

OFFICE OF THE STATE AUDITOR

DIANA DIZOGLIO

Official Audit Report – Issued October 7, 2024

Office of the Child Advocate

For the period July 1, 2020 through March 31, 2022



OFFICE OF THE STATE AUDITOR

DIANA DIZOGLIO

October 7, 2024

Maria Mossaides, Director
Office of the Child Advocate
1 Ashburton Place, 11th Floor
Boston, MA 02108

Dear Ms. Mossaides:

I am pleased to provide to you the results of the enclosed performance audit of the Office of the Child Advocate. As is typically the case, this report details the audit objectives, scope, methodology, findings, and recommendations for the audit period, July 1, 2020 through March 31, 2022. As our audit was nearing completion, one additional high-risk area came to our attention. We looked into this area (covering the period July 1, 2020 through December 31, 2023) and included the results within this audit report. As you know, my audit team discussed the contents of this report with agency managers. This report reflects those comments.

I appreciate you and all your efforts at the Office of the Child Advocate. The cooperation and assistance provided to my staff during the audit went a long way toward a smooth process. Thank you for encouraging and making available your team. I am available to discuss this audit if you or your team have any questions.

Best regards,



Diana DiZoglio
Auditor of the Commonwealth

TABLE OF CONTENTS

EXECUTIVE SUMMARY	1
OVERVIEW OF AUDITED ENTITY	3
AUDIT OBJECTIVES, SCOPE, AND METHODOLOGY	7
DETAILED AUDIT FINDINGS WITH AUDITEE’S RESPONSE.....	10
1. The Office of the Child Advocate does not have documented policies and procedures for the creation of its annual reports and other published documents.....	10
2. The Office of the Child Advocate did not publish annual Advisory Council meeting minutes for fiscal years 2020 and 2021.	11
3. The Office of the Child Advocate did not report to the Joint Committee on Children, Families and Persons with Disabilities by its deadline.	13
4. The Office of the Child Advocate did not have evidence that some deliverables from its interdepartmental service agreements were completed.	14
5. The Office of the Child Advocate did not amend three interdepartmental service agreements in writing.	18
OTHER MATTERS	21
1. The Office of the Child Advocate should coordinate with other state agencies to ensure that children who have gone missing from, and later returned to, foster care are screened to determine whether they are, or are at risk of becoming, a victim of human trafficking.....	21
2. The Office of the Child Advocate did not have documented policies and procedures for developing temporary cost share agreements.	23
APPENDIX A	25
APPENDIX B	26

LIST OF ABBREVIATIONS

BIRCh	Behavioral Health Integrated Resources for Children
CCWT	Center on Child Wellbeing and Trauma
EOHHS	Executive Office of Health and Human Services
HHS OIG	US Department of Health and Human Services Office of Inspector General
ISA	Interdepartmental Service Agreement
MMARS	Massachusetts Management Accounting and Reporting System
OCA	Office of the Child Advocate
TAY	Transition Age Youth
UMass	University of Massachusetts
UPT	unified planning team
WTRC	Worcester Trauma and Resilience Collaborative

EXECUTIVE SUMMARY

In accordance with Section 12 of Chapter 11 of the Massachusetts General Laws, the Office of the State Auditor has conducted a performance audit of the Office of the Child Advocate (OCA) for the period July 1, 2020 through March 31, 2022.

The purpose of this audit was to determine the following:

- whether OCA advised the public and government stakeholders about how the Commonwealth may improve its services to and for children and their families as required by Section 2(d) of Chapter 18C of the General Laws;
- whether OCA developed formal policies and procedures for how it develops temporary cost share agreements as required by Section 2(e) of Chapter 18C of the General Laws; and
- whether OCA met the requirements of its interdepartmental service agreements (ISAs) relevant to the Commonwealth's enacted budgetary language for fiscal years 2020, 2021, and 2022.

Below is a summary of our findings, the effects of those findings, and our recommendations, with links to each page listed.

Finding 1 Page 10	OCA does not have documented policies and procedures for the creation of its annual reports and other published documents.
Effect	By not having documented policies and procedures for the creation of its annual reports, OCA risks not providing timely, relevant information to stakeholders, policymakers, and the general public, who must make decisions about the services provided to children and the issues affecting them. This can negatively impact children in Massachusetts.
Recommendation Page 11	OCA should document its aforementioned standard protocol for creating and issuing annual reports to better serve stakeholders and policymakers when they make decisions about the services provided to children in Massachusetts.
Finding 2 Page 11	OCA did not publish annual Advisory Council meeting minutes for fiscal years 2020 and 2021.
Effect	If OCA does not post its annual Advisory Council meeting minutes, the public and government stakeholders may not be informed of the current status of OCA activities.
Recommendation Page 12	OCA should publish annual Advisory Council meeting minutes.
Finding 3 Page 13	OCA did not report to the Joint Committee on Children, Families and Persons with Disabilities by its deadline.
Effect	The Joint Committee on Children, Families and Persons with Disabilities' ability to review and address OCA's child welfare concerns will be impeded by the delayed issuance of this report, creating potential negative impacts for the state government and the people it serves.

Recommendations Page <u>13</u>	<ol style="list-style-type: none">1. OCA should report to the Joint Committee on Children, Families and Persons with Disabilities by its deadlines.2. OCA should ensure that any extensions to its deadlines are approved in writing.
Finding 4 Page <u>14</u>	OCA did not have evidence that some deliverables from its ISAs were completed.
Effect	If OCA does not receive all deliverables outlined in the ISAs that it funds, then there is a potential waste of taxpayer dollars that could be used to provide other OCA services or fund other ISA projects.
Recommendations Page <u>17</u>	<ol style="list-style-type: none">1. OCA should document all information regarding OCA deliverables, including any amendments to previously established ISAs.2. OCA should develop, document, and implement policies and procedures to monitor the progress of ISA deliverables.
Finding 5 Page <u>18</u>	OCA did not amend three ISAs in writing.
Effect	OCA cannot hold the agencies with which it contracts accountable if it does not amend ISAs in writing and instead relies on verbal amendments to modify these contracts. Further, OCA cannot demonstrate satisfactory completion of these contracts to the public, stakeholders, or others.
Recommendation Page <u>20</u>	OCA should obtain written approval from the agencies with which it contracts and amend ISAs in writing to reflect verbally approved changes of ISA deliverables.

As our audit was nearing completion, an additional area of concern regarding human trafficking prevention measures, which was outside the original scope of our objectives, came to our attention. Given the high-risk nature of this area, we analyzed it while we were still engaged with the auditee. The results of this work (covering the period July 1, 2020 through December 31, 2023) are included in the “Other Matters” section of this audit report.

Post-Audit Action

After our audit work was completed, OCA posted and released Advisory Council meeting minutes for fiscal years 2020 and 2021, which are available on OCA’s website as of the date of this report.

