



# DELAWARE DEPARTMENT OF SERVICES FOR CHILDREN, YOUTH & THEIR FAMILIES

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*Since inception, the Department of Services for Children, Youth and Their Families (DSCYF) has supported Delaware's most vulnerable families and children, helping them to lead safer lives and achieve better outcomes. Our focus has increased child, family, and community safety while also improving the well-being and long-term outcomes for the youth whom we serve.*

The Department has done so by focusing on five core objectives:

- Protecting children at-risk of abuse or neglect;
- Improving child outcomes by supporting children's health and well-being;
- Increasing community and child safety by better serving youth in our juvenile justice system;
- Providing more early intervention and prevention services, avoiding more serious behavioral and mental health issues; and
- Expanding treatment services for youth with behavioral and mental health needs.

With over 1,200 dedicated employees, DSCYF carries out its work through four Divisions:

- Family Services
- Management Support Services
- Prevention & Behavioral Health Services
- Youth Rehabilitative Services



Cabinet Secretary Benson-Green (center) with staff in recognition of "Wear Blue Day" during April 2016 Child Abuse Prevention Month.



## DIVISION OF MANAGEMENT SUPPORT SERVICES

Karryl H. McManus  
Director

Alison M. McGonigal  
Deputy Director

*The Division of Management Support Services (DMSS) provides critical support services which allows frontline staff to serve Delaware's children and families. DMSS manages DSCYF's operating and capital budgets, accounting and fiscal services, human resources, information technology, and facilities/maintenance operations.*

### MAJOR ACCOMPLISHMENTS

- **Program Financing:** The Cost Recovery Unit ensures DSCYF maximizes the recovery of federal Medicaid, SCHIP, Title IV-E entitlement and Social Security. This unit helped Delaware achieve a 38% increase in revenue from the federal agencies of Medicaid; the State Children's Health Insurance Plan; and Title IV-E. Total recovery increased from \$18.5 million in SFY08 to \$25.5 million in SFY15.

- The Social Security Advocacy Project helped us realize a savings of \$1.8 million between SFY11 and SFY15. This money is used to offset the cost of care for children in Foster Care who are eligible for various Social Security benefits. The project has also assisted children transitioning into independent living by providing additional resources. In SFY15, the SSA/SSI Advocacy project reviewed over 340 children residing in foster care to determine whether their needs could be supported by the Social Security programs. The review determined 58 additional children were eligible for benefits and a total of \$717,000.



- The purpose of the Title IV-E foster care program is to prevent the unnecessary placement of children from low-income families by offering states fiscal incentives for providing preventive services. Under the program states claim federal funds for maintenance payments for eligible children in foster homes and subsidized adoption payments for eligible children in adoptive homes. In addition, the state can also receive reimbursement for administrative costs associated with the IV-E program. The program maintains tight eligibility criteria and only reimburses for eligible foster children where continuation in the home would be contrary to the



child's welfare, are income eligible based on cash assistance standards and the child or children are placed with a licensed foster care provider. At present, approximately 38% of children we serve qualify for these federal payments. These funds offset the state of the sole cost of care for these children.



- ***Expedited Transition to Families:*** In partnership with the Annie E. Casey Foundation, DSCYF embarked on a Department-wide initiative known as Partnering for Success. The goal of this work is to achieve better outcomes for our most challenging youth. One outcome from the work thus far has been the formation of the Expedited Transition to Families process, or ETF. As part of the ETF process, the youth, family members and their supports, as well as stakeholders, meet to identify child and family strengths and needs. The team then develops an action based timeline and support plan for family placement when appropriate. Key to this effort is eliminating barriers to providing the individualized supports identified during the meeting. Since work began in August 2015, teams have met with youth who were in out-of-state residential settings to develop plans that would safely return them to family or the least restrictive community environment. Cohort 1 included 17 youth in out-of-state, long term residential placements. Cohort 2 included 34 youth (16 in out-of-state placements, 18 youth in in-state residential settings). As of August 2016, 65% (11 youth) of Cohort 1 and 42% (14 youth) in Cohort 2 were residing in a family setting (family, relative, foster care).

