

**FORT CARSON IMPACTS ON
THE EL PASO COUNTY DEPARTMENT OF HUMAN
SERVICES
Fort Carson Regional Growth Plan, Phase II
Supplemental Report**

**Prepared by:
El Paso County Department of Human Services**

**Prepared for:
Pikes Peak Area Council of Governments**

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Introduction and Background:

The El Paso County (EPC) Department of Human Services (DHS) is responsible for providing federal and state mandated programs and other services to members of the community in El Paso County, Colorado. DHS programs include Child Protective Services (CPS), Child Support, Temporary Assistance for Needy Families (TANF), Diversion, Youth and Adolescent services and programs, Food Assistance, and Education and Employment assistance. Some of the clients who receive DHS services come voluntarily; others are referred or involuntarily involved due to Court and law enforcement requirements.

Phase I of the Fort Carson Regional Growth Plan identified primarily anecdotal information regarding the impacts of Fort Carson growth on DHS services. The Phase II analysis aims to quantify trends identified. Therefore, DHS was contracted to collect and analyze data showing the impact of Fort Carson growth on DHS services and the EPC community. Data for the period of this commissioned study was collected and analyzed for the period 1 September 2009 – 30 April 2010.

The data presented in this report show the demand on DHS provided services and the issues impacting the Fort Carson community. Based on the data collected, CPS has been identified as the program most impacted by Fort Carson. Current trends are identified and used to estimate the future impact of the Fort Carson growth on the EPC community.

This report concludes with recommendations which DHS has determined will support and benefit the Fort Carson community as well as the citizens of EPC. These recommendations address the improvement of services to meet Fort Carson family needs, improving the communication between DHS and Fort Carson partners, and the allocation of a designated liaison team to serve Fort Carson exclusively.

Methodology

In order to assess and quantify the impacts of Fort Carson on DHS services, DHS changed procedures and instituted additional measures regarding military-affiliated clients in order to track information regarding military affiliation of person(s) involved (active duty service member, spouse, child, branch of service, etc.). DHS developed a questionnaire (see Appendix A) to be used by intake personnel and caseworkers for military-identified clients. Clients either identified themselves as military-affiliated or were identified by caseworkers during the course of their investigation.

The questionnaire provides additional data beyond information that DHS is currently required to report to the state. Therefore, this information was recorded and tracked in Microsoft Excel-based spreadsheets, separate from the state mandated TRAILS tracking system and DHS's CPS intake (Microsoft Access) database. The information was used to track the number and types of services utilized by Fort Carson Soldiers and families in order to make projections regarding DHS workload and future demand for services as a result of Fort Carson growth.

However, because completion of the detailed questionnaire was an additional task asked of caseworkers, questionnaires were not completed for all military-involved cases during the study time frame. Overall numbers of military-involved reports and assessments tracked by DHS through the CPS intake database are discussed below. A more detailed analysis is provided for those cases with completed questionnaires.

Analysis:

Based on demographic information in the Draft Phase II Fort Carson Regional Growth Plan, the Fort Carson-related population—including Soldiers, spouses, and children—is 55,399 (as of the First Quarter of Fiscal Year 2010) and there are currently 18,322 Fort Carson children in the region, of which 10,529 are school-age.

The U.S. Census Bureau estimated the 2009 population of EPC at 604,542. This includes service members and families assigned to Fort Carson. The representation of EPC population attributed to Fort Carson is 9.16 percent, which is proportionate to the rate of CPS services required by and provided to, Fort Carson families (9.11 percent).

Fort Carson-Impacted Services

For the purpose of producing this report, data were collected and analyzed for an eight (8) month period, 1 September 2009 – 30 April 2010. **A total of 204 military questionnaires were completed during the study period. Of these, 174 were identified as Fort Carson-affiliated (i.e., involving either an active duty Soldier or family member). Figure 1 below provides a breakdown of services provided for these 174 cases.**¹

Type of Service	Number of Families	Percentage
Child Protective Services	152	87.36%
Youth and Adolescent	0	0%
TANF	12	6.90%
Diversion	7	4.02%
Child Support	3	1.72%
Total	174	100.00%

Figure 1: Table identifying the type and number of services provided to Fort Carson affiliated families

As shown above, the main issue concerning Fort Carson families is Child Protective Services (CPS).

