

Attachment E

Mississippi Department of Child Protection Services (MDCPS)

Bureau of Protection and Prevention

Annual CAPTA Update

2018 Annual CAPTA Report

Mississippi Department of Child Protection Services (MDCPS)

- **Describe substantive changes, if any, to state law or regulations, including laws and regulations relating to the prevention of child abuse and neglect, that could affect the state's eligibility for the CAPTA State Grant (section 106(b)(1)(C)(i) of CAPTA). The state must also include an explanation from the State Attorney General as to why the change would, or would not, affect eligibility.**

Response: No significant changes were made to legislation that affect the state's eligibility.

- **Describe any significant changes from the state's previously approved CAPTA plan in how the state proposes to use funds to support the 14 program areas enumerated in section 106(a) of CAPTA.**

Response: No significant changes in use of CAPTA Funds since last update.

- **Describe how CAPTA State Grant funds were used, alone or in combination with other federal funds, in support of the state's approved CAPTA plan to meet the purposes of the program since the state submitted its last update on June 30, 2016 (section 108(e) of CAPTA).**

Response: CAPTA Funds have been used to fund a portion of the Mississippi Centralized Intake Program and to fund a full-time MDCPS attorney to review cases of maltreatment in care and special investigations. The funds being utilized in this way helps Mississippi to improve the child protective services system in the intake, assessment, screening, and investigation of reports of child abuse or neglect per section 106(a)(1) of CAPTA.

- A copy of the annual citizen review panel report(s) is attached.

AMENDMENTS TO CAPTA MADE BY P.L. 114-22, THE JUSTICE FOR VICTIMS OF TRAFFICKING ACT OF 2015

- **Provide an update on the steps the state has taken to address the amendments to CAPTA made by the Justice for Victims of Trafficking Act of 2015 since submission of the 2017 APSR and CAPTA Annual Report.**

Response: On May 27, 2017, our computer system received a build that allowed us to track and monitor any report that was entered at intake involving Human Trafficking. When a report of maltreatment comes into the Centralized Intake Unit, there is a specific question that must be answered on any child listed as a victim. The intake worker will have to state if the victim is suspected of being involved in human trafficking. Any report on a child in custody, suspected of being human trafficked, will be investigated by the Special Investigative Unit. On reports where the child is not in our custody, a specially assigned investigator for each region has been specified in order to have one consistent person who investigates any report of human trafficking. See attached documentation about the changes made in MACWIS as well as the maps for the specific persons who will handle these investigations in the county.

On May 4, 2017, we provided training to all 14 Regional Directors as well as their Deputy Directors in the Field about the need for assessment on any runaway in our custody. We have asked the Regional Director to have these recovered runaways assessed for human trafficking through a questionnaire the worker will go through with the teen. They were instructed to make a report of maltreatment if any indicators show their involvement.

The University of Mississippi has a Human Trafficking curriculum as well as our newly created process so the agency and our training partners will schedule all employees within our agency to receive this training by December 31, 2017. Any new hires after that date will receive Human Trafficking training during their Pre-Service training. MDCPS is also hosting a training for any special investigators who will be handling these types of investigations. A national speaker on Human Trafficking will offer a day long workshop to train on how to identify and assess for human trafficking. This will be conducted by July 31, 2017.

- **Identify any continued technical assistance needs the state has identified relating to implementation of the amendments to CAPTA made by the Justice for Victims of Trafficking Act of 2015.**

Response: Mississippi is interested in learning about any assistance available as we implement this amendment to CAPTA, including tools, resources, and lessons learned from other states.

- The state has submitted the signed Governor's Assurance Statement to The Children's Bureau before May 29, 2017.

