32](#)) was filed at the beginning of the 192nd session and is currently pending.

¹⁵ See [H.88](#), [H.239](#), and [S.32](#).

SECTION 5: INITIATIVES AND COMMITTEES

In addition to the OCA's statutorily required work and leadership of various commissions, Director Mossaides and OCA staff participate as a member on many diverse boards, councils, and initiatives across the state that work toward improving the lives of children and young adults in the Commonwealth. Involvement with these groups helps to inform and educate staff about work being done across the state on issues involving children and provides an opportunity for us to share information and help synchronize policy.

For the purposes of this report, the OCA has broken down this work into two general categories: **Child and Family Safety and Wellbeing** and **Children's Mental and Behavioral Health**.

INITIATIVES & COMMITTEES: CHILD AND FAMILY SAFETY AND WELLBEING

Name	Target Population	Program Type	OCA's Role
Children's Trust The Massachusetts Children's Trust is a leader in efforts to stop child abuse in Massachusetts. https://www.childrenstrustma.org/	Children and families at risk of child welfare system involvement	Community based programs focused on strengthening families and preventing child abuse.	The OCA is a statutory member of the Children's Trust Board
Child Fatality Review Program The Massachusetts CFR program was established in 2000. The purpose of child fatality review is to "decrease the incidence of preventable child fatalities and near fatalities" in the Commonwealth." Eleven local teams meet under the leadership of the District Attorneys' Offices to conduct multidisciplinary reviews of individual deaths. The local teams provide recommendations to the State Team based on the individual cases they review. The State Team reviews those recommendations and gathers information from outside experts to determine whether those recommendations for statewide changes should be sent to the Governor and Legislature for consideration.	Children and youth under age 18 who have suffered a preventable fatality or near fatality	Multidisciplinary collaboration to increase awareness and develop or improve policy and practice at the state and local level.	The OCA is a statutory member of the State Team and OCA staff attend local CFRT meetings. The OCA provides financial support to the program to facilitate its work.
Family and Child Requiring Assistance Advisory Board	Youth who are involved in a Child	Oversight and monitoring of the	The OCA is a statutory

<i>An Act Relative to Families and Children Engaged in Services</i> went into effect in November 2012. This law created a new service system, replacing the Child in Need of Services system, to better serve children who have serious problems at home or in school, who repeatedly run away from home, who are habitually truant from school, or who are the victims of commercial sexual exploitation. The law also created the Families and Children Requiring Assistance Advisory Board to advise EOHHS on the development and implementation of the community-based service network and to monitor its progress. Family Resource Centers: https://www.frcma.org/	Requiring Assistance (CRA)	Family Resource Centers	member of the Advisory Board
Governor's Council to Address Sexual and Domestic Violence – High Risk and Assessment Work Group The GCSDV charge is to advise the Governor on how to help residents of the Commonwealth live a life free of sexual assault and domestic violence by improving prevention for all, enhancing support for individuals and families affected by sexual assault and domestic violence, and insisting on accountability for perpetrators.	Children and youth who are victims of sexual or domestic violence	Multidisciplinary collaboration to ensure victims and their children are identified and receive the support and services they need	Though not a member of the Governor's Council, the OCA's Director of Quality Assurance participates in the High Risk and Assessment Work Group
Interagency Safe Sleep Task Force The Interagency Safe Sleep Task Force is a multidisciplinary group of state and provider agencies who aim to reduce the incidents of sudden unexpected infant death through public awareness and creating systems that reduce SUID related risk factors. www.mass.gov/safesleep	All newborns and infants, birth to 12 months	Multidisciplinary collaboration to increase community awareness and develop or improve state agency policy and practice about safe sleep messaging	The OCA attends meetings to participate and contribute expertise to policy and practice improvements