- Of the 174 Fort Carson-related service requests, 152 (87.36 percent) required CPS involvement and 22 (12.64 percent) were non-CPS related (TANF, financial diversion or child support).
 - *Youth and Adolescent Services* – Research showed that parents are able to access residential treatment services and other types of youth and adolescent services through TRICARE for extensive periods of time (generally 8 months) so they tend not to come to DHS seeking assistance. It was found that when the youth requires follow-up day treatment, the income-based fees levied by DHS are high, and that parents often choose to seek assistance using other resources.
 - *Child Support* – There were three cases where Fort Carson involved persons came to the DHS office seeking child support services. EPCDHS contracts these services out to a

¹ The types of service provided by DHS vary from requests for assistance (e.g., someone requesting child support services in person at DHS offices) to reports of child abuse claims. Assistance provided can range from referring a person to an independent contractor responsible for processing child support requests, to investigation of child abuse claims involving significant amounts of staff time.

private contractor, currently PSI, which has an office location in downtown Colorado Springs.

When a person conducts an Internet search to find information regarding child support assistance services in EPC, he/she is directed to the Child Support Services of Colorado website, where the program is administered by PSI, who would serve the individual under their contract. To this extent, DHS cannot provide any qualitative figures on the Fort Carson impact on these services, as there are a number of variables involved and the information relating to Fort Carson families is not directly tracked. In addition, all people who come to DHS seeking child support assistance services are directed to PSI.

- *TANF/Diversion* - There were 19 cases where Fort Carson involved persons came to the DHS office seeking TANF or Diversion services. These numbers represent a small percentage of requests for TANF and Diversion assistance and are not considered a significant impact to DHS services.

Impact on Child Protective Services

During the study period, CPS received 8,147 referrals (unconfirmed reports of child abuse or neglect), including 742 military-involved referrals. Approximately 97 percent of all military referrals are Fort Carson-affiliated. Of the 742 military-involved referrals, 561 (76 percent) were assigned for assessment.² Detailed data were collected via the military questionnaires on 152 of the Fort Carson-involved CPS cases during the study period. This section provides an analysis of the data collected.

- Several cases were reported as having more than one alleged perpetrator. Of the 182 alleged perpetrators, 87 (47.80 percent) were identified as a service member, and 85 (46.70 percent) as the spouse of a service member. The remaining 5.5 percent were other relative or non-relative individuals.
- As shown in Figure 2, the 152 cases involved 344 children; the majority of children involved (54.94 percent) were aged 0-5.

Age	Number of Children	Percentage
0-5	189	54.94%
6-12	130	37.79%
13-17	25	7.27%
Total	344	100.00%

Figure 2: Table identifying the ages of children involved in the 152 Child Protective Services incidents discussed in this report.

- Figure 3 shows data collected at the time of a report indicating the reason a referral was made (i.e., the initial presenting problem). In some cases, more than one presenting problem was identified in the initial report (e.g., domestic violence and neglect), resulting in a higher number of initial presenting problems (194) than total cases (152). The initial presenting problems regarding the Fort Carson children were neglect (24.74 percent), physical abuse (24.23 percent), and injurious environment (21.65 percent).

² Source: CPS Intake database.

Initial Presenting Problem	Number of Problems	Percentage
Neglect	48	24.74%
Physical Abuse	47	24.23%
Injurious Environment	42	21.65%
Domestic Violence	28	14.43%
Drug Abuse		
Illegal	10	5.16%
Prescription	4	2.06%
Alcohol	4	2.06%
Sexual Abuse	6	3.09%
Mental Health Issues	5	2.58%
Total	194	100.00%

Figure 3: Table identifying the presenting problems of the Fort Carson families.³

- When a caseworker goes out to see the family for an assessment (i.e., a report or referral is assigned for further investigation), additional, co-occurring problems are often identified by caseworkers. In the above Fort Carson cases, 14.43 percent of cases presented with domestic violence issues. A review of the assessment files showed domestic violence to be a dominant co-occurring problem, and that in 33.33 percent of child abuse or neglect cases, there was domestic violence occurring between the adults in the home.
- 61.18 percent of the incidents occurred outside the Fort Carson installation.
- 94.73 percent of the incidents involved enlisted personnel and/or their families.