AMENDMENTS TO CAPTA MADE BY P.L. 114-198, THE COMPREHENSIVE ADDICTION AND RECOVERY ACT OF 2016 (CARA)

- **Provide an update on the steps the state has taken since submission of the 2017 APSR and Annual CAPTA Report and the passage of the CARA amendments to implement the provisions in section 106(b)(2)(B)(ii) - (iii) of CAPTA, to address the needs of infants born and identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder.**

Response: Several people from Mississippi attended the Children's Bureau Conference on Child Abuse and Neglect in 2016 and became more informed about the opioid problem and the CARA legislation. At the same time, it was becoming apparent to Mississippians that the opioid issue was a serious one that needed attention from the child welfare professionals, courts, and related agencies serving children and families. The awareness of the problem prompted all related professionals to question what type of resolution would work for Mississippi.

The Governor's Task Force worked on it from an identification and law enforcement angle for the user, dealer, and medical prescriber. The news agencies reported on the problem to promote awareness and motivate action. The Mississippi Department of Child Protection Services garnered support from seven other disciplines to research the scope of the problem and apply for the Policy Academy. Supreme Court Justice Dawn Beam and Mississippi's First Lady, Deborah Bryant, began a collaborative initiative called "ReNewMS" as a pilot project in 3 counties known to have the hardest struggles. The leads from various disciplines began meeting together through ReNewMS regularly to identify and remove obstacles. MDCPS dedicated a full-time staff person, Reba Davis, to facilitate the MDCPS arm of the project. Ms. Davis, along

with CPS Staff and contractors, engaged in partnerships with parents and families in Marion County, Pearl River County, and Hancock County, in family-centered practice to help them consider options for substance abuse treatment and options for safely keeping their families together. They ran into obstacles with available treatment beds and implored Medicaid, mental health centers, and treatment facilities to find a solution and to get these willing parents into treatment. They kept in touch with parents abusing substances day-by-day as needed to try to keep them motivated for change while awaiting a treatment slot. The hospital association offered to help disseminate information. A letter explaining CARA and other reasons for making referrals to MDCPS was drafted for dissemination to health care providers and on websites.

- **Provide information on any changes to laws, policies or procedures relating to the identification and referral to Child Protective Services (CPS) of infants identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder.**

Response: Proposals were made for agency policy changes to support CARA. It became apparent in the policy approval process that more time is needed: 1) to ensure the public notification is right and up to date with our upcoming reporting tool changes and collaborative partnerships, 2) to provide the training needed for front-line staff to help them engage families affected by substance abuse, learn how to best collaborate with other professionals, and use the Plan of Safe Care effectively, 3) to train intake staff how this affects receipt of information and referrals, and 4) to develop an agency policy that takes into account all considerations and requirements within our changing agency structure. Although much progress has been made in this area, it was determined that our agency will develop a Program Improvement Plan to address these needs to ensure full compliance with this CAPTA Amendment in an effective manner.

- **Provide an update on the state's policies and procedures regarding the development of plans of safe care to address the health and substance use disorder treatment needs of substance-exposed infant and their families or caretakers**

Response: Mississippi is in the process of developing policies and procedures regarding plans of safe care.

- **Describe the procedures the state has developed to monitor plans of safe care, to determine whether and in what manner local entities are providing referrals to and delivery of appropriate services for substance-exposed infants and affected family members and caregivers.**

Response: Mississippi is in the process of developing procedures for monitoring plans of safe care.

- **Description of multi-disciplinary outreach, consultation or coordination the state has taken to support implementation (e.g., among state CPS agency, the state Substance Abuse Treatment Authority, hospitals, health care professionals, home visiting programs and Public Health or Maternal and Child Health Programs). Provide information on the role of the agencies involved in ensuring effective implementation of these provisions**

Response: On October 14, 2016, ReNewMS emerged as a pilot program focused on a renewed approach to address the rise in women with addictions who face a significant risk of losing one or more children. Given the interest of the Mississippi Department of Child Protection Services in the safety and well-being of children and in child custody cases, this pilot program evolved with focus on Marion (Region V), Hancock and Pearl River (Region VII East) counties, due to the high incidences of child abuse and neglect associated with drug using parents. Hancock has approximately 327 children in custody with 214 due to parental drug abuse, Pearl River has 226 in state custody with 148 for parental abuse, and Marion has 254 with 129 due to parental drug abuse. A multi-disciplinary approach is needed to address this national epidemic which is evidenced in our community.