OVERVIEW OF AUDITED ENTITY

The Office of the Child Advocate (OCA) was established by Section 2 of Chapter 18C of the Massachusetts General Laws, which states,

There shall be an office of the child advocate which shall be independent of any supervision or control by any executive agency. The office shall:

- (a) ensure that children involved with an executive agency, in particular, children served by the child welfare or juvenile justice systems, receive timely, safe and effective services;*
- (b) ensure that children placed in the care of the commonwealth or receiving services under the supervision of an executive agency in any public or private facility shall receive humane and dignified treatment at all times, with full respect for the child's personal dignity, right to privacy, and right to a free and appropriate education in accordance with state and federal law;*
- (c) examine, on a system-wide basis, the care and services that executive agencies provide children;*
- (d) advise the public and those at the highest levels of state government about how the commonwealth may improve its services to and for children and their families; and*
- (e) impose temporary cost share agreements . . . to ensure children's timely access to services.*

The office shall act to investigate and ensure that the highest quality of services and supports are provided to safeguard the health, safety and well-being of all children receiving services. The office shall examine systemic issues related to the provision of services to children and provide recommendations to improve the quality of those services in order to give each child the opportunity to live a full and productive life.

OCA partnered with the Executive Office of Health and Human Services (EOHHS), the University of Massachusetts (UMass) Chan Medical School, and the UMass Boston Behavioral Health Integrated Resources for Children (BIRCh) Project to launch and implement various programs to improve the quality of state services for children.

According to OCA's latest organization chart, as of April 1, 2022, OCA had 15 employees: the child advocate (director), four unit directors, two managers, one senior staff member, and seven additional staff members. OCA also has an Advisory Council, which has 23 members, including secretaries and

commissioners from various child-serving state agencies; the chief justices of the Juvenile Court, the Probate and Family Court, and the Superior Court; and one member appointed by the Governor.

Communicating with the Public and State Agencies

According to its internal control plan, OCA mainly communicates with the public by publishing annual reports. OCA and OCA-led commissions also publish various special project reports (covering topics such as the Massachusetts Juvenile Justice System and childhood trauma) and investigative reports (covering individual cases regarding children receiving state services) on its website. In addition to these publications, OCA hosts a public Advisory Council meeting every fall to update OCA Advisory Council members on its work.

Cost Share Agreements and the Unified Planning Team

Under Section 2(e) of Chapter 18C of the General Laws, OCA can create temporary cost share agreements as necessary. OCA establishes these cost share agreements, if necessary, following a review from the unified planning team (UPT). This UPT is an interagency review team, established by Section 16R of Chapter 6A of the General Laws.¹ The UPT consists of representatives from EOHHS, the Department of Early Education and Care, and the Department of Elementary and Secondary Education. The UPT reviews complex cases² and determines whether existing state services that the child is receiving are appropriate and adequate to meet the child's needs and whether additional state services are necessary. If the child needs additional state services, the UPT determines which state and/or local education agencies³ should provide and pay for those services.

According to Section 17.04 of Title 101 of the Code of Massachusetts Regulations, the referral process begins with any of the following parties submitting a referral form that is developed by EOHHS to the UPT:

- a state agency, such as the Department of Children and Families or the Department of Mental Health;

1. On November 8, 2022, the language in Section 16R of Chapter 6A of the General Laws was amended to require an OCA representative as a UPT member. However, for this audit, we are exclusively referring to the language in Section 16R of Chapter 6A of the General Laws that was effective on August 9, 2018, which did not require an OCA representative on the UPT.

2. Under Section 17.03 of Title 101 of the Code of Massachusetts Regulations, a complex case is defined as "a circumstance in which a child is involved with at least three state agencies."

3. According to UPT annual reports submitted to OCA by the UPT director of EOHHS, for fiscal years 2020 and 2021, some state agencies involved in the UPT case review included the Department of Children and Families, the Department of Mental Health, the Department of Developmental Services, the Department of Youth Services, and MassHealth.

- a justice of a court that oversees civil and criminal affairs regarding children;
- the child; or
- the child's parent or legal guardian.

After the UPT receives the referral form and meets with the relevant parties, the UPT has 30 days to determine which state agency services are appropriate and available to meet the child's needs, recommend which state agencies should provide those services, and how such services will be coordinated.

If the UPT is unable to reach a consensus within 30 days, then the UPT refers the case to the regional directors, if any, or to alternative staff members who represent their respective state agencies on the UPT. These regional directors or alternative staff members meet within 10 business days of the referral and issue their decision within 3 business days thereafter.

If the regional directors or alternative staff members are unable to reach a consensus, and the disagreement involves matters solely within the purview of EOHHS, then the UPT must notify the Secretary of EOHHS, who will then make a decision within 30 days of UPT's notice.

During the audit period, the UPT had 14 days from the day it decided that a child was eligible for additional state services to agree on which state and/or local education agencies should pay for those services. If the UPT could not reach an agreement in this time, it was required to notify OCA. OCA's director then imposed a temporary, binding cost share agreement on those state and/or local education agencies, so the child could access those services. OCA's temporary cost share agreement stayed in place until the UPT implemented a permanent cost share agreement or the child was no longer eligible for these services, whichever happened first.

Enacted Budget Responsibilities

OCA is responsible for fulfilling its enacted budgetary responsibilities, approved by the Governor, according to a yearly General Appropriations Act (see [Appendix A](#)). OCA partnered with EOHHS, UMass Chan Medical School, and the UMass Boston BIRCh Project to launch the following four major projects during the audit period: the Worcester Trauma and Resilience Collaborative (WTRC), the Center on Child Wellbeing and Trauma (CCWT), the Transition Age Youth (TAY) housing pilot program, and Trainings for Paraprofessionals and Mentors.

WTRC

Partnering with the Commonwealth Medicine Division of UMass Chan Medical School, OCA established the WTRC pilot program in fiscal year 2020. The pilot program provided training for early childhood educators in Worcester regarding techniques for recognizing childhood trauma and racial inequity. In fiscal year 2021, OCA expanded the program by making training materials on racial equity and childhood trauma accessible to Worcester Public Schools through a learning management system.

CCWT

OCA partnered with the Commonwealth Medicine Division of UMass Chan Medical School to launch CCWT in October 2021. CCWT aims to educate child-serving organizations and professionals across Massachusetts (such as those working at child-serving state agencies, contracted service providers, and Massachusetts public schools) to recognize and respond to childhood trauma by offering training, technical assistance, and professional learning opportunities. Despite its name, CCWT does not have a physical location, but it does have a website that offers training materials, online courses, and self-assessment questionnaires on how to recognize childhood trauma and support children experiencing trauma.

TAY Housing Pilot Program

In fiscal year 2021, OCA contracted with EOHHS and UMass Chan Medical School to launch a TAY housing pilot program in Worcester County, Springfield, and Holyoke. The pilot program went statewide in fiscal year 2022 and provided housing and employment opportunities for young people (ages 18 through 21 years) who opted out of the Department of Children and Families' foster care program after they turned 18 and were at risk for homelessness.

Trainings for Paraprofessionals and Mentors

In fiscal years 2021 and 2022, OCA partnered with the UMass Boston BIRCh Project to develop a 10-module training curriculum for paraprofessional and mentor workforces with the goal of improving social, emotional, and behavioral services for children across multiple settings. This was part of a larger OCA effort to improve the cross-agency coordination of early childhood and school-aged student wellness efforts to address barriers to student academic success, health, and safety.