Based on file reviews of the 152 assessments analyzed for this report, following the investigation (a 30-60 day process), five cases were transferred for ongoing services provided by DHS. A review of the assessment files showed that of the 561 total military assessments conducted during this time period, 37 cases were transferred to ongoing child protection units. These families are presently receiving some form of ongoing therapeutic services from CPS. The average length of an ongoing case is 1 year. Of the 37 ongoing cases, 18 involved children going into foster care.

Deployment and Child Protective Services assessments

CPS caseworkers also collected data regarding deployments, including the following:

- 17.11 percent of CPS assessments involved families where the service member is currently deployed to a combat zone. Of these assessed cases, 88.46 percent were perpetrated by the spouse.
- In cases alleging the service member as the perpetrator, 61.63 percent of the cases involved service members who identified themselves as having been deployed 1-2 times and 25.58 percent for those deployed 3 or more times. The remaining 12.79 percent of service members did not identify themselves as having been deployed to a combat zone.
- CPS staff has also observed trends related to the arrival and departure of troops to and from combat zones. While this was not specifically tracked for this report, it is an observation from

³ The count of 194 Initial Presenting Problems is a tabulation of all the boxes checked in response to question 5 on the 152 completed questionnaires.

CPS that there appears to have been notable increases in CPS reports reflective to troop combat movements.

CPS Process:

The majority of the services provided to the Fort Carson community for the time period recorded were CPS related. CPS is responsible for the review of all reports of child abuse and neglect which occur in the El Paso County community, including Fort Carson. DHS currently has 2.5 caseworkers and one supervisor allocated to the CPS military unit; any overflow of work must be handled by other DHS staff. This unit conducts the majority of the Fort Carson involved assessments and transfers cases for required ongoing services.

Investigation of CPS reports/referrals comprises the majority of caseworkers' time. Additional time is required for Fort Carson-related assessments because of additional personnel involved in the review and coordination required between CPS staff and a variety of Fort Carson personnel. In order to illustrate the resources involved in the CPS referral and assessment process, the procedure and processes conducted by the CPS Division after a report of child abuse or neglect is received are explained below.

A report of abuse or neglect is received by CPS. This report may come via the Child Abuse Hotline (either anonymously or identified); a person who, by profession, is designated as a mandatory reporter; via email; or from someone visiting the DHS office.

All reports of child abuse or neglect are reviewed by a specialized Child Protection Review team, consisting of supervisors and lead workers, on a daily basis. The team reviews the information in the initial report and decides whether it needs to be assigned to a caseworker for further assessment or determines the referral requires no further follow-up (NOFU). When assigned, the CPS caseworker will conduct the assessment, interview and/or observe all relevant parties, and determine whether there is a need for ongoing services, either court ordered or voluntary, or to close the assessment and refer the family to Fort Carson provided services. (See the flow chart on the following page for an illustration of this process.)

The CPS caseworker considers many factors when conducting the assessment and makes a determination as to the imminent danger for the child, the risk of future danger and the effect this situation has on the parent's ability to safely parent. In conducting the assessment the caseworker will interview and observe the victim and all relevant parties including, all residents of the household, school teachers and officials, medical and mental health providers as relevant and any other collateral contacts.

Court involved cases are a formal legal process and are primarily utilized in matters of severe physical and sexual abuse, severe domestic violence, and drug abuse. Often in court involved cases, the child or children are removed from the home and placed in foster care with custody appointed to DHS. In matters where the service member is deployed, a request is made for the return of the service member to take custody of the children and provide minimum disruption in the child's life. Kinship placements (placement of children in DHS custody with extended family members) are less likely to occur with military cases, as federal laws prohibit the removal of a child from the state without proper process, which can be lengthy (3-4 months).

Voluntary services are provided most often in cases of neglect or injurious environment. The families involved receive family preservation and/or education services from CPS aimed at assisting the family while providing minimal disruption to the child(ren) involved.