The cyclical pregnancies and the lack of treatment for addictions have a direct correlation to the babies born with Neonatal Abstinence Syndrome and serve as contributing factors for the increase in children taken in custody and the lack of commensurate placements, while costing the State of Mississippi significantly more – well over \$750,000 per birth. Mississippi is 1 of 4 states with the highest incidence of Neonatal Abstinence Syndrome at 16.2/per 1000 births, with the surge attributed to opioids. Up to 94% of the newborns are exposed in the womb to opioids and they surface as poor birth outcomes, higher healthcare costs, and increased rates of removal from parental custody with the state covering approximately 80% of associated medical costs. CPS investigations of drug abuse have increased 140% from 709 in FY2001 to 1720 in FY2015. Substance abuse disorders increased by 47% from 1868 in FY2011 to 2728 in FY2015 with infants entering state custody at a 77% increase from 387 in 2011 to 687 in 2016. The resulting repressive feelings of these mothers impede the progress of achieving self-sufficiency, as many have never experienced therapy, counseling, rehabilitation, or the mother-child bond necessary for the reunification process to take place. Through ReNewMS, the root cause of addictions are addressed through an array of services that include, but are not limited to, intervention, counseling, intensive outpatient/inpatient therapy, medication assisted therapy, nutrition and wellness, a holistic approach and wraparound services designed to achieve self-sufficiency and hold them accountable.

ReNewMS, co-chaired by First Lady Deborah Bryant and Mississippi Supreme Court Justice Dawn Beam, is a nonjudgmental approach that has made significant strides in effectively addressing the needs of these mothers. Through convening state leadership for strategies, identifying mothers through attendance at court hearings and referrals of the Guardians Ad Litem, and push for priority beds at treatment facilities, and case management of MDCPS social workers, we have fostered positive relationships internally through agency divisions such as Prevention and Protection, explored some of the underlying causes of substance abuse, completed referrals for mental health assessments/intensive therapeutic services with Pine Belt Mental Health Resources and engaged Canopy Solutions, Mississippi Health Access Initiative, and the Division of Medicaid to assist in expediting applications for Medicaid eligibility, a pivotal avenue of support in accessing treatment. Additionally, clients have been extended assistance in locating affordable, permanent, supportive housing with Mississippi Region VIII Housing Authority, received accommodations through Open Doors Homeless Coalition, explored employment opportunities with

Crown Laundry and local eateries in Marion County, and directed to support services at Woodlawn Rediscovery Center focusing on parenting skills, Families First, Drug Court, Alcoholics and Narcotics Anonymous (AA/NA) classes, GED prep, Anger Management, and Alcohol and Chemical Treatment Series (A.C.T.S.). More positive outcomes have been evidenced in case management, as the clients are more willing to comply with agency requests and service plans through the artery of hope – ReNewMS.

