

Task Force on Child Protection
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A Differential Response Approach to Child Protection
Testimony of
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Good afternoon Chairman Heckler and members of the Task Force on Child Protection. I am Joan Benso, President and CEO of Pennsylvania Partnerships for Children (PPC), a statewide independent, non-partisan child advocacy organization committed to improving the health, education and well-being of children in the commonwealth. For 20 years, PPC has effectively advocated for public policies to make Pennsylvania a better place to be a child and to raise a child. Thank you for the opportunity to speak to you on the critically important issue of child protection in Pennsylvania.

This task force is to be commended for its thoughtful and deliberative approach to the challenges before you. Child protection is an emotionally charged issue that can evoke a visceral response, which is all the more reason your decision-making should be based on data and evidence to the greatest extent possible. The child welfare system is complex and attempting to review and improve public policies that are so intertwined is a tremendous challenge. I also want to acknowledge our strategic partnership with Casey Family Programs (CFP), which provides PPC with tremendous support and expertise to guide our child welfare public policy efforts. We were pleased that Dr. David Sanders, Vice President of CFP, had the opportunity to share his organization's national perspective with the task force in March.

PPC's public policy agenda is driven by evidence, data and research. As some of you are no doubt aware, analyzing child welfare data in Pennsylvania can be challenging because we lack a comprehensive Statewide Automated Child Welfare Information System (SACWIS) or a similar statewide data collection system. We may be the only state in the country that cannot provide a full data picture of our child welfare system. When we began to work on child welfare policy five years ago, the first thing we did was try to get our hands around the data. You have a copy of our annual State of Child Welfare report, but a shortcoming of this report is that lacks a full complement of General Protective Services (GPS) data.

Even though Pennsylvania lacks a full statewide data collection system, there are other means to collect better data for use in guiding the task force's work. PPC took on this task and worked aggressively over the last few months to help build a fuller data profile – one that includes CPS and GPS data. We partnered with the Department of Public Welfare, its data contractors, the Children and Youth Administrators of the County Commissioners Association of Pennsylvania, and a number of individual counties. Today, we would like to share information collected directly from Allegheny, Lehigh, Lycoming, Schuylkill and Venango counties that was extrapolated into a statewide profile. The child populations of these counties represent a large enough sample (14 percent of Pennsylvania children ages 0-17) to meaningfully extrapolate to a statewide profile. We then compared this statewide data to other states in key indicators such as substantiation and types of maltreatment. Please realize this data has some very serious limitations. We reviewed the definitions of abuse and neglect for other states and found Pennsylvania is an outlier in providing services to children with

behavior problems and those who are truant. We blended data from Pennsylvania's 2010 submission to the National Child Abuse and Neglect Data System (NCANDS) with data for children accepted for services in 2010 in both CPS unfounded cases and GPS cases. We used this data to create a surrogate for rate of reports, substantiation and victims of maltreatment per 1,000 children ages 0-17 for 2010. We have some concerns that our estimates are high and include duplicate children, yet we believe they are informative and worthy of consideration.

What does the data tell us?

We know that PA's child abuse definition has a high threshold, but our GPS definition allows children and families to receive services sooner than they can in many other states.

- The national rate of child abuse reports is 40 per 1,000 children ages 0-17. Our blended Pennsylvania CPS/GPS indicates that we have 59.8 reports per 1,000 children ages 0-17.
- The rate of national substantiations is 9.2 cases per 1,000 children ages 0-17. A blended CPS/GPS substantiation/accepted for services rate is 16.8 cases per 1,000 children ages 0-17.
- The national rate of sexual abuse maltreatment is 0.8 per 1,000 children ages 0-17. Pennsylvania's rate of sexual abuse is the same as the national rate when only considering CPS substantiated cases. If you add in children accepted for services (for sexual allegations) in CPS unfounded cases, the rate jumps to 0.9 per 1,000 children ages 0-17.
- The national physical abuse maltreatment rate is 1.6 per 1,000 children ages 0-17. Pennsylvania falls behind the nation with our "severe pain" threshold, with 0.4 cases per 1,000 children when only considering CPS substantiated cases. If you add in our accepted for services (for physical allegations) in CPS unfounded and GPS, the rate jumps to 0.7 per 1,000 children ages 0-17. This is still below the national average and may indicate that we should consider revising our child abuse definition. However, we need to carefully examine if other states are including children in their physical abuse rate that Pennsylvania includes in neglect.
- The national neglect maltreatment rate is 7.2 per 1,000 children ages 0-17. If you add our accepted for services (for neglect allegations) in CPS unfounded and GPS, the rate jumps to 15.2 per 1,000 children ages 0-17, much higher than the national rate. We do think this could be a high estimate due to the inclusion of children accepted for services for behavior problems and truancy.
- Pennsylvania provides services to families through both CPS and GPS. This data is only available on a quarterly basis. We serve 4.5 times more children in GPS than CPS as evidenced by the data from the second quarter of 2010, where we served 9,311 children in CPS and 42,358 children in GPS.