- ***Focusing on academics:*** DMSS' Education Unit has helped our older students accrue hundreds of high school credits towards graduation. The majority of this work is taking place in the new Multi-Purpose Facility, which allows our students to maximize the use of technology in a setting more similar to their home school, rather than a setting for court ordered placements or treatment. These students often struggle in the traditional schools and fall behind their peers in terms of graduation requirements. With an emphasis on helping these youth have a successful transition back to their neighborhood school, the educators have instituted a program that helps the youth re-enter their school at the correct grade level and credit count. Thus far 15 students have earned their high school diploma or GED this year.



- ***FOCUS (For Our Children's Ultimate Success):*** Launched in April 2016 under the leadership of Secretary Benson-Green, FOCUS will be a case management system that integrates all of the Department's divisions within one enterprise-wide solution. It will integrate the business processes and operations of the Division of Family Services, the Division of Youth Rehabilitation Services, the Division of Prevention & Behavioral Health and the Division of Management Support Services. FOCUS is in alignment with DSCYF strategic efforts for building a service delivery infrastructure that supports a system of integrated child welfare, prevention and behavioral health and juvenile justice services. The system is expected to go-live in September 2017.

- ***FIRST (Family Informed Resource Support Team):*** Under the leadership of Secretary Benson-Green, DSCYF developed FIRST, which is a facilitated family team meeting designed to maximize the chances of keeping youth with their families and in their communities, and to reduce entries into long-term, deep-end group care placements. FIRST has dedicated staff who will focus on community outreach and the development of new community based or informal services and will connect the youth and/or family to these services. The program is preparing to launch in late September 2016.