AUDIT OBJECTIVES, SCOPE, AND METHODOLOGY

In accordance with Section 12 of Chapter 11 of the Massachusetts General Laws, the Office of the State Auditor has conducted a performance audit of certain activities of the Office of the Child Advocate (OCA) for the period July 1, 2020 through March 31, 2022.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Below is a list of our audit objectives, indicating each question we intended our audit to answer; the conclusion we reached regarding each objective; and, if applicable, where each objective is discussed in the audit findings.

Objective	Conclusion
1. Did OCA advise the public and government stakeholders about how the Commonwealth may improve its services to and for children and their families as required by Section 2(d) of Chapter 18C of the General Laws?	Not always; see Findings <u>1</u>, <u>2</u>, and <u>3</u>
2. Did OCA develop formal policies and procedures for how it develops temporary cost share agreements as required by Section 2(e) of Chapter 18C of the General Laws?	No; see <u>Other Matters</u>
3. Did OCA meet the requirements of its interdepartmental service agreements (ISAs) relevant to the Commonwealth's enacted budgetary language for fiscal years 2020, 2021, and 2022?	No; see Findings <u>4</u> and <u>5</u>

To accomplish our audit objectives, we gained an understanding of OCA's internal control environment relevant to our objectives by examining OCA's internal control plan; by reviewing OCA's seven ISAs relevant to the Commonwealth's enacted budgetary language that were with the University of Massachusetts (UMass) Chan Medical School, the UMass Boston Behavioral Health Integrated Resources for Children (BIRCh) Project, and the Executive Office of Health and Human Services (EOHHS); and by interviewing OCA officials.

We reviewed and tested the operating effectiveness of the internal controls related to the ISAs by determining whether OCA's director signed and dated the seven ISAs relevant to the Commonwealth's enacted budgetary language for fiscal years 2020 through 2022.

To obtain sufficient, appropriate evidence to address our audit objectives, we performed the procedures described below.

External Communications

To determine whether OCA advised the public and government stakeholders about how the Commonwealth may improve its services to and for children and their families as required by Section 2(d) of Chapter 18C of the General Laws, we took the following actions.

We obtained OCA’s annual reports and annual Advisory Council meeting minutes published on its website—which, according to its internal control plan, OCA should post consistently for every fiscal year—and we determined whether any of these documents that should have been posted during the audit period were missing. We reviewed all two of OCA’s annual reports for the audit period to determine whether the content was related to advising the public and/or government stakeholders about how the Commonwealth may improve its services to and for children and their families.

Based on the results of our testing, we determined that OCA did not always advise the public and government stakeholders about how the Commonwealth may improve its services to and for children and their families during the audit period. See Findings 1, 2, and 3 for more information.

Cost Share Agreements

To determine whether OCA developed formal policies and procedures for how it develops temporary cost share agreements as required by Section 2(e) of Chapter 18C of the General Laws, we took the following actions:

- We requested OCA’s formal policies and procedures on developing cost share agreements that were in effect during the audit period.
- We also reviewed the unified planning team’s (UPT’s) annual reports for fiscal years 2020 and 2021 to verify that none of the UPT cases required OCA to intervene.

Based on the results of our testing, we determined that OCA did not develop formal policies and procedures for how it develops temporary cost share agreements. See Other Matters for more information.

Enacted Budget Responsibilities

To determine whether OCA met the requirements of its ISAs relevant to the Commonwealth's enacted budgetary language for fiscal years 2020, 2021, and 2022, we took the following actions:

- We reviewed all seven ISAs that OCA created with UMass Chan Medical School, the UMass Boston BIRCh Project, and EOHHS for fiscal years 2020 through 2022.
- We obtained all expense transactions related to all seven ISAs from the Massachusetts Management Accounting and Reporting System (MMARS). We used this data to verify the population of these seven ISAs.
- We tested all 39 deliverables listed in these seven ISAs by reviewing supporting documentation, such as project reports, learning modules, survey forms, project timelines, and job descriptions, to ensure that OCA sufficiently satisfied the requirements of the ISAs.

Based on the results of our testing, we determined that OCA did not meet the requirements of its ISAs relevant to the Commonwealth's enacted budgetary language during the audit period. See Findings [4](#) and [5](#) for more information.

Data Reliability Assessment

In 2018 and 2022, the Office of the State Auditor performed data reliability assessments for MMARS. These assessments focused on reviewing selected system controls, including access, security awareness, audit and accountability, configuration management, identification and authentication, and personnel security.

As part of the current audit, we performed direct queries of MMARS data using the Commonwealth Information Warehouse⁴ database for all OCA expenses incurred during the audit period. We tested this data for blank fields, duplicate records, and dates outside of the audit period. We then filtered the data to include only expenses related to the seven ISAs. In addition, we compared our query results obtained from the Commonwealth Information Warehouse to OCA's query results.

Based on the results of the data reliability assessment procedures described above, we determined that the information we obtained from MMARS was sufficiently reliable for the purposes of our audit.

4. The Commonwealth Information Warehouse contains budget, human resources, and payroll information, as well as financial transaction data from MMARS.

DETAILED AUDIT FINDINGS WITH AUDITEE'S RESPONSE

1. The Office of the Child Advocate does not have documented policies and procedures for the creation of its annual reports and other published documents.

We found that, during the audit period, the Office of the Child Advocate (OCA) did not have documented policies and procedures for how its annual reports are drafted, including who should be responsible for writing the report, what information it should contain, what steps should be taken to verify the accuracy of the report's information, and when the report should be published.

By not having documented policies and procedures for the creation of its annual reports, OCA risks not providing timely, relevant information to stakeholders, policymakers, and the general public, who must make decisions about the services provided to children and the issues affecting them. This can negatively impact children in Massachusetts.

Authoritative Guidance

Section 2(d) of Chapter 18C of the General Laws states, "[OCA] shall advise the public and those at the highest levels of state government about how the commonwealth may improve its services to and for children and their families."

The external communications section of OCA's June 2021 internal control plan states,

The OCA communicates its work through its Annual Report that is published after the close of each fiscal year and includes a summary of all work of the OCA for that year. . . . The OCA also posts all meeting minutes and reports on its website and has [an X, formerly known as Twitter] account for posting newsworthy events relating to the work of the OCA.

Because OCA's internal control plan requires that OCA communicate its work to the public through published annual reporting, we consider it a best practice to have policies and procedures documented to ensure that its internal control plan is followed.

Reasons for Condition

OCA's director told us in an email on June 24, 2022 that OCA "follows a standard protocol [for reports that OCA expects to make public] although it is not memorialized in writing."

Recommendation

OCA should document its aforementioned standard protocol for creating and issuing annual reports to better serve stakeholders and policymakers when they make decisions about the services provided to children in Massachusetts.

Auditee's Response

The OCA acknowledges and appreciates this finding. As the audit notes, the OCA was a very small state agency during the audit period. We had approximately 15 staff members. The OCA began a significant staff expansion during the audit period and has approximately doubled in size since the beginning of the audit period. The OCA has a small staff given the size of its mandate and so has designed many of our functions to be nimble. At the time of the audit the OCA had a universal internal understanding of the staff member responsible for organizing and executing the Annual Report from conception to publication. The OCA leaned on its senior management team to execute that function each year, a senior management team that is adept at close collaboration and is able to pivot when necessary to accommodate the various significant needs of the agency. The senior management team executed the task reliably and expertly each year.