Again, this data has some weaknesses but provides another vantage point to consider how well our system operates. It is important for you to consider if we should change the definition of child abuse and eliminate the "pain" threshold. We would caution against making changes that inadvertently cut services to children who are at risk of more serious abuse that are now served in unfounded CPS cases and GPS.

We strongly urge the task force to recommend that Pennsylvania implement a SACWIS or some other integrated statewide data collection system that can guide program implementation and provide accountability.

In addition to the data work we have undertaken, we also have been studying how other states are using a progressive approach to responding to reports of child abuse and neglect – an approach known as “differential response” or “alternative response.” DPW Deputy Secretary Beverly Mackereth mentioned our work on this area at a recent meeting and urged us to coordinate efforts with the Joint State Government Commission. We have done so. Pennsylvania was among the first to implement differential response through CPS and GPS. This is now the approach used by about 20 states. Given the body of research and evaluation findings that now exists on differential response systems, it is clearly an opportune time to examine how well Pennsylvania’s differential response system is working and where we could make improvements.

What is differential response?

Simply put, it is a multiple door or pathway approach to responding to reports of child abuse and neglect. One door is generally used for reports which require “*investigation*” due to the severity of the alleged child maltreatment or those that are potentially criminal, such as Pennsylvania’s CPS reports. These investigations involve the gathering of forensic evidence with the goal of making a formal determination of whether child abuse occurred and who perpetrated the abuse. The other door is typically used in low- and moderate-risk cases. These cases receive an “*assessment*” with the goal of determining the needs of families and how to effectively offer services that support better parenting and promote child safety, such as Pennsylvania’s GPS. There is generally no determination of child victims or perpetrators when families are involved in the *assessment* model.

Some states have three or even four doors. These are typically used for instances of child maltreatment when the investigation is the sole responsibility of law enforcement or when the agency determines a family does not need child protective services and refers the family to a community organization for services.

Please take note of the handout attached to my testimony titled *Comparison of Investigation and Assessment Pathways in States with Differential Response*, prepared by the Administration for Children and Families, U.S. Department of Health and Human Services. As you can see, the objectives and approaches to working with families are very different in an investigation versus an assessment. In an investigation, the primary objective is to determine if abuse occurred and by whom. An assessment isn’t concerned with making a formal status determination or disposition of whether abuse occurred. Instead, an assessment is oriented toward working with families to address underlying issues that are compromising child safety. Services are most often court ordered in investigation and voluntary in assessment.

Why more than one door?

There’s a common-sense reason for these multiple doors or pathways: Different family situations necessitate different interventions. The child welfare system needs multiple approaches to work with families and a traditional CPS investigation is not always the best choice.

Research and evaluation findings demonstrate differential response approaches do not compromise child safety and actually improve family engagement in services, increase community involvement in supporting families and enhance caseworker satisfaction. An assessment, where the emphasis is on family strengths and the need for services, is a very different approach to working with families than a traditional child protection investigation, which tends to be more adversarial and fault oriented.

Another handout that accompanies my testimony - titled *Differential Response: Summary of Research Findings* - highlights evidence supporting the use of differential response. By the end of 2011, more than 20 states had evaluated differential response to gauge its potential as a flexible service approach for families screened-in to child protection services. Many of these states compared families receiving assessments against families receiving investigations. Randomized control trials were conducted in Minnesota, Ohio, and Onondaga County, New York. These trials employed rigorous research methodology to randomly assign families, who all were eligible for an assessment, to either an assessment or traditional CPS investigation track. The evidence supporting differential response is compelling.

States with differential response have found the approach:

- Does not compromise child safety and, in some instances, reduces repeat maltreatment.
- Leads to more families receiving a greater number of services.
- More frequently links families to community supports.
- Increases the proportion of investigations that result in substantiation of child abuse.
- Is more likely to employ assessment when there are fewer safety concerns and less likely to rely on assessment for alleged sexual abuse.
- Is more likely to rely on assessment for older children and reports made by non-mandated reporters and more likely to rely on investigation for younger children and reports made by mandated reporters.

Does Pennsylvania really have differential response?

Yes. The National Quality Improvement Center on Differential Response in Child Protective Services operated by the American Humane Association and funded by the U.S. Department of Health and Human Service notes that Pennsylvania has a differential response system.

If you look at the implementation map on differential response included in your packet, you'll see that Pennsylvania has statewide implementation. When you compare the core components of a differential response system to Pennsylvania's CPS/GPS approach, you see that Pennsylvania's system aligns with the core components. We have provided each of you with a crosswalk of the core components and Pennsylvania's approach through CPS and GPS. A few highlights of how Pennsylvania conforms to these standards include: our two-door CPS and GPS approach, no formal determination of maltreatment or perpetrators identified in GPS, families can receive services voluntarily, etc. However, Pennsylvania is a state-supervised and county-administered child welfare system and there is variation in how differential response is implemented across our counties. There is also room to improve our differential response system.