As an internal stakeholder in the lives of families and children, ReNewMS and the MDCPS Prevention and Protection Unit work collaboratively to develop the message and preventive support for rehabilitation of families and reunification of children, where necessary. An assessment to explore the needs and strengths of the families allows a more tailored approach for services, such as Family Preservation and MYPAC, equips families with the tools for an all-encompassing environment meeting the daily tasks, time management needs, extra-curricular activities, parenting skills. The sustainable partnership with Canopy equips families with problem-solving techniques within the home that lead to more successful home environments, behavior modification techniques and redirection skills, crisis management, establishment of boundaries and deterrence of behavior (i.e., tobacco use, drug use, effects of drugs especially during pregnancy, etc.), while efforts exist to embody a scaffolding of skills promoting family therapy, conflict resolution, effective discipline, nutritional wellness, budgeting, and strategies for stability in troubled families which further reduce the need of placements and trauma. By developing a plan of action to address the daunting task of eradicating substance abuse, we have built coalitions through a collaborative approach with other agencies and committees, such as the Mississippi Bureau of Narcotics, Junior Auxiliaries, and most notably, the ReNewMS Medical Sub-Committee Members: Mississippi Hospitals Association, Division of Medicaid, Division of Mental Health, State Department of Health, Pharmacy Board, and Children’s Advocacy Center. In valuing community stakeholders, constituent education occurred on January 13th at the Leo Seal Community Center in Waveland for the ReNewMS Stakeholders/Tri-County Trauma Conference featuring Amelia Franck Meyer through a presentation on understanding the origins of childhood trauma. Region VII East’s Regional Implementation Team Meeting, held on February 17 at the Kiln Library, focused on the aims of ReNewMS and was spearheaded by Judge Elise Deano and Regional Director Pam Cross.

Our focus on the treatment of drug dependency through doctors certified to administer Suboxone (Buprenorphine) or Medical Assisted Therapy (MAT) to give better outcomes needed by rural mothers and improve clinician guidance on prescribing opioids, if not change prescribing practices. Through ReNewMS, we aim to establish relationships with the hospitals, obstetrics and gynecology doctors and clinics, community health centers, law enforcement, nonprofits, shelters for causes supporting the family unit, faith-based organizations, and the community at large to develop a toolkit that best assists us in tackling the apparent opioid distress and impairment to achieve greater outcomes for our mothers.

In Marion County, we have seen an openness to treatment and willingness for regular, random drug screens for proper treatment to be provided. As of February 28, 2017, we identified 123 mothers with over 20 having given birth to children who tested positive, 9 expecting, average age of 21, 33 Medicaid ineligible and having no employment or housing, no evidence of treatment for addiction, and some with more than one child in custody. Only 15 are covered through Family Planning with Medicaid, and 6 in treatment. A prevalence of substances are marijuana, meth (synthetic), and prescription pill abuse of Norco and Lortab in Marion County. Random drug screenings are helpful in giving us a baseline with which to identify the drugs and best assist the program participant with the progression needed in overcoming addiction.

It has been evidenced that court attendance has increased among the biological mothers with children in custody who participate in RenewMS. Once contact is made, the mother is equipped with knowledge about ReNewMS and is able to see a pathway of hope (not judgment) that will afford them a chance in life to be clean, possible reunification, and the chance to achieve a personal goal. They find self-worth and gain a new lease on life. Mothers evidence a willingness to conquer addiction, show more meaningful engagement and productive visits, an openness to communicate and update personal information, accountability, and even identify subsequent users and partners of addiction to create a community of nonusers, while sharing trends and areas that many women struggle with or that need greater focus for specific areas. ReNewMS is the one loud voice that can be heard by the mother and there is a need for it around the State of Mississippi.

Mississippi Citizens Review Panels

Mississippi currently has two entities serving as Citizen's Review Panels. Regular updates regarding the agency are given to stakeholders and community partners serving on the Children's Trust Fund Advisory Board and the Teen Advisory Board (TAB), who have been served by the agency. Feedback is also solicited from the Regional/County Improvement Teams.

Mississippi DFCS has historically utilized the CJA Task Force, Child Death Review Team, and the Children's Trust Fund as citizen review panels. As part of Mississippi's Practice Model implementation, MDCPS has sought with success to include stakeholders and community partners in Regional Improvement Teams in the communities where they live and serve. This is where the stakeholders and partners are updated on the progress of the agency as well as strengths and needs specific to that area of the state, allowing for feedback, input, and problem-solving collaboration targeted to the specific characteristics of that area. If MDCPS were to continue to ask members of the same community member pool to serve on Citizen's Review Panels, this would essentially pull them away from their local community involvement and defeat the primary purpose, especially when the Regional Improvement Teams serve this purpose for the spirit and intent of the Citizen Review Panels.