## DIVISION OF FAMILY SERVICES

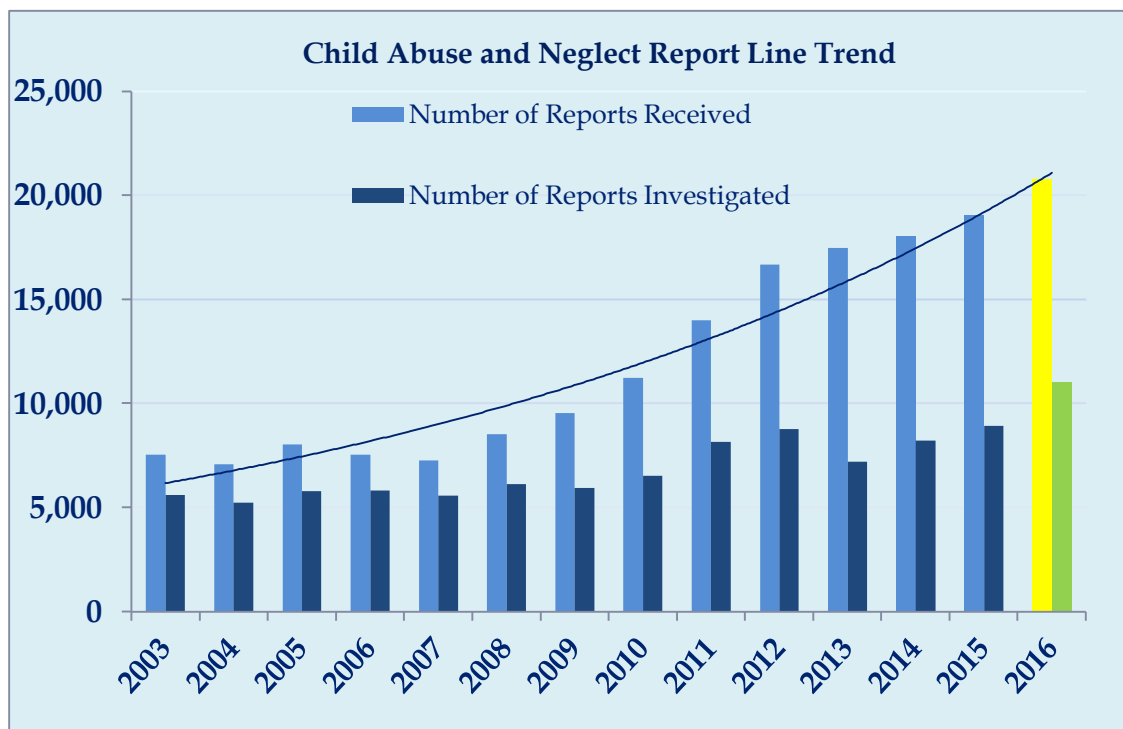
Shirley B. Roberts  
Director

Trenée R. Parker  
Deputy Director

*The Division of Family Services (DFS) investigates child abuse, neglect and dependency, offers treatment services, foster care, adoption, independent living and child care licensing services. Over 300 staff members are dedicated to protecting children and helping them gain a sense of well-being and to achieve permanency.*

### MAJOR ACCOMPLISHMENTS

- **Improving child outcomes:** Following the arrest and conviction of Dr. Earl Bradley in 2009, DFS worked in partnership with other system stakeholders to make significant changes to Delaware's child protection system. One such change was making DFS a repository of hotline calls related to all child abuse and neglect allegations, regardless of whether they were intra- or extra-familial. In addition, DFS engaged in an unprecedented partnership effort to make Delawareans, particularly professionals working with children, aware of the need to report cases of suspected abuse or neglect. Since that time, 30,021 individuals have received training via a partnership between DSCYF, DE Department of Justice, Child Protection Accountability Commission, Prevent Child Abuse Delaware and others. As a result of this increased focus and outreach, the number of calls to the DFS child abuse and neglect hotline has nearly doubled, from 9,527 in 2009 to 19,058 in 2015. DFS expects to exceed 20,000 reports by the end of 2016.





- **Outcomes Matter:** DFS has adopted and implemented numerous strategies to improve child well-being without compromising safety. These initiatives, titled “Outcomes Matter,” include the Structured Decision Making® tools, Team Decision Making (TDM), and intensive training on the Safety Organized Practice model. Additionally, DFS began a renewed focus on training and supports for current and future foster families and launched several family search and engagement strategies in order to help our children and youth remain safely with their biological relatives. Our data shows that these efforts have been extremely successful in reducing the need for foster care.



Measure	Percent Decrease since 2009
Reduction in foster care through the increased use of relative caregivers	21%
Overall reduction of entries into foster care	43%
Reduction of teen entries to foster care	44%