States vary in their approach to differential response. Some key differences among states include:

- The number of doors or pathways used in the system.

- When assessment versus investigation is used.
- Who responds to the initial report (e.g. public or private employed staff).
- The degree of ongoing services and agency involvement.

Two major differences between Pennsylvania’s differential response system and other states are how Pennsylvania determines which door a family enters and the services they receive once they enter. First and foremost, all states are driven by their definitions. Pennsylvania is unique in that we have a narrow definition of child abuse that always triggers the investigation door (CPS) and a second definition for other situations that “pose harm” to children that triggers the assessment door (GPS). In addition, reports that meet neither set of legal criteria are screened-out and may be referred by the county agency to community resources.

In most other states, families enter under one definition and the decision to investigate or assess is based on immediate child safety threats and the level of risk of future harm. Families are siphoned off to different pathways or doors based on the level of immediate safety, risk of future harm and other criteria, such as age of the child and repeat reports.

Pennsylvania also differs in how we provide services. We require counties to make the same array of services available to a family regardless of whether the family is accepted for services under CPS or GPS. Services can be either voluntary or court-ordered under both CPS and GPS, although services are not often court-ordered for GPS. Some other states preclude court-ordered services under the assessment model. The duration of services can be similar in both CPS and GPS. In contrast, some other states that employ differential response only provide services following an assessment on a voluntary and short-term basis (e.g. 30-90 days). Sometimes these services are not provided or funded by the public agency. Some states struggle to fully implement their differential response systems due to a lack of resources to provide services to families who undergo an assessment. In Pennsylvania, families can receive a full array of services that meet their needs, regardless of which door they enter.

We also have provided you with a crosswalk of Pennsylvania’s Title 55 Chapter 3490 regulations that illustrates similar requirements of CPS and GPS side-by-side for your easy comparison. The investigation and assessment approach we use in CPS and GPS is comparable with implementation of differential response in other states.

Should we continue our differential response approach and can we improve it?

Yes, our differential response approach should stay in place and we can improve it. Some suggest that county caseworkers in Pennsylvania fail to engage families differently when conducting an investigation versus an assessment. To achieve the sort of success other states are experiencing, it is important that Pennsylvania’s two doors function differently, which requires a workforce skilled in its ability to engage families. PPC recommends that the task force delve deeper into the lessons learned by other states that are implementing differential response. What is the combination of policy, practice, workforce development, evaluation and funding required to implement a more robust differential response approach that yields better outcomes for children and families than traditional CPS approaches?

We would offer continued support to the task force in exploring these questions. PPC has engaged a number of county-administered states, including Minnesota, New York, Ohio and Virginia that are able to demonstrate how differential response is making a positive difference in their systems. Some examples of what we have learned from these key states include:

- Approximately 70 percent of families are screened in for an assessment versus an investigation in Minnesota.
- Minnesota and Ohio use similar criteria to screen reports for assessment or investigation. There are certain reports involving “child endangerment” that they have determined only receive an investigation, such as sexual abuse, abandonment or failure to thrive.
- All the states we spoke with noted that implementing differential response required a significant change in local practice. Workforce development has taken considerable time and effort. In some states, the investigation and assessment workers are different staff people.

We would be happy to come back to a future task force meeting, along with some of the national and state leaders on differential response, to discuss in better detail how successful approaches are designed and what changes may be warranted in Pennsylvania.

In closing, I want to emphasize that our two-door approach to responding to reports of child abuse and neglect was an innovative approach when it was first implemented in our state and it is something we should refine rather than abandon. Other states continue to move in this direction. Just last month, the Secretary of the Department of Human Resources in Maryland testified on the need to pass legislation that would implement differential response so it isn’t “lagging behind the pack” of other states moving to this model. More and more states are implementing this approach because they recognize it is a better method of working with families to ensure children are safe. But that doesn’t mean practice and policy improvements cannot be made to fine tune and improve our system.

I encourage the task force to continue its deliberative approach to studying these important issues.

We would urge the task force to make recommendations as we suggested today:

- Create a SACWIS or other statewide data collection system.
- Enhance our differential response system. (We are not done doing our homework on this topic, but might suggest Pennsylvania have one entry point that screens cases into the investigation, assessment and community referral pathways. We will provide more recommendations to the task force on this topic at a later date.)

In addition, we encourage you to:

- Strengthen chain of command reporting by requiring supervisors to notify staff that the child abuse report has been made.
- Eliminate our separate definition of student abuse.
- Improve the collaboration with law enforcement and multi-disciplinary teams.
- Change our child abuse definition related to “severe pain,” with a careful balance that we don’t lose the ability to serve the many children and families in our GPS system.

- Review our approach to serving children with behavior problems and those who are truant and determine if our child protection system is the best way to meet these needs.

PPC looks forward to being a resource in sharing further information with the task force as we develop and communicate recommendations to policymakers on how Pennsylvania can improve its child protection efforts. Thank you.