It is the intent for MDCPS to enlist additional groups as Citizen Review Panels in 2017 who already meet on a regular basis. These groups will represent different areas of the state and different aspects of Mississippi's child welfare services. Some groups were extended an invitation earlier this year to participate as a Citizen Review Panel. These groups are as follows: AIDS Services Coalition of Hattiesburg MS, Hancock Resource Center, Forrest County Zero to Three Safe Babies Court Team, Foster Parents organization for coastal counties (name to be determined), Marion County Task Force, and Forrest County MAP Team. A formal agreement will be developed. As part of this agreement, an annual report with honest recommendations for MDCPS regarding our policies, procedures, practices, and effectiveness will be requested.

There have been community groups meeting in Hancock County and Marion County to explore ways the community can become involved in improving the lives of children in their area, specifically with the families who are served by MDCPS. The community members are exploring what types of abuse/neglect occur in their area, as well as geographical origins, and types of services and resources needed. One area saw the need for more high quality foster homes in their area. The response resulted in a church hosting a weekend event in which numerous community members came together to be trained and have their backgrounds checked to start the process of becoming foster parents. This same concept has been replicated in others areas through the organization, 200 Million Flowers, and the Rescue 100 movement.

Mississippi DCPS is committed to the concept of engaging community leaders, citizens, and partners to join together to meet the needs of the community, within the supportive framework of state and federal policies, resources, and collaborations.

- **Currently MDCPS is unable to provide the required assurance and to document compliance with CARA by June 30, 2017. MDCPS will be coordinating with the CB RO in developing a PIP. Proposed PIP Elements for CAPTA/CARA Amendment:**
 - **Develop an agency policy that takes into account all state and federal considerations and requirements within our new agency structure.**
 - **Ensure the public notification is right and up-to-date with our upcoming reporting tool changes and collaborative partnerships.**
 - **Provide the training needed for front-line staff to help them engage families affected by substance abuse, learn how to best collaborate with other professionals, and use the Plan of Safe Care effectively.**
 - **Train intake staff on how this affects receipt of information and referrals.**
 - **Develop MOUs as needed to formalize partnership roles related to this Amendment.**

Attachments

- Teen Advisory Board as currently utilized for Citizen Review Panel
- Children's Trust Fund as currently utilized for Citizen Review Panel
- Governor's Assurance – THE JUSTICE FOR VICTIMS OF TRAFFICKING ACT OF 2015
- Additional Documentation related to Trafficking Amendment

CAPTA COORDINATOR(S):

Tamara Garner (July 1, 2016 thru June 30, 2017)

Brian Lewis (July 1, 2018)

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Mississippi Teen Advisory Board FFY 2017 Annual Report

**Administered by
State of Mississippi
Mississippi Department of Child Protection Services
Dr. David Chandler, Commissioner
P. O. Box 346
Jackson, MS 39205**

Mississippi Teen Advisory Board

The mission of the Teen Advisory Board is to promote youth leadership and self-advocacy by providing opportunities and guidance for youth to express their thoughts, achieve their goals, and make a positive impact on Mississippi's foster care system. The Teen Advisory Board aims to accomplish this mission by using the members' abilities to analyze strengths and weaknesses, set and reach personal goals, and develop self-confidence and self-motivation. Teen Advisory Board members express leadership by being role models in their communities and teaching, guiding, and influencing others to be of service.

TAB participation is currently limited to three (3) youth per region, with additional TAB members as advised by the TAB Coordinator in order to cover gaps in representation or youth leaving care.