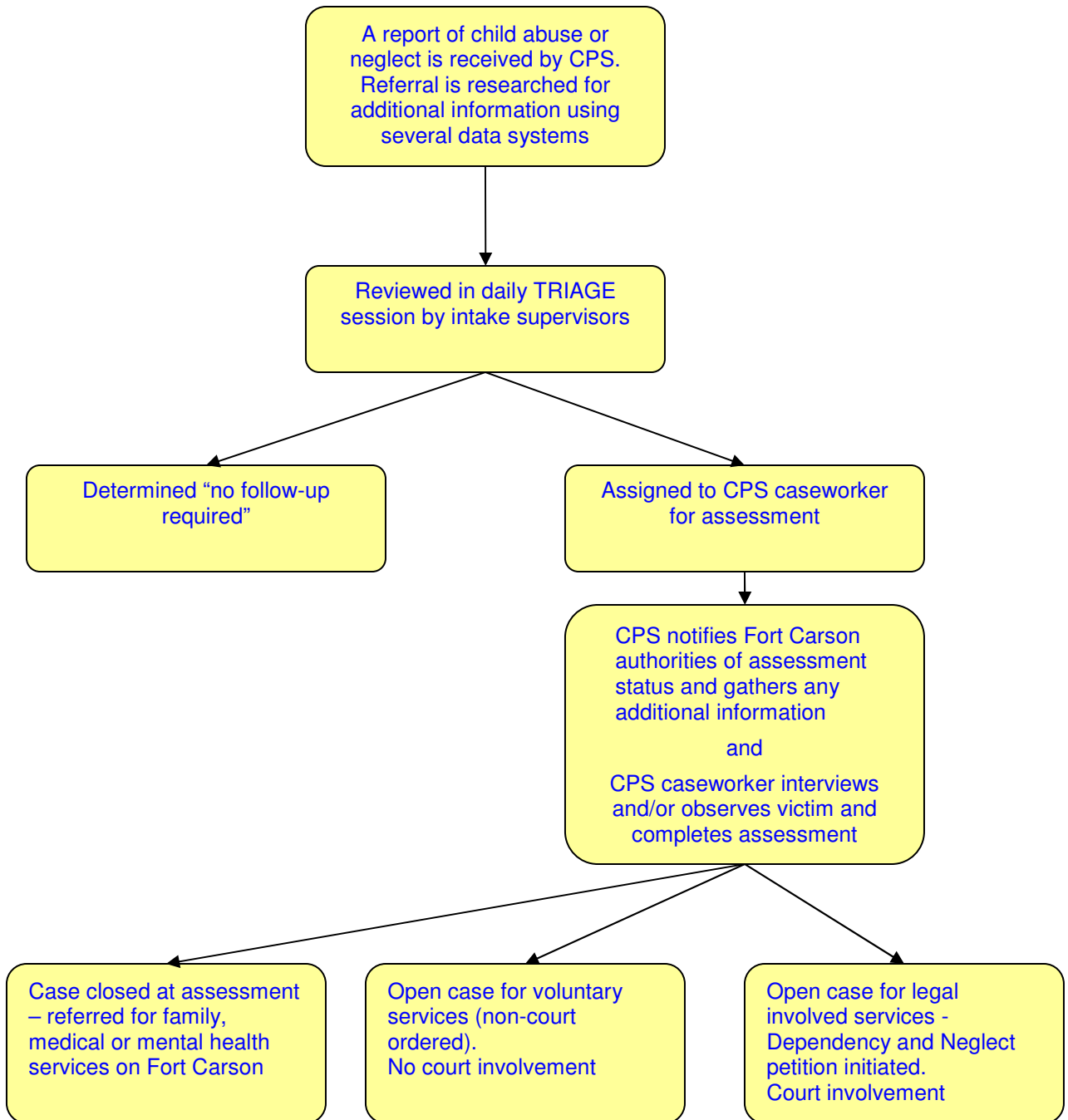


Figure 4: DHS flow of process for Military Involved Cases as of June 2010

The CPS caseworkers work with parents and caregivers, and as necessary the extended family, to provide the family with the services they need to keep their children safe, and to prevent the need for the child or children to enter into out-of-home placement.

Copies of all referrals are forwarded to the District Attorney's office and local law enforcement agencies for review, as mandated by law.