Leadership Advisory Board of the Massachusetts Child Welfare Trafficking Grant Five years ago, Massachusetts received a five-year federal grant from the Administration for Children and Families to increase the capacity of the child welfare system to address child trafficking. The grant supports efforts to build greater interagency collaboration, enhanced infrastructure and new policies and practices to improve the prevention, identification, and response to trafficked youth across the Commonwealth. The Leadership Advisory Board meets quarterly to guide and inform the work of the grant.	Children and youth either experiencing or at-risk of human trafficking and commercial sexual exploitation	Increase the capacity of the child welfare system to address child trafficking	The OCA is a member of the Advisory Board and OCA staff attend the quarterly meetings
The Children's League of Massachusetts CLM is a non-profit association of private organizations and individuals who collectively advocate for policies and quality services in the best interests of the Commonwealth's children and youth and their families. http://www.childrensleague.org/	Children and youth	Advocate for policies and quality services in the best interests of the children, youth and families	The OCA is a special member and staff attend the monthly meetings to stay informed of emerging issues and contribute to the collaboration
Model School Resource Officer MOU Commission The Model School Resource Officer Memorandum of Understanding (SRO-MOU) Review Commission is tasked with designing a Memorandum of Understanding for the Commonwealth's School Resource Officer Program with the goal of creating a publicly engaged and responsible framework. This Commission was created by the Legislature in 2020 by <i>An Act Relative to Justice, Equity and Accountability in Law Enforcement in the Commonwealth</i>	School-aged children and youth	Developing a Model MOU to be used by school districts and police departments that have a School Resource Officer program	The OCA is a statutory member of the Commission

Encompass: Community and Collaboration for Foster Families Encompass serves foster families in the Central MA area. Each family is matched with a Peer Trauma Coach who works with the foster parents to understand how trauma affects a child and to make sense of a child's behaviors and feelings. With insight as to why children behave the way they do, foster parents are more effective in helping a child cope with trauma. Caregivers also have the opportunity to network with other foster parents as part of a virtual group designed to further enhance trauma informed parenting skills and encourage peer-to-peer discussions.	Foster Parents	Deploys trained staff to coach foster parents in trauma informed parenting and to engage community volunteers to provide meaningful, tangible supports to foster families.	The OCA attends meetings to contribute to this effort to support foster parents.
Restraint and Seclusion Initiative The Interagency Restraint and Seclusion Prevention Initiative was formed in 2009. The interagency initiative brought together DDS, DCF, DMH, DYS, DESE and EEC to work in partnership with providers, advocates, educators, schools, families and youth to focus on advancing trauma informed practices and prevent the use of coercive practices that traumatize/retraumatize youth, including restraint and seclusion use.	Children and youth	Advancing trauma informed practices and prevent the use of coercive practices that traumatize/retraumatize youth	The OCA is an active participant in this initiative and serves as a member of both the Executive and Advisory Committees

INITIATIVES & COMMITTEES: CHILDREN'S MENTAL AND BEHAVIORAL HEALTH

Name	Target Population	Program Type	OCA's Role
Children's Behavioral Health Initiative The CBHI Council works to ensure that children's behavioral health issues are brought to the forefront in policy discussions on healthcare reform by advising the Governor, the Legislature, and the secretary of EOHHS. https://www.mass.gov/childrens-behavioralhealth-initiative-cbhiv	Children and youth under age 21 with mental and behavioral health needs	Problem solving across areas of expertise to improve and streamline services and identify areas for improved state action	The OCA is a statutory member of the CBHI Advisory Council
Infant and Early Childhood Mental Health Policy Workgroup The purpose of IECMH Policy Workgroup, which is coordinated by DMH, is to provide a forum where both state and private stakeholders who touch the life of families with young children can gather to coordinate efforts, discuss most up-to-date information regarding IECMH both in Massachusetts and successful examples from other states that can be used by all stakeholders to educate and inform best practices, policies, and activities.	Ages birth to five	Coordination of policy and practice development	The OCA attends meetings to understand emerging issues and initiatives and to participate in policy and practice recommendations
Psychotropic Medication Task Force The Psychotropic Steering Committee is a multidisciplinary, interagency team led by DCF that meets regularly to ensure appropriate oversight of psychotropic medication use for youth in state custody.	Children and youth in DCF custody	Legally standardize requirements across all settings	The OCA is a participant in this initiative
The Children's Mental Health Campaign The CMCH is a coalition of families, advocates, health care providers, educators, and consumers from across Massachusetts dedicated to ensuring all children in Massachusetts have access to resources to prevent, diagnose, and treat mental health in a timely, effective and compassionate way. http://www.childrensmentalhealthcampaign.org/	Children at risk of and/or who have mental health issues	Ensuring all children have access to resources to prevent, diagnose, and treat mental health in a timely and effective way	OCA staff sit on the School Based Behavioral Health Advisory Board, which is part of the CMHC.