

THE STRUCTURED DECISION MAKING® SYSTEM IN CHILD WELFARE SERVICES

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Want to know more about how individual counties are using the SDM assessments? Please see County-Level Data: A Structured Decision Making® System Supplement to California's Child Welfare Services.

FOR THIS REPORT

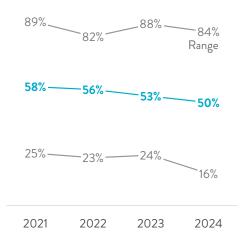
When interpreting the trends, consider that in 2020 and 2021, the COVID-19 pandemic affected every aspect of our lives and social systems, including child welfare.

Percentages have been rounded to zero or one decimal point; therefore, there may be small differences shown in the text when percentages are summed. indicates that the size of the group is less than 25, so the results are not shown.

Data were extracted from California's Child Welfare Services/Case Management System (CWS/CMS) and WebSDM.

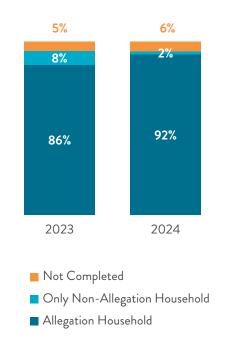
HIGHLIGHTS

THE DATA: FINAL IN-PERSON RESPONSE RATE (Page 6)



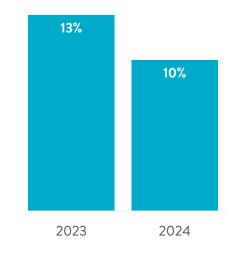
The overall in-person response rate from the Structured Decision Making® (SDM) hotline tools for the state decreased over the past four years. Additionally, in-person response rates varied across counties and by the race/ethnicity of the families involved in the referrals. The California Department of Social Services (CDSS) may wish to explore this variance. What contributes to the varied in-person response rates across counties using the same hotline tools? What might the decreasing in-person response rate mean for hotline resources across the state?





The completion rate of the SDM® safety assessment on allegation households increased 6 percentage points from 2023 to 2024. The percentage of investigations for which a safety assessment was completed only for a non-allegation household fell 6 percentage points. In 2024, an alert was added to WebSDM to remind workers to complete a safety assessment on the allegation household. Is the higher completion rate of the safety assessment for allegation households related to the alert? What else might have contributed to this increase, and how can CDSS support counties to further improve safety assessment completion on allegation households?

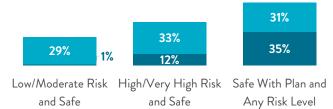




The rate at which investigations involving families initially assessed as safe with plan resulted in child placement decreased 3 percentage points from 2023 to 2024. The decrease suggests stronger adherence to the recommendation that children from families assessed as safe with plan remain in their homes with an in-home safety plan. What might account for this change, and how might it relate to changes to the SDM safety assessment in 2024 (e.g., addition of safety threats) and efforts to strengthen in-home safety planning?

THE DATA: POST-INVESTIGATION SERVICE RATES BY RISK LEVEL AND SAFETY DECISION (Page 18)

- Refer to Services as Primary Intervention
- Open for CWS Case



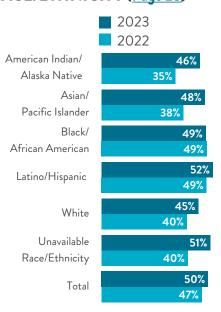
Post-investigation service actions documented on the risk assessment did not always align with SDM

recommendations. Investigations involving families assessed as high or very high risk and/or who have outstanding safety threats at the end of the investigation should be prioritized for new Child Welfare Services (CWS) case opening, though referring to services as a primary intervention should be considered for families assessed as high or very high risk and safe. Less than half (46%) of investigations involving families assessed as high or very high risk and safe and two thirds (66%) of investigations involving families assessed as safe with plan and any risk level had post-investigation services documented. On the other hand, 30% of investigations involving families assessed as safe and low or moderate risk had post-investigation services documented. What might account for the divergence between recommendations and actions taken? What are the potential impacts on children, families, and agency resources when recommendations are not followed? How can CDSS promote a strong understanding of the service recommendations and support counties in adhering to them?