Military involved assessments require intensified case coordination in comparison to civilian assessments. This is due to the multiple layers of procedure which must be followed to meet military policy requirements, and due to the number of partners involved, such as Fort Carson's Social Work Services (SWS), Army Criminal Investigation Division (CID), Army Community Service (ACS), medical services, and on-post providers. This coordination continues throughout the 30 day assessment process and can be as long as 1 year if the case transfers to an ongoing service unit. A caseworker can conduct 150-175 assessments per year, and on any given day, can be working 2-3 assessments from their open caseload (15-20 cases) simultaneously.⁴ Assessments are an intense process performed by CPS intake staff.

All DHS staff selected for the CPS military unit, including the supervisor and lead caseworker who take the most intense military cases, such as those involving serious physical or sexual abuse and neglect, have professional and/or personal experience and a detailed understanding of the military system, procedure and protocol. This is essential to effective partnership between DHS and Fort Carson.

Currently, the CPS military unit coordinates with staff on Fort Carson in a variety of facets. Each week copies of all referrals involving Fort Carson personnel are faxed to Fort Carson SWS for review. All assigned military assessments are reviewed by a Critical Review Committee (CRC) on a monthly basis. The EPC CPS supervisor and caseworkers who work the military assessments attend the CRC as observers. The CRC is a military process, external to DHS, and is a multidisciplinary team consisting of representation from Judge Advocate General (JAG), ACS, Fort Carson Garrison Commander, SWS, Chaplain, treatment providers, such as a pediatrician and counselor, and the commander of the service member involved in the review. The CRC is held on a monthly basis on Fort Carson and the CRC members hear the allegation and findings. Each case is presented at the CRC, usually at the conclusion of the CPS assessment. Each CRC member votes as to whether or not this incident meets the criteria for a finding of abuse and/or neglect. If the allegation is founded, and the perpetrator is a service member or a family member, the finding is registered in a federal military registry which is accessible by various service providers (such as SWS and CID) worldwide. Once founded, the service member is required to complete the services directed by CPS, unless the service members' command determines this to be impossible due to mission requirements. The CRC cannot force the family member who is founded upon to complete any services; however CPS may pursue legal action to mandate compliance.

SWS do not initiate on-post assessments for referrals which DHS determines to be unfounded or no follow up needed. When a serious incident occurs on Fort Carson, SWS or CID can refer to DHS for joint assessment. Case coordination with both Military Police (MP) Investigation Division and the Criminal Investigation Division (CID) on serious child abuse cases has been a key component in moving forward for criminal prosecution as well as juvenile court intervention.

Because of the significant impact of Fort Carson on DHS's CPS services, CPS established a military unit to enable case workers to focus exclusively on military-related (primarily Fort Carson) cases. Experienced caseworkers are assigned to the military unit in order to foster a more collaborative working relationship with Fort Carson personnel and minimize the need to educate or re-train CPS staff regarding military culture and procedures. El Paso County was recently awarded a 2010 NACo award for services provided by the CPS military unit for the program entitled "Child Welfare Military Project."⁵ This award affirms the expert, high quality, efficient service provided by EPC DHS CPS staff to the military community in EPC.

⁴ Ideally, caseworkers are assigned twelve new cases per month; however, because of current workload demands, some caseworkers are assigned up to twenty cases per month.

⁵ NACo – National Association of Counties – <http://www.naco.org>

Review and Findings:

A review and analysis of the collected data produced the following findings:

- The request for Child Support, Financial Assistance and Youth and Adolescent services was minimal. The majority of families were involved with Child Protective Services.
- Based on the information provided via the 152 CPS completed questionnaires, 344 Fort Carson children aged 0-17 were involved in child abuse or neglect reports during the above period. Not all 344 children were direct victims of the child abuse or neglect; however they were present in the home or vicinity of the incident and are considered to be involved as collateral victims.
- While civilian child abuse or neglect cases in EPC are assigned at a rate of 52 percent, military involved cases are assigned at a rate around 70 percent. The majority of children involved are young (0-5 years old), with no or limited verbal skill. The families have different environmental and emotional stressors than the general population of EPC, such as multiple combat zone deployments and isolation from their extended family support structure. There are multiple presenting issues, including substance abuse, physical child abuse and domestic violence. A review of the collected data supports the determination that there is a higher risk of substantive abuse or neglect.
- For calendar year 2010, the representation of CPS military-involved assessments for January through May is 9.76 percent.⁶
- Using historical data, it was determined that in 2008, 4.45 percent of the total referrals (10,930) in El Paso County involved military personnel; in 2009, 7.10 percent of the total referrals (11,141) involved military personnel. Of the total referrals involving military families, 97 percent involve families affiliated with Fort Carson.⁷
- In 2007, one caseworker was assigned to manage the majority of the military assessments with some overflow to other workers. By 2009, two full-time caseworkers were allocated to military assessments, but a great amount of work “overflowed” to other staff.