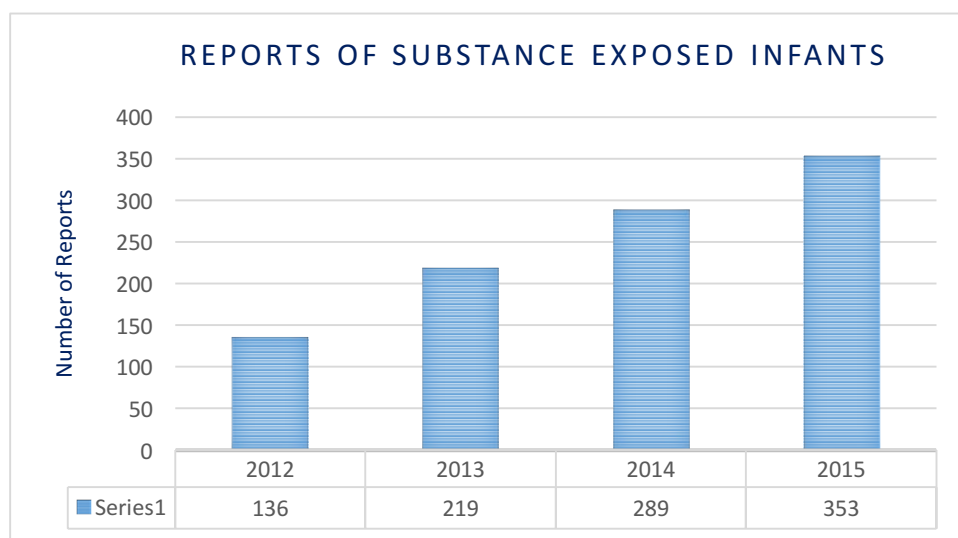


- **Ready by 21:** Youth aging out of foster care have received national attention for being at high risk of homelessness, unemployment, crime and sustained public assistance. To address these concerns, DSCYF championed the Ready by 21 Program (House Bill 163), which was signed into law in September 2013. One of the key components of HB 163 was the formalization of financial assistance for young adults ages 18 - 20 who are exiting foster care. The needs-based stipends are primarily used to help pay for basic living expenses, transportation, and employment or educational expenses. In FY15, DSCYF was able to provide stipends to 202 youth. Of these, 61% completed high school, 61% were employed, and 55% were enrolled in school or vocational training. The program requires that the eligibility of the youth be verified, completion of an agreement by the youth, and completion of a budget worksheet which outlines the youth’s monthly income versus their monthly expenses. They must also complete financial literacy training.

DSCYF has consistently ranked in the top 10 in many of the Federal NYTD (National Youth in Transition Database) Independent Living Services reporting areas:

- 4th in Housing Education and Home Management
- 5th in Employment Program/Vocational Trainings
- 7th in Budget and Financial Management
- 7th in Career Preparation

- **Cross Agency Collaboration:** While the number of teens in DFS custody has declined, the number of children in care from birth to two years of age has increased by 31% over the past year. These children represent the most vulnerable population served by DFS and many enter care after being born substance exposed. DFS has experienced a sharp increase in the number of reports received that indicate prenatal substance exposure. Compared to 2012 when DFS received 136 such reports, 353 reports were received in 2015, which represents a 160% increase in reports that indicate prenatal substance exposure. The chart below demonstrates this consistent increase in reports for prenatal substance exposure over the last four years.



Recognizing that this increase cannot be addressed solely by one department, DSCYF has recently begun conversations with the Delaware Department of Health & Social Services to ascertain how the two organizations may share resources and expertise in an effort to address the needs of this population.



- **Joseph R. “Beau” Biden III Child Protection Act:** DSCYF was a leader in the passage of this legislation which requires individuals who seek to work or volunteer for a child-serving entity to obtain state and federal background checks, as well as a Delaware Child Protection Registry check. Governor Markell signed the legislation into law in August 2015.

- **Youth Advisory Council:** The Youth Advisory Council is an organization of current and former youth from the foster care system that provide a safe environment for youth to share opinions and learn leadership skills by planning and developing activities to enhance the foster care system, independent living program and community. Monthly meetings are held in Dover and an annual teen summit is designed and presented for teens in care.



## DIVISION OF YOUTH REHABILITATIVE SERVICES

Nancy S. Dietz  
Director

John R. McDonough  
Deputy Director

*The Division of Youth Rehabilitative Services (DYRS) provides services including detention, treatment, probation and aftercare services to youth in the State of Delaware who are ordered to its care by Family Court. DYRS is responsible for assessing the individual needs of youth and collaborates with their families, schools and our community partners. Our goal is to coordinate services and resources in an effort to rehabilitate youth into becoming positive citizens within their communities.*

### MAJOR ACCOMPLISHMENTS

- ***Juvenile Civil Citation Diversion Program (JCC):***

September 2016 marks the one year anniversary of this highly successful program. Beginning as a pilot program with School Resource Officers and under the leadership of Secretary Benson-Green, JCC now permits all police officers statewide to refer youth who commit a first-time misdemeanor offense to a 90-day program in which they will receive an assessment and must participate in a variety of community service activities. The young person would not endure the traditional criminal justice system nor be subject to a criminal record. While the program was created administratively in 2015, legislation to make JCC a permanent juvenile justice option was signed into law by Governor Markell in September 2016.