At the time of the audit, writing a formal documented procedure for the creation of the annual report would have made little sense given that the report was a team effort designed by a universally acknowledged project leader with shifting tasks due to senior team member capacity. In the years since the audit the OCA has expanded our staff, increased our capacity for data gathering and analysis, and further developed a middle manager function that has increased the OCA's ability to routinize our work. The OCA agrees that at the size that the OCA is currently, and with our current capacity, it is not only wise to create a documented procedure for the creation of the annual report, but a necessity. The OCA affirms that we will meet this expectation within the next six months.

Auditor's Reply

Based on its response, OCA is taking measures to address our concerns in this area.

2. The Office of the Child Advocate did not publish annual Advisory Council meeting minutes for fiscal years 2020 and 2021.

Our review of OCA's website on June 24, 2022 showed that OCA had not posted Advisory Council meeting minutes since October 22, 2018, even though OCA continued to post the council's annual fiscal year meeting agendas. If OCA does not post its annual Advisory Council meeting minutes, then the public and government stakeholders may not be informed of the current status of OCA activities.

Authoritative Guidance

Section 2(d) of Chapter 18C of the General Laws states, "[OCA] shall advise the public and those at the highest levels of state government about how the commonwealth may improve its services to and for children and their families."

OCA's June 2021 internal control plan states,

The OCA has an Annual Meeting of its Advisory Council in the fall. This meeting is generally used to update the Council on projects of the OCA and to answer questions that the Council may have about the work of the OCA. The Annual Meeting is open to the public. The OCA also posts all meeting minutes and reports on its website and has [an X, formerly known as Twitter] account for posting newsworthy events relating to the work of the OCA.

Reasons for Condition

We asked OCA why the agency stopped releasing the Advisory Council meeting minutes after October 22, 2018. In an email on June 28, 2022, OCA's director stated,

These minutes were never approved by the Advisory Committee at its 2019 meeting because the vote was forgotten to be taken. . . . There is pending legislation to eliminate OCA's Advisory Committee. If that doesn't pass we will try to correct this error at the next meeting this fall.

OCA also told us that it did not take votes to approve the fiscal year 2020 and 2021 Advisory Council meeting minutes for the same reason.

Recommendation

OCA should publish annual Advisory Council meeting minutes.

Auditee's Response

The OCA acknowledges and appreciates this finding. The OCA agrees that such meeting minutes should have been posted and not posting them was in error. The Advisory Council meets annually and the minutes of the meeting are created after the completion of the meeting. The only opportunity for the Advisory Council to vote on those minutes is a full year later at the next Advisory Council meeting. The OCA has not previously posted minutes that have not been voted upon by the Advisory Council in between meetings for the very fact that they have not been voted upon. The OCA also acknowledges that it is hard for the Advisory Council to accurately evaluate meeting minutes a full year after the meeting is held. However, the OCA agrees that the best and most transparent course of action is to post the meeting minutes promptly after the meeting, noting that they are draft and have not yet been approved. We will adopt this practice moving forward. In the meantime, the OCA has posted all available Advisory Council minutes on our website.

Auditor's Reply

Based on its response, OCA is taking measures to address our concerns in this area.

3. The Office of the Child Advocate did not report to the Joint Committee on Children, Families and Persons with Disabilities by its deadline.

We found that OCA did not issue a report, called the *Early Childhood and School-Aged Student Wellness Efforts: Addressing Barriers to Student Academic Success, Health, and Safety in [Fiscal Year 2022]*, to the Joint Committee on Children, Families and Persons with Disabilities, until 85 days after its deadline of December 1, 2021.

The Joint Committee on Children, Families and Persons with Disabilities' ability to review and address OCA's child welfare concerns will be impeded by the delayed issuance of this report, creating potential negative impacts for the state government and the people it serves.

Authoritative Guidance

The Commonwealth's enacted budget language for fiscal year 2022 states, "Not later than December 1, 2021, the office of the child advocate shall report to the joint committee on children families and persons with disabilities on its efforts."

Reasons for Condition

OCA told us that the staff member assigned to work on the *Early Childhood and School-Aged Student Wellness Efforts: Addressing Barriers to Student Academic Success, Health, and Safety in [Fiscal Year 2022]* report was later reassigned to work on a different assignment. OCA told us in an email on April 19, 2023 that this staff member did inform the Joint Committee on Children, Families and Persons with Disabilities that the submission would be delayed, and the committee "orally informed OCA that a delayed response would be acceptable."

Recommendations

1. OCA should report to the Joint Committee on Children, Families and Persons with Disabilities by its deadlines.
2. OCA should ensure that any extensions to its deadlines are approved in writing.

Auditee's Response

The OCA acknowledges and appreciates this finding. The OCA agrees that the report submission was past the statutory deadline. During the period when this report was due (December 2021), the OCA was also devoting significant staff resources into our investigation into the death of [a child], which was released in March 2022. Child death investigations are, by their nature, unexpected, and they require an extraordinary amount of staff attention. They are also among the most important work that the OCA does. At that time, we made the strategic decision to focus our staff resources on completing the [child death investigation], resulting in a delay in this particular report to the Legislature. The OCA kept the Joint Committee on Children, Families and Persons with Disabilities apprised of the report delay and continued regular meetings with the Committee Chairs, which include ongoing communication regarding the critical issues affecting children and families in the Commonwealth. The OCA regularly shares child welfare concerns with the legislature above and beyond the report discussed herein. The OCA always endeavors to meet all statutory deadlines, and we will continue that practice as best we are able given staff resources.

Recognizing the best practice recommendation, the OCA will institute a written practice outlining the documentation protocol for any extensions to statutorily required deadlines.

Auditor's Reply

Based on its response, OCA is taking measures to address our concerns in this area.

4. The Office of the Child Advocate did not have evidence that some deliverables from its interdepartmental service agreements were completed.

OCA was responsible for funding, creating, and monitoring a total of 39 contract deliverables outlined in seven interdepartmental service agreements (ISAs), which were created to fulfill OCA's enacted budgetary language for fiscal years 2020, 2021, and 2022. However, OCA was unable to provide evidence that 11 out of the 39 deliverables outlined in its ISAs with the University of Massachusetts (UMass) Chan Medical School and the UMass Boston Behavioral Health Integrated Resources for Children (BIRCh) Project were completed.

The following table summarizes the four ISAs and the 11 deliverables that were missing evidence of completion.

Fiscal Year	Project Name (ISA identification Number)	Missing Evidence of Completing ISA Deliverables
2022	Transition Age Youth (TAY) Roadmap (FY20UMASSPPHS009TAY9)	<ul style="list-style-type: none">Evidence for creating a task force to lead recommendations for TAY cross-agency collaboration and practices

Fiscal Year	Project Name (ISA identification Number)	Missing Evidence of Completing ISA Deliverables
2022	Trainings for Paraprofessionals and Mentors (ISAOCAK12BIRCHUMB22A)	<ul style="list-style-type: none"> Evidence of collaboration with one or two school districts to implement a pilot program of training with paraprofessionals
2022	Center on Child Wellbeing and Trauma (CCWT) (ISAOCAMMDCS016UMS22A)	<ul style="list-style-type: none"> Evidence for facilitating bimonthly (every other month) meetings on cross-agency collaboration and practice Evidence of developing implementation materials Evidence for developing a finance sustainability strategy
2022	Trauma and Resilience (ISAOCA4PPHS022UMS21A)	<ul style="list-style-type: none"> Evidence for disseminating findings from the previous phase of the Worcester Trauma and Resilience Collaborative (WTRC) project Evidence for developing an implementation plan for the next phase of the WTRC project Evidence of guidelines for communicating to key stakeholders Evidence for developing a dissemination strategy for training materials Evidence for developing a financing sustainability strategy for ongoing trauma work Evidence for completing additional work on racial trauma trainings

If OCA does not receive all deliverables outlined in the ISAs that it funds, then there is a potential waste of taxpayer dollars that could be used to provide other OCA services or fund other ISA projects.