The following projections were calculated using 2010 salary and benefit figures, a workload of 150 assessments per worker annually, and the trending annual increase in need for services (estimated at 2.5 percent). A lead caseworker is designated as Level IV, and other caseworkers would be designated as Level III. The caseworker level designation is reflective of experience.

Using the data for military involved assessments conducted 1 September 2009 – 30 April 2010, CPS anticipates approximately 850 assessments will be conducted in calendar year 2010.

Based on the current trend of a consistent annual increase in reported incidents, and therefore assigned cases, it is calculated that by 2011 there will be a need for a designated DHS military unit consisting of one supervisor, one caseworker IV, five caseworkers III, and one case aide, who would be devoted solely to working military involved assessments. The anticipated salary and benefit cost to fund this unit is estimated at \$444,149 (based on DHS 2010 salary and benefit data).

Based on the current trend, and with the anticipated personnel growth for Fort Carson in the next few years, it is anticipated that this unit would require one supervisor, one caseworker IV, six

⁶ Source: CPS Intake database

⁷ Source: CPS Intake database

caseworkers III, and one case aide by 2013. The anticipated salary and benefit cost to fund this unit is estimated at \$495,365.

This anticipated staff requirements for Fort Carson services is of critical concern to the El Paso County Department of Human Services, which is currently funded by federal, state and local government, with the local source being inhibited by restricted growth parameters.

At this time, it is determined that the staffing levels of non-CPS departments providing services to Fort Carson families are sufficient to fulfill the demand. In the event some of the recommendations regarding financial assistance for Youth and Adolescent services are implemented by Fort Carson and the demand for service increases, there may be a future requirement for additional staff to service that population.

Recommendations:

Due to the integration of military personnel and their families into the local community, Fort Carson-related population growth has a critical impact on Child Protective Services. The recommendations presented herein represent opportunities for continued and effective partnership between DHS and Fort Carson.

Enhancing the communication and mutual cooperation between DHS and Fort Carson personnel would improve the delivery of services to the families stationed at Fort Carson. DHS currently has 2.5 caseworkers and 1 supervisor allocated to the CPS military unit. This liaison unit investigates incidents involving military members and their families, and transfers for any ongoing case services. Greater CPS staff involvement in the critical review team described previously and on-post investigation processes would benefit Fort Carson families by ensuring CPS staff access to information needed during the assessment process and determination of appropriate services needed or legal action required, as appropriate.

Co-Location on Fort Carson

- Physical location of the CPS military unit staff on Fort Carson would assist caseworkers in providing efficient service, enable improved sharing of information with all parties, as well as improve the provision of preventative education services, possibly in partnership with ACS.

Post Access

- The time involved in getting the caseworkers onto Fort Carson delays services to the families. Providing the assigned caseworkers and a supervisor from CPS with streamlined gate access (such as contractor badges or VIP passes) would allow faster response and more efficient service delivery by CPS staff.

