Child Protective Services and Differential Response: Overview of the Quality Improvement Center for Differential Response (QIC-DR)

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Historical Context

- CPS was established to respond to reports of suspected child maltreatment (Dr. Henry Kempe)
- System design similar to law enforcement
- Numbers have swelled over time, practice has changed
Figure 1: Simplified Flow of Child Welfare Decisions and Processes

Maltreatment Incidence?

Referral to CPS > CPS Screening > Accept Referral

- 99 per 1000
- 48%
  
- Path
  
- Investigation
  - 91%
    
- Assessment
  - 9%
    
- Close Case
  - 20%
    
- Substantiate Maltreatment & Perpetrator
  
- Place out of Home
  - 18%
    
- Family Foster Care
  
- Kinship Care
  
- Residential Care
    
- Provide Ongoing Services
  
- In-Home Services
  - 15%
    
- Close Case
  
- Placement
    
- Adoption
  
- Youth Transition
  
- Reunification
  
- Guardianship
    
- Post Placement Services
      
- Close Case
  
- Post Placement Services
      
- Close Case
      
- Close Case

Legend:
- Yellow = Child Welfare Decision Points
- Purple = Child Welfare Decision Processes
- Orange = Close Case
Purposes of Differential Response in Child Protective Services

- Systems either screen out or do not open for services in more than half of their reports
- Traditional investigatory practice can be adversarial and may inhibit parents and/or caregivers from seeking needed help
- DR is conceived of as a way to serve more screened in reports at an earlier stage by engaging families in a non-adversarial process by conducting assessments and linking them to needed services
Core Elements

- DR cases are screened in
- Response assignment based on several factors
- Assignment can be changed
- Family choice: participate in assessment and services (with caveat)
- DR is in statute or policy
- Assessment cases not entered in central registry
- No substantiation of assessment cases
- Includes engaging the family (not identified as a core element in 2006)
Two Pathway Child Protection Systems

Courtesy of Institute of Applied Research

All reports accepted as potential child maltreatment

Track Assignment

Families NOT Appropriate for DR Traditional Investigations

- Unsubstantiated investigation
  - Exit System

Families Appropriate for DR Family Assessments

- Accepts voluntary services
  - Agency or community services / formal or informal cases
  - Exit System

- Declines voluntary services or no services needed
  - Formal cases / child removals
  - Track change
  - Exit System
Pathway Assignment Decisions

- Statutory limitations
- Source of report
- Child vulnerability
- Severity of allegation
- History of past reports
- Perceived ability to achieve safety
- Willingness and capacity of parents to participate in services
Two Track System Example

<table>
<thead>
<tr>
<th>Investigation</th>
<th>Family Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suspicious child death or homicide</td>
<td>Lack of supervision</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>Medical neglect</td>
</tr>
<tr>
<td>Severe physical harm</td>
<td>Poor living conditions</td>
</tr>
<tr>
<td>Reports involving childcare providers, teachers, etc.</td>
<td>Educational neglect</td>
</tr>
<tr>
<td></td>
<td>Drugs and alcohol</td>
</tr>
</tbody>
</table>
The circumstances and needs of families differ and so should the response

Investigators can focus on cases with serious safety concerns, often requiring court intervention

Absent an investigation:
- child safety will not be jeopardized
- services can be in place more quickly
- families will be more motivated to use services
Child Abuse Prevention and Treatment Act (CAPTA) on Differential Response

- 2010 Reauthorization
- *Differential response requisites in the eligibility requirements for, and the eligible use of, funds for Title I: Basic State Grants for child abuse or neglect prevention and treatment programs.*
- **Information Clearinghouse (Sec. 103)** Requires HHS to maintain and disseminate information on: *best practices in differential response*
- **Research (Sec. 104 (a))** Supports research on the impact of child abuse and neglect on the progression of disabilities; effective practices in differential response
- **Training and Innovation (Sec. 105)** Includes training for personnel in childhood development, and for personnel in best practices in differential response.
Where Do States Fit Into the Picture?
What have we learned about differential response so far?
Overall Findings from MN, OH & MO

- Child safety **not** diminished
- Family engagement under DR
- CPS staff reacted positively
- Services to families and children increased and changed
- New CA/N reports and later placements of children reduced
- Short-term costs greater, long-term costs reduced
More Evaluations on the Way

- Ohio - Follow up study on families from their initial pilot project
- Title IV-B Waiver Projects - numerous states implementing DR with those monies and evaluations are required
- Doctoral dissertation level research
- QIC-DR - release in September 2013
Purpose of QIC-DR Project

- Improve child welfare outcomes by implementing DR, and build cutting edge, innovative, and replicable knowledge about DR

- Enhance capacity at local level to improve outcomes for children and families identified for suspected abuse or neglect

- Provide guidance on best practices in differential response
Evaluation Methodology for QIC-DR

- Randomized trial (RT)

- Components of the evaluation
  - Outcomes
  - Implementation/process
  - Cost

- Multi-site approach
  - Basic DR Model Consistent Across Sites
  - Decision Made After a Referral is Assigned for a Response
  - Three coordinated, high quality evaluations
    - Colorado- 5 county consortium, extensive practice reforms
    - Illinois- statewide, privatized model
    - Ohio- 6 county consortium
  - Sharing common measures, instruments
  - Data not combined
Family Engagement & Satisfaction: An Active Ingredient?

- Literature
  - “the process whereby the social worker creates an environment of warmth, empathy, and genuineness that enables a client to enter into the helping relationship and actively working toward change” (Altman, 2008)
  - Construct of Engagement (Yatchmenoff, 2005):
    - Receptivity:
    - Expectancy: the perception of benefit
    - Investment: commitment to the helping process
    - Working relationship:
    - Mistrust:

- Definition in the QIC-DR
  - Client satisfaction with worker and services
  - Orientation of the worker/supervisor
Services:
Background

• **Literature**
  - Literature is sparse
  - Working with families to identify needs
  - Variations in service availability
  - Direct facilitation of services
  - Indications of increased service uptake from evaluations in Minnesota (*Loman & Siegel, 2004b*) and Ohio (*Loman, Filonow & Siegel, 2010*)

• **Definition in the QIC-DR**
  - Service utilization rates
Safety:  
Background

- Literature
  - So far there is no indication of a reduced level of safety for children in the AR component in Minnesota (*Loman & Siegel, 2004*), Missouri (*Loman & Siegel, 2004*) and Ohio (*Loman, Filonow & Siegel, 2010*)

- Definition in the QIC-DR
  - Rereports
  - Placements
The Kempe Center & Differential Response

- Coordinating Annual Conference
- Training Development and Delivery
- Provide Technical Assistance and Consultation
- Disseminate Information
  - Sign up for our Email Alerts
- Lead for National Quality Improvement Center on Differential Response
Resources

- The Kempe Center
  - www.thekempecenter.org

- Quality Improvement Center on Differential Response
  - www.DifferentialResponseQIC.org

- Institute of Applied Research
  - www.iartstl.org


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