Authoritative Guidance

The OCA's enacted budgetary language for fiscal years 2020 through 2022 state that OCA was responsible for the following:

- ensuring effective cross-agency coordination of early childhood and school-aged student wellness efforts (fiscal years 2020, 2021, and 2022);
- establishing and overseeing the WTRC (fiscal years 2020, 2021, and 2022);
- expending the housing pilot program for TAY (fiscal years 2021 and 2022); and
- establishing a state CCWT (fiscal year 2022).

See [Appendix A](#) for more details on OCA's enacted budgetary responsibilities.

In addition, the six ISAs that OCA monitored for fiscal year 2022 included the deliverables in the table below.

Fiscal Year	Project Name (ISA Identification Number)	Summary of ISA
2022	TAY Roadmap (FY20UMASSPPHS009TAY9)	UMass Chan Medical School was responsible for implementing a roadmap for TAY, which consisted of collaborating with other agencies involved in TAY work and creating an implementation plan.
2022	TAY Pilot Evaluation (ISAOCA4PPHS024UMS21A)	UMass Chan Medical School was responsible for conducting focus group interviews, training pilot providers on data collection, and submitting various interim pilot reports.
2022	TAY Pilot Expansion (ISAOCATAYPILOTEHS22A)	The Executive Office of Health and Human Services contracted with youth services providers to offer youths a number of different state services, including access to emergency housing, case management services, and referrals to health services and employment support.
2022	Trainings for Paraprofessionals and Mentors (ISAOCAK12BIRCHUMB22A)	The UMass Boston BIRCh Project was responsible for supporting OCA's cross-agency collaboration effort that focuses on supporting students' wellbeing following the COVID-19 pandemic. Deliverables include reaching out to community agencies and school districts to share the 10-module training curriculum and collaborating with school districts to implement a pilot of live training and coaching with paraprofessionals.
2022	CCWT (ISAOCAMMDCS016UMS22A)	UMass Chan Medical School was responsible for developing and implementing CCWT. Key deliverables included leading a stakeholder engagement meeting, creating a project plan and logical model, hiring staff members, conducting outreach activities in Worcester, and launching an official website for the center.
2022	Trauma and Resilience (ISAOCA4PPHS022UMS21A)	UMass Chan Medical School was responsible for launching the next phase of the WTRC. Key deliverables included developing an implementation plan, sharing trauma and equity training materials with Worcester Public Schools, and evaluating the impact of the training.

See [Appendix B](#) for more details on the ISA deliverables that OCA monitored.

Reasons for Condition

For the fiscal year 2022 TAY Roadmap program with UMass Chan Medical School, OCA explained in an email on October 5, 2022 that the agency had to shift the focus from creating a task force to creating an emergency response for Department of Children and Families youths who have recently left the Department of Children and Families' foster care voluntarily and who were at risk of homelessness because of the COVID-19 pandemic. In addition, OCA told us in an email on July 11, 2023 that it verbally agreed to changes with UMass Chan Medical School during check-in meetings.

For the fiscal year 2022 Trainings for Paraprofessionals and Mentors program with the UMass Boston BIRCh Project, OCA told us in an email on October 5, 2022 that the UMass Boston BIRCh Project did

conduct an initial outreach with school districts but later found that, “due to school bandwidth challenges, this was not possible to implement” in the fiscal year 2022. As a result, OCA verbally approved the change of the ISA deliverable to create “outreach strategies designed to push potential users toward our online offerings. . . . The ISA was not amended to reflect the oral direction given.”

For the fiscal year 2022 CCWT program with UMass Chan Medical School, OCA decided it was no longer necessary to hold cross-agency meetings every other month. OCA also did not require UMass Chan Medical School to prepare a sustainability strategy for financing CCWT's operations, as required in the ISA. According to an email OCA sent us on September 5, 2023, the Legislature provided OCA with sufficient funding for CCTW, so financial sustainability planning was no longer needed. OCA informed us that it amended the ISA deliverables with UMass Chan Medical School verbally. However, OCA did not provide us with evidence that these verbal amendments occurred.

For the fiscal year 2022 Trauma and Resilience program with UMass Chan Medical School, OCA told us in an email on November 2, 2022 that it did not require UMass Chan Medical School to create a formal implementation plan for the WTRC in fiscal year 2021 because OCA expected that the direction of the project may change frequently. Instead, OCA's director of strategic initiatives approved each WTRC stage through phone calls and emails. OCA and UMass Chan Medical School amended the ISA verbally and did not document those changes. Furthermore, OCA explained that it did not have written policies and procedures for communicating with and reporting to key stakeholders. OCA told us the following in an email on October 18, 2022:

Meetings are regularly scheduled with government stakeholders and many of the advocacy groups [and] trade associations. Since many of these stakeholders also sit on the various boards, task forces, and commissions run by the OCA, there is very frequent communication.

Recommendations

1. OCA should document all information regarding OCA deliverables, including any amendments to previously established ISAs.
2. OCA should develop, document, and implement policies and procedures to monitor the progress of ISA deliverables.

Auditee's Response

The OCA acknowledges and appreciates this finding. With regards to the specific ISAs reviewed under this audit, the OCA is confident that the Commonwealth received sufficient and appropriate deliverables from each ISA to achieve the overall project goals because we managed each of these

contracts very closely, holding regular project planning and deliverable review meetings with each contractor. We acknowledge, however, that amendments of deliverables in an Interdepartmental Service Agreement (ISA) should be documented in writing rather than solely discussed verbally with the project team. We are in the process of developing written policies and procedures regarding the creation, amendment, and closing of ISAs. These policies and procedures are to include, at minimum, expectations for appropriate documentation of 1) time frames of the agreement, 2) financial obligations of each agency, 3) buyer responsibilities, seller responsibilities, and joint responsibilities, and 4) Identification of the person(s) accountable for the execution of the ISA for both agencies. These policies and procedures will be written in accordance with Comptroller policy and relevant Commonwealth regulations.

Auditor's Reply

Based on its response, OCA is taking measures to address our concerns in this area.

5. The Office of the Child Advocate did not amend three interdepartmental service agreements in writing.

For the three ISAs that OCA contracted with UMass Chan Medical School and the UMass Boston BIRCh Project, OCA and UMass verbally amended the scope of the contract deliverables. Since the agency did not have any written records to prove that both parties agreed to the change, we cannot determine the validity of the following three ISA amendments described to us by OCA.