(II)

THE DATA: REUNIFICATION ASSESSMENT COMPLETION WITHIN NINE MONTHS BY CHILD RACE/ETHNICITY (Page 25)

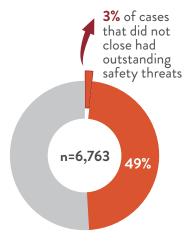
Compared with the rates observed for children who entered placement in 2022, the completion rates of the reunification assessment within nine months for children who entered placement in 2023 increased across most race/ethnicity groups. What might account for these increases? How can strengthened completion rates support consistent service delivery and permanency outcomes for all children in out-of-home care? Despite the increases, there is still much room to improve the overall completion rate, which was 50% for children who entered placement in 2023. How can CDSS encourage and support consistent use of the reunification assessment?



(lı)

THE DATA: LOW/MODERATE-RISK CASES NOT CLOSED WITHIN 90 DAYS AND PRESENCE OF SAFETY THREATS (<u>Page 32</u>)

Of the cases involving children from families assessed as low or moderate risk on their initial risk reassessment, almost half (49%) did not close within 90 days of the risk reassessment. Of those cases, only 3% had a completed safety assessment documenting outstanding safety threats (i.e., safe with plan or unsafe). Why did cases involving children from families assessed as low or moderate risk remain open longer than 90 days after the initial risk reassessment? What are the impacts on children, families, and agency resources when low- or moderate-risk cases with no safety threats present remain open?



EXAMINING THE SDM SYSTEM BY SUBPOPULATION



Analyses in this report compare SDM assessment use, the resulting recommendations, and actions taken by workers across key subpopulations. The findings can serve as a starting point to illuminate why similarities or differences exist.

The race/ethnicity distribution for families involved in referrals and investigations provides important context for interpreting the SDM assessment findings. The family race/ethnicity categorization method is available in Appendix A.



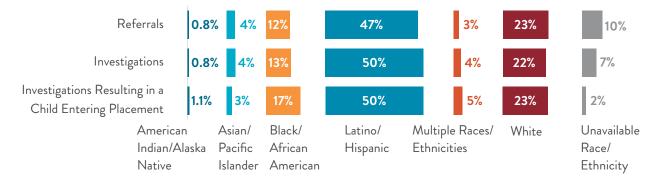
OPPORTUNITIES

Division 31 regulations state that workers should try to collect race/ethnicity information at the time of the referral. How does CDSS support this expectation (e.g., encouraging use of the missing race/ethnicity alert in SafeMeasures®)? As CDSS designs and implements the California Automated Response and Engagement System (CARES), what features can support race/ethnicity data collection? Given the higher proportion of investigations resulting in a child entering placement involving families in some race/ethnicity groups compared with their proportional representation among referrals or investigations, CDSS could seek to understand what contributes to this pattern.



THE DATA: RACE/ETHNICITY OF REFERRED FAMILIES

In 2024, California counties received 400,354 referrals concerning child abuse or neglect, 165,576 of which were assigned for an in-person response (i.e., investigation) according to CWS/CMS. Any child was placed into foster care during 10,790 investigations. Investigations and investigations resulting in a child entering placement include only those eligible for the SDM safety (in-home) and risk assessments.





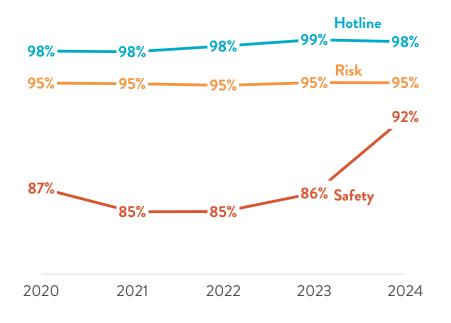
- Family race/ethnicity was unavailable for 10% of referrals, 7% of investigations, and 2% of investigations resulting in a child entering placement. Compared with trends observed in 2022 and 2023 (not shown), race/ ethnicity data collection gradually improved. If family race/ethnicity information were available for these referrals and investigations, findings could change.
- compared with the proportions of referrals involving families in each race/ ethnicity group (excluding unavailable), the proportions of investigations involving families in most race/ethnicity groups were similar (i.e., within 1 percentage point). A slightly higher proportion of investigations involved Latino/Hispanic families compared with their representation on referrals.
- The proportions of investigations
 resulting in a child entering placement
 that involved American Indian/
 Alaska Native families, Black/African
 American families, or families with
 multiple races/ethnicities were higher
 than the proportions of investigations
 or referrals involving families from the
 same respective race/ethnicity groups.