Training/Partnership Opportunities

- Fort Carson provides information and training sessions (such as “Army 101”) to the community on various topics such as the Warrior Transition Unit (WTU), PTSD, TBI and therapeutic treatment options. As the CPS military unit works specifically with military cases on Fort Carson, caseworker attendance at these trainings and information sessions would be mutually beneficial. CPS would be informed of current issues and policy which would assist in efficient agency interaction. Some of the stressors which affect a military family are unique to the Armed Services. Educating the caseworkers of these triggers would allow the workers insight into military life and enable the provision of services relevant to the individual situation. Additional training opportunities include the recently-initiated Community Provider Trainings which provide more detailed information on deployment stresses, Army culture and requirements, and other factors; these trainings, which are provided by Fort Carson personnel and coordinated by the Pikes Peak Area Council of Governments, should continue.
- Fort Carson offers a variety of education and support services, such as budgeting, New Parent Support, parenting classes, Boot Camp for Dads, anger management, and stress management. CPS is aware that some of these classes have waiting lists and that not all family members who would benefit from these services are utilizing them. Making these programs available to all Fort Carson Soldiers and families would benefit Fort Carson children by allowing more community members to identify potentially dangerous situations prior to an incident, which in turn would mitigate the risk to children.
- Pending additional funding (as discussed below), CPS staff could provide education, awareness and training to the Fort Carson community through various outlets, such as Family Readiness Groups, Town Hall Meetings, and Family Re-Integration sessions and in partnership with ACS at events such as Military Child Month and Domestic Violence Prevention month.

Re-Integration Services for Children

- Fort Carson provides re-integration services to Soldiers and spouses following deployments. However, services targeted specifically for children appear to be minimal. Children's support groups, family visitation services and other appropriate programs would benefit the children in dealing with the adjustment of a parent or caregiver returning to the household following a lengthy absence. It would also provide a safe environment where children could express any concerns they have regarding a situation where they may feel unsafe or threatened.

Notice of Unclassified Troop Movements

- Advising the CPS military supervisor of pending troop movements - deployment and returning - on Fort Carson would enable the unit to prepare for the potential increased need for CPS services. The Pikes Peak Area Council of Governments currently works with Fort Carson Garrison Command to obtain and report this information on a quarterly basis. This process should continue.

Financial Support

DHS has already experienced a consistent increase in Fort Carson-related CPS cases and projects continued increases in the demand for these services. The Army has estimated that there will be more than 25,000 service members and 38,000 family members assigned to Fort Carson by 2013. While the increase in the Fort Carson population in the near future is only moderate (approx 1,100), the actual population will increase due to returning service members from the anticipated withdrawal of combat troops in the Middle East. As Fort Carson currently has a deployment rate of 40 percent, DHS anticipates there will be a need for additional staff to be added to the CPS military unit. DHS does not anticipate a reduction in the need for services in the civilian sector of El Paso County and currently diverts resources and staff from the EPC civilian workload to the CPS military unit. DHS funding sources to accommodate this increase in Fort Carson-related demand are extremely limited.

The CPS services provided by DHS to Fort Carson families are supported by two funding sources – Child Welfare and CORE services. The child welfare budget is funded with a proportionate allocation from the federal and state governments and requires a local (county) match, which is generated by local sales tax revenues. The CORE services budget is funded from state with a local county match, again from local sales tax revenues. The importance of understanding the revenue source is directly related to current economic conditions that are forecast to continue into the foreseeable future. El Paso County has been forced to reduce operating budgets significantly since early 2008. Voter approved revenue and spending limitations are contained within the state constitution. Because of these severe budget constraints, there is no mechanism, currently, for local governments to retain additional revenue – above the minimal allowance in the law - in future years even when the economy recovers. Therefore, DHS will be forced to meet increased demands without any additional revenue.

Due to the availability of purchasing opportunities that are free from local sales tax on Fort Carson, the local sales tax revenue is lower when purchases take place on post. This has a negative effect on the local revenue source available for matching state and federal dollars for child protection services.

Department of Defense (DoD) financial assistance in meeting Fort Carson-related DHS service needs would greatly enhance the ability of DHS to serve Fort Carson families and, ultimately, enhance Fort Carson Soldier readiness. Suggested support includes the following:

- Assessment services provided by DHS to Fort Carson families that are not covered by TriCare, and are paid from the DHS Child Welfare and CORE services budgets. These services include individual and family therapy, and couples counseling

- Administration and maintenance costs associated with the placement of Fort Carson children in foster care. These costs are currently paid from the Child Welfare budget.
- Office furnishings, telephone and internet access and related needs for establishment of a CPS office located on Fort Carson (as discussed above).
 - In addition, some of the Fort Carson families who receive therapeutic and family preservation services through DHS cannot afford the co-pays levied by TRICARE. This may discourage families from using these services and may create an “at risk” environment for the child or children in the home. It is recommended that TRICARE reconsider the co-pay requirement for families in genuine need who cannot afford the additional expense, and pay it to the service provider on the family’s behalf.