Fiscal Year	Project Name (ISA Identification Number)	Original ISA Deliverables that Were Verbally Amended
2022	TAY Roadmap (FY20UMASSPPHS009TAY9)	<ul style="list-style-type: none">• Creating a task force to lead recommendations for TAY cross-agency collaboration and practices
2022	Trainings for Paraprofessionals and Mentors (ISAOCAK12BIRCHUMB22A)	<ul style="list-style-type: none">• Collaborating with one or two school districts to implement a pilot program of training and coaching with paraprofessionals
2022	CCWT (ISAOCAMMDCS016UMS22A)	<ul style="list-style-type: none">• Facilitating bimonthly (every other month) cross-agency and other state best practice calls• Developing a sustainability strategy for financing CCWT operations

OCA cannot hold the agencies with which it contracts accountable if it does not amend ISAs in writing and instead relies on verbal amendments to modify these contracts. Further, OCA cannot demonstrate satisfactory completion of these contracts to the public, stakeholders, or others.

Authoritative Guidance

The Office of the Comptroller of the Commonwealth's standard ISA form, which OCA used for these three ISAs with UMass Chan Medical School and the UMass Boston BIRCh Project, states,

Buyer/Parent [in this case, OCA] and Seller/Child [in this case, UMass Chan Medical School and the UMass Boston BIRCh project] agree to maintain the necessary level of communication (including immediate notification of any amendments to accounting information, program codes or performance needs), coordination, access to reports and other ISA information, and cooperation to ensure the timely execution and successful completion of the ISA, amendments, and state finance law compliance.

We consider it a best practice to document ISA amendments in writing to ensure accountability for ISA deliverables and to maintain transparency to the public.

Reasons for Condition

For the fiscal year 2022 TAY Roadmap program with UMass Chan Medical School, OCA told us in an email on July 11, 2023 that OCA and UMass Chan Medical School verbally agreed to amend the ISA deliverable to redirect their focus to addressing emergency issues related to the COVID-19 pandemic.

For the fiscal year 2022 Trainings for Paraprofessionals and Mentors program with the UMass Boston BIRCh Project, OCA told us in an email on October 24, 2022 that it was not possible to implement live training sessions with the school district, so the agency "verbally approved a shift to focus the staff time on other outreach strategies."

For the fiscal year 2022 CCWT program with UMass Chan Medical School, OCA told us in an email on September 14, 2023 that after its initial conversations with state agencies about CCWT, the agency decided that running a cross-agency meeting was "not the best course of action." In an email to us on September 5, 2023, OCA also explained that financial sustainability planning was no longer needed because of the "Legislature's significant additional allocation in budget funding for the Center in its second year of operation."

OCA did not provide a reason as to why it did not amend these ISAs in writing to reflect the verbally approved changes to the ISA deliverables.

Recommendation

OCA should obtain written approval from the agencies with which it contracts and amend ISAs in writing to reflect verbally approved changes of ISA deliverables.

Auditee's Response

The OCA acknowledges and appreciates this finding. The OCA agrees that changes in service period, financial obligation, and deliverables for ISAs should be documented via written amendment to the ISA and approved by both parties. The remedy undertaken for this finding is contained in the remedy of [Finding 4] above, in that, OCA policies and procedures regarding ISAs will be written and circulated to members of OCA staff that have responsibility for the creation, management, and amendment of ISAs.

Auditor's Reply

Based on its response, OCA is taking measures to address our concerns in this area.

OTHER MATTERS

As our audit was nearing completion, an additional area of concern that was outside the scope of our audit objectives came to our attention. Given the high-risk nature of this area, we looked into this area for the period July 1, 2020 through December 31, 2023, and the results are documented below.

1. The Office of the Child Advocate should coordinate with other state agencies to ensure that children who have gone missing from, and later returned to, foster care are screened to determine whether they are, or are at risk of becoming, a victim of human trafficking.

In July 2022, the US Department of Health and Human Services Office of Inspector General (HHS OIG) issued a report⁵ that cited Massachusetts as one of five states where there was no evidence that children in foster care were screened for human trafficking after they had gone missing from, and later returned to, foster care. Specifically, in its report, HHS OIG identified 949 children in Massachusetts who went missing from, and later returned to, foster care between July 1, 2018 through June 30, 2019. HHS OIG then sampled 88 out of the 949 identified children and reviewed their case files. HHS OIG found that 72 out of the 88 sampled children were not screened for human trafficking after they returned to foster care.

We asked the Office of the Child Advocate (OCA) whether it was aware of the July 2022 HHS OIG report and asked whether OCA met with the Department of Children and Families to address the findings and recommendations of the July 2022 HHS OIG report. OCA told us that it was aware of the report upon its release in July 2022 and that, within a few weeks of the report's release, it reached out to the Department of Children and Families to collaborate on how to address the findings in the HHS OIG report.

We asked OCA whether it had reached out to other state agencies to share information regarding how to identify and respond to instances of human trafficking. In an email dated April 4, 2024, OCA stated,

We address sexual assault, domestic violence and human trafficking as necessary and appropriate through our statutory oversight obligations of ensuring that children receive appropriate, timely and quality executive-branch state services. We may also address these issues through our work on task forces if relevant. Coordinating detection and response is not an obligation of the OCA though the OCA may participate in such efforts.

5. This HHS OIG report is titled *In Five States, There Was No Evidence That Many Children in Foster Care Had a Screening for Sex Trafficking When They Returned After Going Missing.*

While we recognize that coordinating the detection of and response to instances of human trafficking is not an obligation of OCA, we note that OCA's mission statement is to ensure that "the Commonwealth's most vulnerable and at-risk children have the opportunity to thrive."

We recommend that OCA collaborate with other state agencies to address the issue of human trafficking of children and collaborate with other state agencies to determine ways to identify and respond to instances of human trafficking of children in Massachusetts.

Auditee's Response

The OCA is deeply invested in ensuring that the Commonwealth is addressing the risk of, and reality of, human trafficking. The OCA has taken the necessary steps to evaluate the relevant Department of Children and Families policies and practices on this topic and continues to monitor issues through our oversight function.

The OCA's goal of ensuring that the Commonwealth's most vulnerable and at-risk children have the opportunity to thrive is a broad one, and the list of work to ensure the Commonwealth meets that goal is lengthy. Like all state agencies, the OCA has limited financial and staff resources, and we therefore must make decisions about where to focus our efforts in our work toward that important goal. Opinions on how the OCA utilizes its discretion to design projects and initiatives to address issues related to our mission is, respectfully, beyond the scope of this audit.

The OCA will continue to address the issue of human trafficking through our oversight function, which includes interagency and cross-sector collaboration, and will not expand our work unless and until the OCA determines that the issue is ripe for an OCA project through our annual detailed strategic planning process under the direction of the Child Advocate. We note that our strategic plan for each year is presented to our Advisory Council for feedback and input and is publicly available.

Auditor's Reply

We appreciate OCA's commitment to issues impacting children in the Commonwealth. Core to any performance audit in the public sector is a review of the effectiveness of services provided by government. OCA indicated in its response that "opinions on how the OCA utilizes its discretion to design projects and initiatives to address issues related to our mission is, respectfully, beyond the scope of this audit."

We disagree. Evaluating the performance of government agencies requires a review of how well services are provided. It also requires that we ask if there are better ways to provide services or if the services are appropriate given their costs and benefits.

We believe that OCA can be more effective in how it addresses the issue of human trafficking. We remain concerned about this matter and are newly concerned by the agency's response to our findings, as it appears to indicate resistance to external oversight and appropriate questioning of its work.