SDM ASSESSMENT TRENDS



THE DATA: COMPLETION RATES

For 2022 through 2024, referrals overridden to an in-person response on the hotline tools were excluded from the safety and risk assessment completion rates because based on policy, no further SDM assessments are required on these referrals.





Hotline: The SDM hotline tools, which include multiple sections, must be used for all referrals recorded in CWS/CMS. The screening section helps workers decide whether a referral should be assigned an in-person response. If a referral is assigned, the response priority section helps determine the timeframe for the initial investigative contact with the family.

Safety: The SDM safety assessment must be completed for any non-substitute care provider (non-SCP) referral assigned an inperson response to evaluate whether immediate danger of serious harm is present for any child during the investigation.

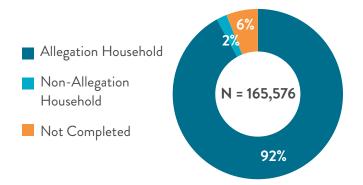
Risk: The SDM risk assessment must be completed at the end of every inconclusive or substantiated investigation (for non-SCP) to identify the family's likelihood of subsequent child protection involvement. It is recommended that the risk assessment be completed at the end of every unfounded investigation.

In 2021, changes were made to the SDM hotline tools. As a result, some referrals that require an in-person response are not eligible for the SDM safety and risk assessments. See the SDM policy and procedures manual and <u>All County Letter 20-142</u> for more information.

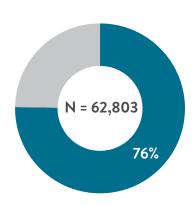
- Risk assessment completion rates include only substantiated and inconclusive investigations. Safety assessment completion rates include assessments
 completed only on allegation households (as recorded on the safety assessment).
- The five-year trends for hotline and risk assessment completion rates are steady compared with the trend for the safety assessment. In 2024, the safety assessment completion rate was 6 percentage points higher than in 2023, the highest point of the past five years.



SAFETY ASSESSMENT COMPLETION ON ALLEGATION AND NON-ALLEGATION HOUSEHOLDS



RISK ASSESSMENT COMPLETION ON UNFOUNDED INVESTIGATIONS



CONNECTING DATA TO PRACTICE

There was a notable increase in the completion rate of safety assessments on allegation households in 2024. In January 2024, Evident Change added a pop-up reminder to WebSDM to alert workers who conduct a safety assessment on a non-allegation household that they should also complete an assessment on the allegation household. To what extent does the higher completion rate of the safety assessment on allegation households relate to this reminder? What other factors may have contributed to this increase? Evident Change will continue to monitor the safety assessment completion trends in future reports.

Evident Change recommends completing the risk assessment at the end of every investigation, including those that are unfounded. In 2024, the risk assessment completion rate for unfounded investigations (76%) was lower than that observed for substantiated or inconclusive investigations (95%). What can be done to improve the risk assessment completion rate for unfounded investigations? How can understanding risk level for families involved in unfounded investigations help to prevent subsequent child welfare involvement?