Conclusion:

Based on the information recorded for this study, Child Protective Services was identified as the most utilized service provided to Fort Carson families. Using data tracked for this report and a review of the CPS Intake database, the military involved assessments are determined to comprise around 9 percent of the CPS workload, which is representative of the proportion of recorded military population in the El Paso County community.

DHS anticipates there will be a need for additional staff to be added to the CPS military unit in the coming years, and may also require the addition of more ongoing caseworkers to manage all military cases receiving ongoing CPS services. Due to budget constraints, DHS cannot afford to bear the cost of this increase without additional funding. DHS does not anticipate a reduction in the need for services in the civilian sector of El Paso County, and therefore cannot continue to divert staff to the military unit without compromising services to both entities.

Enhanced coordination and partnership between DHS, CPS and Fort Carson, as well as additional funding – from DoD or other sources – is paramount to the continued provision of efficient and effective services.

Appendix A DHS Military Assessment Questionnaire

Which branch served?

- 1. Army _____
- 2. Navy _____
- 3. Marine Corp. _____
- 4. Air Force _____
- 5. Coast Guard _____

Location: Ft. Carson Other _____

Current Military Status:

- 1. Active Duty _____
- 2. National Guard/Reserves _____
- 3. Veteran _____
- 4. Retired _____

What is the military member's job ? _____

VA benefits Yes No

If a child receiving or applying for services has a parent or lives in a household which includes an ACTIVE DUTY SOLDIER ASSIGNED TO FORT CARSON (even if deployed) then answer the following questions:

1. Type of Service

- 1. Child Welfare _____
- 2. Adolescent/Youth Services _____
- 3. TANF _____
- 4. Diversion _____
- 5. Child Support _____

2. If Diversion (1.4) or Child Support (1.5), what type of services were provided?

- 1. Financial
- 2. Case Management
- 3. Open Child Support Case

3. Date of Assessment _____

If services (1.1) Child Welfare or (1.2) Adolescent/Youth Services, please continue below:

4. Referral Number _____

5. Presenting Problem (check all that apply)

- A. Physical Abuse _____
- B. Sexual Abuse _____
- C. Neglect _____
- D. Injurious Environment _____
- E. Drug Abuse _____
 - a. Illegal _____
 - b. Prescription _____
 - c. Alcohol _____
- E. Domestic Violence _____
- F. Mental Health _____

6. Who is the alleged perpetrator?
- A. Military Member _____
 - B. Spouse _____
 - C. Girlfriend _____
 - D. Boyfriend _____
 - E. Child _____
 - F. Other person living in the home _____
 - G. Relative not living in the home _____
7. Demographics
- A. On Post _____
 - B. Off Post _____
8. Ages of the children in the home and how many?
- _____ 0-5 years _____ 6-12 years _____ 13-17 years
9. What is the military member's rank?
- Enlisted Personnel: E-1 – E-9 _____
 - Warrant Officers: W-1 – W-5 _____
 - Officers: O-1 – O-10 _____
10. How many years of military service for the active duty member? _____
11. Current (non DHS) Services prior to the beginning of the assessment?
- WIC Military Social Services
12. Is law enforcement involved? Yes No
13. Is the military member currently deployed? Yes No
14. How many times has the military member been deployed, including the current deployment? _____
15. Has the military member ever served in a combat zone? Yes No
- If yes, what country? _____
16. Has the military member ever received a diagnosis of PTSD or TBI?
- Yes No
- If yes, which diagnosis? PTSD TBI
17. Has the military member ever been screened for PTSD or TBI?
- Yes No
18. Did the military member have a history of family violence prior to the first deployment?
- Yes No
19. Are there any financial stressors in the family? Yes No

20. Open case for ongoing services? Yes No

21. Is this a court case or voluntary services?

Court (D&N)

Delinquency

Voluntary

For questions related to data entry please complete the following:

Worker Name: (printed clearly)_____

Worker Phone #_____