2. The Office of the Child Advocate did not have documented policies and procedures for developing temporary cost share agreements.

OCA did not have documented policies and procedures for developing temporary cost share agreements. Without having documented policies and procedures in place for developing temporary cost share agreements, OCA may delay the delivery of necessary services to a child, such as finding a different residential school or out-of-home placement. Policies and procedures regarding temporary cost share agreements would ensure that OCA addresses issues such as who should determine the allocation of payments, when a temporary cost share agreement should be issued, and how OCA should monitor a temporary cost share agreement once it is in effect.

Section 2(e) of Chapter 18C of the Massachusetts General Laws states, "[OCA] shall impose temporary cost share agreements, as necessary pursuant to section 16R of chapter 6A [of the General Laws] to ensure children's timely access to services."

Section 16R of Chapter 6A of the General Laws, effective August 9, 2018 through November 7, 2022, stated,

If, after 14 days from the date that the [unified planning] team determines which services a child is eligible for, the team is unable to reach a consensus on the responsibility of payment, and the child is unable to access those services because of disagreement about responsibility for payment among state agencies and local education agencies, the child advocate shall be notified and shall have the authority to impose a binding temporary cost share agreement on those state agencies and local education agencies. The cost share agreement shall remain in effect until the child advocate is informed in writing of a permanent cost share or payment agreement having been implemented or until the child no longer qualifies for the services.

Even though the unified planning team (UPT) did not ask OCA to develop a temporary cost share agreement during the audit period, we consider it a best practice to have documented policies and procedures in place to ensure that temporary cost share agreements are handled timely, equitably, and consistently to minimize unnecessary delays when providing essential services to children and families.

OCA's director told us in an email on June 24, 2022 that although the UPT managers "would periodically come to discuss a case, nothing ever reached the level of a formal request for OCA intervention."

In a meeting with OCA on April 6, 2023, OCA's director told us that there was no mandate in the UPT statutes that required OCA to produce regulations and guidelines for UPT case resolution. They also stated that it would be difficult for OCA to develop standard guidelines for imposing these agreements because every temporary cost share agreement is case-specific.

Although OCA is no longer responsible for developing cost share agreements because of the amended Section 16R of Chapter 6A of the General Laws, which went into effect on November 8, 2022, OCA should nevertheless develop policies and procedures related to its involvement in the UPT review process to minimize delays when providing essential services to children and their families.

Auditee's Response

As the audit notes, the OCA is no longer authorized to develop cost-share agreements due to a change in statute. The OCA has never had a case referred to it via the Unified Planning Team process for the development of a cost-share agreement. The discussions with unified planning team staff regarding specific cases consisted of brainstorming and troubleshooting specific fact-patterns and such informal discussions are not aided by formal policies and procedures.

The OCA absolutely would have put policies and procedures in place had the OCA had the opportunity to develop cost-share agreements. However, writing such policies and procedures in the abstract, without any experience to draw upon, did not appear to be a wise use of OCA resources given our small staff. The OCA understood the unlikeliness of developing a cost-share agreement and that the process and procedure for doing so would likely only become clear through the experience itself. The OCA highly values policies and procedures but wants to ensure that we are developing state systems that are the most efficient and most effective and did not feel we could do so in this instance without additional experience. Given the change in statute the OCA no longer has a formal role in developing temporary cost share agreements, and as a result we will not be developing any policies or procedures.

Auditor's Reply

We understand that OCA is no longer responsible for developing cost share agreements because of the amended Section 16R of Chapter 6A of the General Laws, which went into effect after the audit period on November 8, 2022. However, OCA should have been following the law while it was in effect. Going forward, as a best practice, we recommend that OCA develop policies and procedures related to its involvement in the UPT review process to minimize delays when providing essential services to children and their families.

APPENDIX A

The Office of the Child Advocate's Enacted Budget Responsibilities

The following are programmatic requirements for the Office of the Child Advocate (OCA), according to the Commonwealth's enacted budgetary language for the fiscal years 2020, 2021, and 2022.

Fiscal Year	OCA's Programmatic Requirements from Enacted Budgetary Language
2020	Not less than \$100,000 shall be used to ensure effective cross-agency coordination of early childhood and school-aged student wellness efforts to address barriers to student academic success, including but not limited to access to social services, mental health and behavioral health resources . . . not less than \$225,000 shall be expended for the establishment of the Worcester Trauma and Resilience Collaborative to educate young people in the city of Worcester who have experienced adverse childhood experiences.
2021	Not less than \$100,000 shall be used to ensure effective cross-agency coordination of early childhood and school-aged student wellness efforts to address barriers to student academic success, including, but not limited to, access to social services, mental health and behavioral health resources . . . not less than \$300,000 shall be expended on a pilot program to provide housing support services to transition age youth that are aging out of the care or custody of the Department of Children and Families or the Department of Youth Services; provided further, that such services shall include, but not be limited to, staff support through case management and the provision of direct housing services . . . not less than \$50,000 shall be expended for the continued operation of the Worcester Trauma and Resilience Collaborative to support young people who have experienced adverse childhood experiences.
2022	Not less than \$300,000 shall be expended on a pilot program to provide housing support services to transition age youth that are aging out of the care or custody of the Department of Children and Families or the Department of Youth Services; provided further, that such services shall include, but not be limited to, staff support through case management and the provision of direct housing services . . . not less than \$100,000 shall be used to ensure effective cross-agency coordination of early childhood and school-aged student wellness efforts to address barriers to student academic success, health and safety, including, but not limited to, access to social services, mental health and behavioral health resources information sharing that ensures confidentiality, clear communication and addresses barriers to effective monitoring of students who are in the legal custody of the department of children and families, including coordination of mandated reporter responsibilities; provided further, that not later than December 1, 2021, the Office of the child advocate shall report to the joint committee on children families and persons with disabilities on its efforts . . . not less than \$1,000,000 shall be expended for the establishment and operation of a state center on child [wellbeing] and trauma . . . not less than \$300,000 shall be expended for the continued operation of the Worcester Trauma and Resilience Collaborative to support young people who have experienced adverse childhood experiences.

APPENDIX B

The Office of the Child Advocate's Interdepartmental Service Agreement Deliverables

The following are the deliverables that the Office of the Child Advocate's (OCA's) detailed in its seven interdepartmental service agreements (ISAs) for fiscal years 2021 and 2022. The descriptions of the deliverables are quoted directly from each ISA.