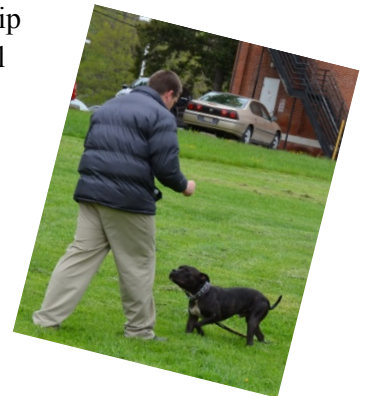


Based on the type of eligible offenses, since inception 210 youth have been referred to civil citation. 197 (94%) youth of the 210 referrals were eligible to participate. The average age of referred youth is 14.4. Of those who participated, 113 (54%) were males and 84 (40%) were females. Of the total referrals 142 (68%) identified as African American or Hispanic and 68 (32%) identified as Caucasian. Of the eligible program participants, 60 (30%) youth were referred from Sussex county, from 40 (20%) Kent and 97 (49%) from New Castle County. To date, 150 (88%) have successfully completed, while 19 (11%) have been discharged unsuccessful from the program.

- ***Reducing the number of youth in detention facilities:*** Between 2003 - 2012, DYRS focused on identifying youth who could be served in the community, rather than in detention facilities. At the same time, the Division identified community providers, strategies and initiatives to achieve better outcomes for our youth without placing them into a secure care setting. DYRS worked with key system partners to better identify which youth need to be in secure detention and which can be in the community. The result was significantly reduced detention populations, creating healthier and safer conditions, including a reduction in illegal, inappropriate and unnecessary detentions by 83%. We also significantly reduced the number of youth in out of state Level IV and V Facilities. In

2008, there was an average of 115 youth in these out of state facilities. In 2015, the number was down to 43, a reduction of 63%.

- **Youth Advocacy Program:** Many of the youth leaving our secure facilities re-enter the community facing the same circumstances that initially led them to the criminal justice system. Research indicates that many youth placed in a secure setting consider reentry the most serious challenge of their lives. DYRS competitively awarded a contract to The Youth Advocacy Program to implement an aftercare program that supports the transition and reintegration of youth returning to the community from out-of-home placement. This program, which began in July 2015, provides an intensive level of support to these youth, with 24x7 availability to assist with school re-entry, mentoring, connection to therapeutic services, and advocacy for the youth and family. Male youth leaving Ferris School and residing in the City of Wilmington currently participate in the program. To date, 14 youth have completed the program. The Quality Improvement Unit will continue to assess the program and provide relevant analysis regarding effectiveness and outcomes.
- In our continuous review of core curricula, policy, and practice to ensure that our approach is relevant to our current youth population, DYRS conducts a variety of programs in our secure care facilities.
  - The **Second Chance Canine Program** was created via a partnership between the division, Faithful Friends and Delaware's Office of Animal Welfare in an effort to teach youth in the Residential Cottages basic dog care and training skills and compassion for dogs while improving the behavior of dogs to increase their adoptability. Many of the youth in the juvenile justice system have themselves been the victim of abuse, neglect and abandonment, therefore the program offers a therapeutic way for the youth to experience unconditional love and the benefits of the human-animal bond. To date there have been over 40 youth graduates from the program.
  - The **Opportunity to Change Program** is offered at Ferris School and our residential cottages. This is a substance abuse program with a focus on relapse prevention designed to provide youth with the skills necessary to meet this goal.
  - In response to the alarming rate of gun and gang violence, DYRS and the Delaware Center for Justice partnered and received a Juvenile Accountability Block Grant which funds an evidence-based education program that incorporates skill based learning for students at the Ferris School. The program, **SWAGG (Student Warriors against Gangs and Guns)** is an 80 hour education program modeled after the Phoenix Curriculum. Youth who have been adjudicated for a gun or gang related offense participate in the skills-based program.
  - The Ferris School was recently honored as a Barbara Allen-Hagen Award finalist from **Performance-based Standards (PbS)**. The award is given to correction, detention/assessment and community programs that best exemplify PbS' commitment to providing effective and developmentally appropriate care for youths placed in residential facilities and implementing strategic plans to change practices that result in positive outcomes for youths, staff and families.