Participation in the Teen Advisory Board entails the following responsibilities for the youth:

1. Monthly attendance at Regional Meetings held in all 14 MDCPS Regions
2. Quarterly attendance at State-Wide Meetings
3. Participation in IL Skills Retreats as Color Group Leaders
4. Provide youth perspective in planning IL activities and conferences
5. Contribute to the production of a quarterly newsletter for all youth in care

Benefits to Teen Advisory Board participation:

1. Priority slots at IL Skills Retreats
2. Stipend for participating in State-Wide Meetings
3. Leadership and Self-Advocacy training
4. Opportunity to effect positive change in the foster care system

Leadership training for Teen Advisory Board members will focus on the areas of developing personally, driving change, and leading others. This training will be accomplished at State Meetings in addition to TAB business.

The Teen Advisory Board has selected the following as regional and statewide initiatives:

Tuition Waivers for Public Institutions:

Foster youth are typically from low-income families, and the separation of these youth from their families does little to prepare them financially to attend college. Currently, a combination of Pell and Education and Training Voucher funds will cover approximately \$10,750 dollars for education costs. The costs associated with attendance at state universities for resident students are more than twice this amount. Even for community colleges, costs of attendance range from approximately \$6,000 to \$8,500 per year, depending on college and program. These figures do not include the costs of attendance during the summer, a requirement to receive ETV funds during the summer months. This often necessitates large student loans for young people who, if left unsupported, are more likely than other students to leave school. Even without student loans, the margin for error for these students is extremely small, and any disruptive life event has the potential to de-rail their educational careers. As we know, the odds of such life events are much greater for youth who have experienced foster care. There are other grants and scholarships, of course, but many of these are difficult for foster youth to access. MTAG, for example, is only available for students receiving less than a full Pell grant, and foster youth receive a full Pell grant by default if they fill out their FAFSA correctly. Foster youth in general are less likely to receive support with applying for scholarships, and frequent placement (and, therefore, school district) changes coupled with social restrictions that prevent them from participating in extracurricular activities make it difficult for them to be competitive when applying for scholarships. Tuition waivers to public institutions in Mississippi would allow these students to apply themselves to their studies, while utilizing available grant funds for other necessities such as food, clothing, and transportation. This in turn will help promote resiliency and improve degree attainment for foster youth.

Housing:

For many foster youth, a residence hall represents a stable placement. Unfortunately, this may be the most stable and stress-free placement they have experienced. However, these shelters are frequently unavailable for holidays and breaks. During these times, youth may not have any outside home to return to. Ensuring that this housing is available for foster youth who are actively enrolled in school would help to both advance these students' education and promote retention.

MDCPS Response:

The Independent Living Apartment Placement Program and Aftercare programs are in place to remedy housing issues. Currently we are working to engage more community partners around acquiring and sustaining suitable housing.

Tuition waivers would have to be a bill that is passed by the Mississippi legislators. We are strengthening our TAB alumni group to become education advocates for the next legislative session.



Children's Trust Fund of Mississippi Advisory Council FFY 2017 Annual Report



**Administered by
State of Mississippi
Mississippi Department of Child Protection Services
Prevention / Protection Unit
Dr. David Chandler, Commissioner
P. O. Box 346
Jackson, MS 39205**

Children's Trust Fund Advisory Council

Advisory Council Meetings and Members

The CTF Fund Advisory Council (CTF AC) meets on a quarterly basis on the second Friday of the second month of the quarter. The members continually provide oversight and management for the Children's Trust Fund of Mississippi including the subgrant to the subgrantee – Starkville Oktibbeha Consolidated School District.

In addition, the CTF AC makes recommendations on other CTF proposed expenditures such as media campaigns and additional subgrant funding recommendations.

Subgrantee

Starkville Oktibbeha Consolidated School District renewed their option to continue the grant funding for 2017 with an increase requested in the grant to expand Parent Café' Services. The CTF AC was pleased to recommend the increase in funding. The CTF Advisory Council is very impressed with the ability of Starkville Oktibbeha Consolidated School District to increase their footprint in the community by expanding the program into two additional counties over the last three years. Therefore this expansion will include a total of five counties covered, providing the Parent Café Model to a larger number of the community. The subgrantee has reported to the Advisory Council regularly, demonstrating the positive effect it has had on the community, with promise of reducing child abuse and neglect through parental knowledge and support.