Fiscal Year	Project Name (ISA Identification Number)	Deliverables
2021	Trainings for Paraprofessionals and Mentors (ISAOCAK12BIRCHUMB21A)	<p>This project will work to increase cross-agency collaboration to support the social, emotional and behavioral health of students, specifically from early childhood settings to [kindergarten through grade 12 educational] settings and from elementary school to middle school, as they return to school following COVID-19. The [University of Massachusetts (UMass)] Boston [Behavioral Health Integrated Resources for Children (BIRCh) Project] program will review evidence-based practices, conduct stakeholder interviews, and develop targeted training curricula/modules. BIRCh will capitalize on the critical existing workforce of para-professionals in schools and therapeutic mentors (TM) at Community Service Agencies (CSAs) by focusing on expanding their current knowledge and skill set related to the implementation of evidence-based interventions in schools, CSAs and other community settings.</p> <p>BIRCh will prepare review of evidence-based practices, stakeholder interviews and development of training curricula and corresponding materials meant to enhance social, emotional and behavioral services available to children. The result will be a 10-module training curriculum. This will be completed by June 30, 2021.</p>
2022	Transition Age Youth (TAY) Roadmap (FY20UMASSPPHS009TAY9)	<p>[UMass Chan Medical School] shall perform the following activities, as further directed by the Office of the Child Advocate:</p> <ol style="list-style-type: none"> 1. Create a full implementation plan: <ol style="list-style-type: none"> a. Convene and support cross-agency working group on TAY b. Support agreement on domain categories for cross-agency and within agency TAY c. Implement recommendations of task force working group 2. Support development of required implementation materials as needed. 3. Schedule and facilitate cross-agency and other stale best practice calls

Fiscal Year	Project Name (ISA Identification Number)	Deliverables
2022	TAY Pilot Evaluation (ISAOCA4PPHS024UMS21A)	<p>The scope of [UMass Chan Medical School] is being updated to remove the journey mapping deliverable and to expand the pilot. [UMass Chan Medical School] shall perform the following activities in [fiscal year 2022], as directed by the Office of the Child Advocate. These activities include:</p> <ul style="list-style-type: none"> • Develop and submit a PowerPoint slide deck to summarize findings of focus groups/interviews with youth specialists and stakeholder interviews (completed in August 2022) • Expand REDCap [a software used for administering and managing online surveys and databases] for routine outcome tracking to support the Pilot expansion • Provide training on REDCap data collection to new Pilot providers • Develop and submit interim Pilot report in February 2022 • Conduct and analyze 2 focus groups with youth enrolled in the pilot during the spring of 2022 • Develop and submit a reporting summarizing the focus group findings and Pilot outcomes by June 30, 2022
2022	TAY Pilot Expansion (ISAOCATAYPILOTEHS22A)	<p>[The Executive Office of Health and Human Services] shall:</p> <ol style="list-style-type: none"> 1. Contract with existing youth services providers to offer: <ol style="list-style-type: none"> a. access to housing stability services, including emergency housing; b. access to state agency benefits and entitlements; c. case management services; d. referrals to health services and agencies, including behavioral health services; and e. referrals to educational and employment support. 2. Ensure that all contracted providers comply with applicable data submission and reporting requirements, as detailed in [the Housing Choice Vouchers Program].
2022	Trainings for Paraprofessionals and Mentors (ISAOCAK12BIRCHUMB22A)	<p>Funds will support the dissemination of the 10-module training curriculum the BIRCh Project is currently developing, focused on prevention of and early intervention for behavioral health challenges. These online modules will be freely accessible to schools and community service agencies. Dissemination will include 1) reaching out to community agencies and school districts to share the training and 2) collaborating with 1-2 school districts to implement a pilot of live training and coaching with para-professionals to provide more opportunities to practice content introduced in the modules. There will be no cost to districts in hiring the trainers. Adaptations and adjustments will be made to the modules based on stakeholder feedback and other quality improvement measures utilized (e.g., knowledge assessment, satisfaction and social validity surveys) during the pilot.</p>

		<p>The details of the Center development include a focus on three key areas: 1) professional learning community development, 2) assessment and coaching technical assistance, and 3) resource and referral website. These focus areas will be developed through a variety of key activities, as follows:</p> <ol style="list-style-type: none">1. Lead a stakeholder engagement process2. Research and selection of a trauma informed and responsive (TIR) organizational assessment process3. Implementation of a TIR assessment process with a targeted community inclusive of data collection, coaching, and reporting.4. Development of a professional learning community to support work across Massachusetts in being trauma informed5. Ongoing development of a Center website of resources and tools. <p>[UMass Chan Medical School] shall perform the following activities, as further directed by the Office of the Child Advocate:</p> <ol style="list-style-type: none">1. Lead a stakeholder engagement process to inform Center development inclusive of a racial equity lens and community feedback mechanism2. Create a full implementation and project plan, due to the client by Sept 30th, including:<ol style="list-style-type: none">a. Stakeholder engagement processb. Project plan and timeliness inclusive of 3 primary focus areas:<ol style="list-style-type: none">i. Assessment process and coaching key components for at least one professional sectorii. Development of Professional Learning Communities and regular updates by sectioniii. Development and implementation of resource library including the Center website with framework and toolsc. Job descriptions and hiring process for key positions listed below. The Office of the Child Advocate will provide approval for key hires as listed in 2A.<ol style="list-style-type: none">i. Executive director,ii. Assessment lead,iii. Assessment coaches,iv. Professional learning community lead,v. Project coordinatord. Develop required implementation materials as needed.e. Logic model for Center activities that details how the Center will fulfill the identified need and planned outcomes, including tracking metrics per Center focus area.f. Ongoing development of Center website of resources and tools.
2022	Center on Child Wellbeing and Trauma (ISAOCAMMDCS016UMS22A)	

Fiscal Year	Project Name (ISA Identification Number)	Deliverables
		<ul style="list-style-type: none"> g. Develop a center wide communications strategy including: brand development and outreach to child-serving agencies to increase awareness of Center resources and tools. <ul style="list-style-type: none"> 3. Develop required implementation materials as needed. 4. Schedule and facilitate bi-monthly (every other month) cross-agency and other state best practice calls. 5. Participate in and, as appropriate, guide national conversations on best practices for trauma informed and healing responsive policies and programs. 6. Develop and lead an executive steering committee for the Center. The committee will meet at least quarterly to [advise] on and monitor Center goals and progress toward achieving ongoing metrics. 7. Partner on development of sustainability strategy for the Center that ensures financial sustainability by year 5, beyond legislative funding. 8. Develop and implement part 3 of the Worcester Trauma and Resilience Collaborative. This portion of work, funded by the \$300,000 set aside in legislation will include an expansion of ongoing work in the area such as: <ul style="list-style-type: none"> a. Full implementation of a train the trainer model for racial equity school trainings. 9. Outreach to early childhood centers in Worcester regarding assessment and draft certification toward being trauma informed and responsive.

Fiscal Year	Project Name (ISA Identification Number)	Deliverables
2022	Trauma and Resilience (ISAOCA4PPHS022UMS21A)	<p>[UMass Chan Medical School] shall perform the following activities, as further directed by the Office of the Child Advocate:</p> <ol style="list-style-type: none"> 1. Complete dissemination of previous findings regarding early childhood trauma and resilience from previous phase of the Worcester Trauma and Resilience Project. 2. Develop an implementation plan for the next phase of the Worcester Trauma and Resilience Project: <ol style="list-style-type: none"> a. Outline plan and review with key stakeholders. b. Develop curriculum for stakeholders. c. Implement training for providers (including schools). d. Measure impact of training through stakeholder identified metrics including measuring pre and posttest knowledge. 3. Develop a reporting mechanism and share with key stakeholders providing regular reporting as needed. 4. Develop a dissemination strategy for materials and utilize them more broadly as needed. 5. Identify and support avenues of sustainable funding for ongoing trauma work. 6. Complete additional work on Racial Trauma Trainings. 7. Develop a website focused on Trauma and Child Wellbeing.