## DIVISION OF PREVENTION & BEHAVIORAL HEALTH SERVICES

Susan A. Cycyk  
Director

Julie Leusner  
Deputy Director

*The Division of Prevention & Behavioral Health Services (DPBHS) provides a statewide continuum of prevention services, early intervention services, and mental health and substance abuse (behavioral health) treatment programs for children and youth. These services have graduated levels of intensity and restrictiveness that are child-centered and family focused.*

### MAJOR ACCOMPLISHMENTS

- **Prevention Services:** The FY16 budget continued the Summer and Afterschool programming with an added literacy component. The programs are designed to increase resiliency, build life skills, and reduce violence, suicide and substance use. In FY15, statewide, we reached 2,623 unduplicated children and youth through the Summer and Afterschool programs, most of whom participated multiple times in accessible programs in their local communities. Program locations increased from 21 to 26 statewide in FY16 to support the added focus on literacy.



- Current programming include:
  - Duffy's H.O.P.E. which offers the Ambassador program with a focus on gang violence prevention using the Phoenix Curriculum, and The Peter Spencer Family Life Foundation which provides the Freedom School to youth K-12 in New Castle County. DEMCO in Kent County, offers the Harcourt Trophies Reading program and Children and Families First in Seaford provides an afterschool boys council and girls circle.
  - During FY'15, DPBHS created the #URmyReason substance use prevention campaign. This statewide campaign was aimed at high school juniors and seniors, and their families and friends during the spring prom season, when 1/3 of all alcohol-related traffic fatalities involving teens occur. Twenty-five high schools, and 15,000 students, were involved using a variety of social media platforms.
  - In early 2016, DPBHS established the *Crisis Text Line*, a new tool to help youth and young adults through instances of emotional distress such as depression, bullying, substance abuse, family issues, suicidal thoughts, and health concerns. Crisis Text Line offers 24/7 access to crisis counselors through a familiar format that is especially appealing to youth and young adults: text messages. To access this service, youth can text DE to the number 741741 and a crisis counselor will respond immediately to provide assistance.

- **Early Intervention Services:** DPBHS advocated for and was awarded the resources necessary to create, and then expand, the Behavioral Health Consultant (BHC) Program which currently provides 30 BHCs serving 32 of Delaware's middle schools. The BHCs have been instrumental in referring youth and families with private insurance and Medicaid to community based providers for mental health and substance use disorder issues. Referrals into outpatient services when these issues are first identified often prevent the future need for deeper end state services.



The role of the BHC starts with a referral for their services. In 2015, 8,689 referrals were made to the BHCs. From these, 7,629 consultations were conducted on youth from across the three counties. Consultations refers to the process of gathering information and using their unique mental health skill set to determine what, if any, clinical services or prevention resources are needed. The BHC's conducted 3,361 consultations in New Castle County, 2,510 in Kent County and 1,458 in Sussex County. For these students, the outcome of the consultation resulted in either a brief intercession on the part of the BHC, or a referral for prevention, community or school related services.

The BHCs have been received with great enthusiasm by the schools. For this purpose we utilize a satisfaction survey which shows high satisfaction based on feedback from 45 principals and administrators. 91.2% indicate they were satisfied and 93.5% of the surveys received indicated that the BHC is integrated as part of a team that makes decisions about student needs.



- **After school and summer programming:** In addition to school based prevention programs, DPBHS also greatly increased prevention opportunities available to youth in our state since 2009, with over \$2 million set aside for after school and summer programming. Currently, these funds are used to fund 17 separate programs throughout the state. DPBHS reports that 2,623 unduplicated youth attended an after school or summer program made available to them as a result of this funding (599 in Wilmington, 372 in NCC other than Wilmington, 687 in Kent and 965 in Sussex). Since the number is unduplicated, a youth could have attended a summer program every day it was open and still only count once in this data. These programs