The Request for Proposal was due this year, however the MDCPS Leadership wished to use the funds for the Infant Safe Sleep Initiative. This subgrant will result in funding one provider for the next two years to provide the Safe Sleep message statewide. In order to assist Starkville Oktibbeha School District in their transition, the CTF and MDCPS Leadership approved the renewal of the funds for the subgrant to Starkville Oktibbeha for an additional year.

Children’s Trust Fund Advisory Council Members:

Name
Dr. Tracy Mims, Chairman
Danielle Seale – MS Department of Health
Sandra Parks – MS Department of Mental Health
Tamara Garner – MS Department of Child Protection Services
Dr. Kim Benton – MS Department of Education
Dr. Anna Marshall – Jackson State University
Dolphus Weary
Patrick Swoops
Vernon Smith – Law Enforcement
Edward “Nick” Kramer
Charlotte Burrell – MDCPS, CTF Secretary

Children’s Trust Fund Advisory Board Efforts

Throughout the year, the Children’s Trust Fund Advisory to Council has approved MDCPS staff to attend the Trauma Informed Conference put on by the Mississippi Department of Mental Health in September 2016, and the Looking to the Future Conference in June 2017.

The Advisory Council addressed the need to be transparent with funds. There is some concern about using funds to send too many individuals to conferences. The group believes this to be an appropriate use of funds, but to be used sparingly. In keeping with this mandate, the Advisory Council limited funds to individuals who were in leadership roles that could have an impact in implementing Child Abuse and Neglect Primary and Secondary Prevention Services.

The Advisory Council is very interested in continuing the Hot Car Campaign to educate the public and address the deaths that have occurred in our state last summer due to young children being left alone in cars.

The Advisory Council is also working on filling the slot left by one member vacating the board. Names will be considered at the next meeting to fill the position open.

CTF AC By-laws revisions were approved on February 3, 2017. Additional revisions are being considered to better fit the needs of this governing board.

Recommendations

The following are recommendations provided to the Mississippi Department of Child Protection Services for the remainder of the year.

1. The recommendation was made to continue, the Hot Car Public Service Campaign in order to address recent deaths as a result of leaving young children in a hot car. Money has been set aside to provide the funding to get the word out. The CTF AC has requested it be a three-fold campaign through billboards, television and internet advertising. The request is to start in June and run through September in order to be the most effective over the hottest part of the summer.

Response: Campaign development is currently underway with the External Communications division of MDCPS.

2. The recommendation was to look into a campaign on Children Affected by Substance Abuse.

Response: MDCPS had NSPARC with Mississippi State University develop mock designs for posters for both Pregnant Substance Abusing Women and Parents/Caregivers use of Methamphetamine in and around children and their homes. The CTF AC reviewed the mock-ups and had several recommendations to increase the effectiveness of the posters. Discussions have been made with the MDCPS External Communications Officer in order to use the recommendations to redesign these posters into more effective means of communicating this message.

3. The recommendation by the Advisory Council is to begin using CTF monies to assist MDCPS in the prevention of Human Trafficking.

Response: The Prevention Department has discussed Human Trafficking issues with the MDCPS Human Trafficking Representative. This is still in process.

4. The recommendation by the Advisory Council is to spend funds on more targeted activities in addition to general child abuse prevention efforts.

Response: MDCPS will be using \$200,000 in funds each year for at least the next two years to have one provider develop a comprehensive Infant Safe Sleep initiative. In addition, funds have been set aside to buy infant related items to promote the safe sleep message to the public at the upcoming MS State Fair in October. Also at the Fair, information targeted to children about child abuse and neglect will be provided via Safe and Un-safe Touch Coloring Books.