are offering unique and beneficial opportunities for youth in underserved communities such as a program that focus on the arts at the Christiana Cultural Arts and the Inner City Cultural League. Likewise, we have programs that provide athletic opportunities in the Police Athletic League and the T.I.T.A.N. Boys and Girls Clubs. Literacy programs are being conducted at the Peter Spencer Freedom Schools and the Latin American Community Center. Regardless of the type of programs being offered, all our providers are required to have a curriculum to support their ongoing work with children and all of the employees are required to be trained in Suicide Prevention by the Mental Health Association. In recent years, DPBHS has also started mandating staff to take online training to provide support to youth who are LGBTQ and every program is

required to use the IM 40 Developmental Assets to conduct pre and post assessments for comparison.

- Early Childhood Mental Health Consultants:** DPBH has also targeted efforts in the area of early childhood mental health. One of the ways we did this was through the creation of the Early Childhood Mental Health Consultants (ECMHC). The ECMHC program grew from our positive experiences reaching families with young children through our federal SAMHSA System of Care grant called the Delaware's BEST, and our interest in doing more for this population. We were concerned about the high percentage of expulsions of young children from pre-school. The intent is to intervene early to prevent children from expulsion by helping them, their families, and their caretakers in preschool to better address and resolve behavioral issues. In addition, we provide training and consultation to pre-schools for all-staff and all-classroom behavioral management improvement. 96% of the children with whom we work remain in school. In 2008, Delaware was ranked 4th highest for suspensions from pre-school (2008 Walter Gilliam Study/Yale Child Study Center). While this study has not yet been replicated for comparison, we do know we have a success rate of 98% over the course of 5 years. Over five years (April 2010 – March 2015), the ECMHC program provided services in over 1,100 cases across all three counties of Delaware.



ECMHC Services	County			Total
	Kent	New Castle	Sussex	
Child Specific Services	156	596	153	905
Classroom Wide Services	39	78	42	159
Teacher-Child Interaction Training (TCIT)	13	32	7	52
Total	208	706	202	1116

- Residential Treatment Centers:** DPBHS operates two residential treatment centers: Terry Center for children aged 12 or younger and Silver Lake for adolescents. Both programs embrace the philosophy that treatment is time-limited, home is the best place to be, and practice the art of family engagement. Over 80% of the children and youth in our residential programs regularly go home on weekends or during the week to be with their families. Because working with the family in their home environment increases the probability of treatment success in reuniting the family and sustaining behavioral improvements, over 30% of family counseling sessions, in both programs, occur within the home. This is a marked increase from only a few years ago when counseling sessions in the home would have been rare.



## RECENT LEGISLATION SIGNED BY THE GOVERNOR

	Introduced	Bill	Title
1.	2015	HB 46	AN ACT TO AMEND TITLE 13 OF THE DELAWARE CODE RELATING TO DSCYF CUSTODY
2.	2015	SB 56 w/SA 1 + HA 1	AN ACT TO AMEND TITLE 16 RELATING TO ABUSE OF CHILDREN
3.	2015	HB 118	AN ACT TO AMEND TITLE 16 OF THE DELAWARE CODE RELATING TO REPORTS OF ABUSE OR NEGLECT
4.	2015	HB 116	AN ACT TO AMEND TITLE 29 OF THE DELAWARE CODE RELATING TO THE DEPARTMENT OF SERVICES FOR CHILDREN, YOUTH AND THEIR FAMILIES
5.	2015	HB 126 w/HA 1, HA 1 to HA 1	AN ACT TO AMEND TITLE 10 OF THE DELAWARE CODE RELATING TO DELINQUENCY PROCEEDINGS IN THE FAMILY COURT
6.	2015	HB 132	AN ACT TO AMEND TITLE 10 OF THE DELAWARE CODE RELATING TO ELIGIBILITY FOR PROTECTION FROM ABUSE ORDERS
7.	2015	HB 136 w/HA 1	AN ACT TO AMEND THE DELAWARE CODE RELATING TO REVIEW OF THE DEATH OR NEAR DEATH OF A CHILD
8.	2015	SB 110	AN ACT TO AMEND TITLE 31 OF THE DELAWARE CODE RELATING TO CHILD CARE LICENSING AND PENALTIES
9.	2015	SB 144 w/SA 2, SA 3	AN ACT TO AMEND TITLES 11, 16 AND 31 OF THE DELAWARE CODE RELATING TO BACKGROUND CHECKS FOR CHILD-SERVING ENTITIES
10.	2016	HB 211 w/HA 1	AN ACT TO AMEND TITLE 10 OF THE DELAWARE CODE RELATING TO JUVENILE DELINQUENCY PROCEEDINGS AND THE USE OF RESTRAINTS ON A CHILD



11.	2016	HB 248 w/HA 1	AN ACT TO AMEND TITLES 16 AND 29 OF THE DELAWARE CODE RELATING TO THE CHILD PROTECTION SYSTEM
12.	2016	SB 178 w/SA 2	AN ACT TO AMEND TITLE 31 OF THE DELAWARE CODE RELATING TO BACKGROUND CHECKS FOR CHILD-SERVING ENTITIES
13.	2016	SB 213 w/SA 1	AN ACT TO AMEND TITLE 14 OF THE DELAWARE CODE RELATING TO PERSONAL BODY SAFETY AND CHILD SEXUAL ABUSE AWARENESS AND PREVENTION
14.	2016	SB 216	AN ACT TO AMEND TITLE 10 OF THE DELAWARE CODE PERTAINING TO EXTENDED JURISDICTION
15.	2016	SB 241 w/SA 1	AN ACT TO AMEND TITLE 31 OF THE DELAWARE CODE RELATING TO THE CHILD PLACEMENT REVIEW ACT
16.	2016	SB 188 w/SA 1 + HA 1	AN ACT TO AMEND TITLES 13, 29, AND 31 OF THE DELAWARE CODE RELATING TO THE OFFICE OF THE CHILD ADVOCATE
17.	2016	HB 405 w/HA 1	AN ACT TO AMEND TITLE 10 OF THE DELAWARE CODE RELATING TO THE ESTABLISHMENT OF A JUVENILE OFFENDER CIVIL CITATION PROGRAM

18.	2016	SB 245 w/SA 1	AN ACT TO AMEND TITLE 16 OF THE DELAWARE CODE RELATING TO THE ESTABLISHMENT OF A BEHAVIORAL AND MENTAL HEALTH COMMISSION
19.	2016	SB 281 w/ SA 1	AN ACT TO AMEND TITLE 16 OF THE DELAWARE CODE RELATING TO MENTAL HEALTH
20.	2016	SB 220 w/ SA 1	AN ACT TO AMEND TITLE 13, CHAPTER 21 OF THE DELAWARE CODE RELATING TO THE DOMESTIC VIOLENCE COORDINATING COUNCIL
21.	2016	SB 93 w/ SA 1 and HA 1	AN ACT TO AMEND TITLE 16 OF THE DELAWARE CODE RELATED TO CREATING AN INTERAGENCY COMMITTEE ON AUTISM AND THE DELAWARE NETWORK FOR EXCELLENCE IN AUTISM
22.	2016	SB 198 w/ SA 1 and HA 3 and HA 4	AN ACT TO AMEND TITLE 10 OF THE DELAWARE CODE RELATING TO JUVENILE EXPUNGEMENTS
23.	2016	HB 292	AN ACT TO AMEND TITLE 14 OF THE DELAWARE CODE RELATING TO POSTING INFORMATION RELATED TO CHILD ABUSE AND NEGLECT IN SCHOOLS
24.	2016	SB 207 w/ HA 1	AN ACT TO AMEND TITLE 14 OF THE DELAWARE CODE RELATING TO BULLYING AND CRIMES IN SCHOOLS
25.	2016	HB 239 w/ HA 1	AN ACT TO AMEND TITLE 16 OF THE DELAWARE CODE RELATING TO THE DISTRIBUTION OR DELIVERY OF A CONTROLLED SUBSTANCE CAUSING DEATH