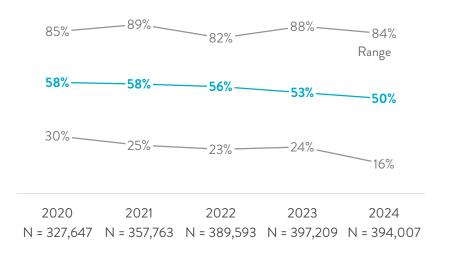
- For 155,460 investigations with a recorded face-to-face contact with an alleged victim and a completed safety assessment (first assessment on an allegation household; otherwise, first assessment on a non-allegation household), the initial safety assessment was documented as completed within two days after the first contact 83% of the time (not shown).
- The safety assessment completion rate on allegation households increased 6 percentage points compared with 2023, and the completion rate on only a non-allegation household decreased 6 percentage points, resulting in an overall safety assessment completion rate of 94% in 2024. This is similar to the 95% completion rate observed in 2023 (not shown). Note that the number of investigations requiring a safety assessment gradually decreased from 2022 to 2024 (185,510 in 2022 and 176,459 in 2023, not shown).
- In 2024, 76% of unfounded investigations had a risk assessment completed. Compared with the completion rates observed in 2022 and 2023 (74% and 75%, respectively, not shown), the completion rate gradually increased while the number of unfounded investigations (67,545 in 2022 and 65,976 in 2023, not shown) decreased.



THE DATA: SDM HOTLINE SCREENING TOOL

In 2024, 394,015 referrals had a completed hotline screening tool. Screening override decisions were made for the 359,529 referrals without preliminary screening items selected. The analysis excludes eight referrals that had a data anomaly in the screening tool.

FINAL SCREENING DECISION: IN-PERSON RESPONSE





CONNECTING DATA TO PRACTICE

The statewide in-person response rate continued to decrease in 2024, which means the evaluate-out rate has increased. What might explain this trend (e.g., changes in nature of calls to CWS, policy or practice changes, volume of calls, availability of community supports)? What does a 50% evaluate-out rate mean for hotline resources across the state?

In 2024, the range of in-person response rates across counties continued to widen. What contributes to the varying in-person response rates across counties using the same hotline tools? What specific guidance does CDSS provide to counties to ensure that hotline tools are used with fidelity?

The screening decision override rates have remained consistent over the past five years. How does CDSS support counties in training to ensure the overrides are being used appropriately and consistently?

SCREENING DECISION OVERRIDE RATES

Override to:	2020	2021	2022	2023	2024
In-Person Response	1%	1%	1%	1%	1%
Evaluate Out	4%	4%	4%	4%	4%



- The in-person response rate dropped gradually over the past four years, from 58% to 50%. In 2024, the in-person response rates across individual counties in California ranged between 16% and 84%, and this range gradually increased from 2022 to 2024.
- The override rates to in-person response and to evaluate out were consistently 1% and 4%, respectively. The screening decision override rates were near the lower end of the typical 5–10% range over the past five years.



THE DATA: SDM RESPONSE PRIORITY

Referrals with an initial and final recommendation for an inperson response are eligible for the response priority section.

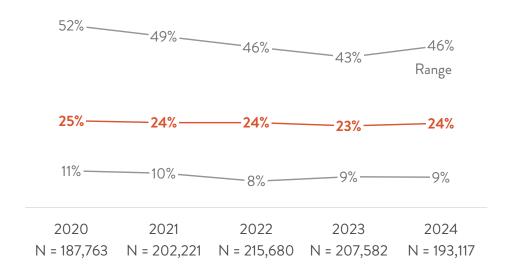
RESPONSE PRIORITY OVERRIDE RATES

Override to:	2020	2021	2022	2023	2024
10 Days	6%	5%	5%	4%	4%
24 Hours	3%	3%	3%	2%	2%

TAKEAWAYS

- The within-24-hours response rate has remained between 23% and 25% over the past five years. The range of the rates across individual counties gradually decreased from 2020 to 2023, mainly attributed to a decrease in the highest within-24-hours response rates across counties; the range slightly increased in 2024. The number of referrals with completed hotline response priority tools decreased from 2022 to 2024; this observation likely relates to the decrease in in-person response rates in that timeframe.
- Response priority override rates gradually decreased, from 9% in 2020 to 6% in 2024. During each of the five years observed, the total override rate was within the typical range of 5–10%.

FINAL RESPONSE PRIORITY: WITHIN 24 HOURS





CONNECTING DATA TO PRACTICE

Across California, about a quarter of screened-in referrals were recommended for an inperson response within 24 hours. Statewide within-24-hours response rates were generally similar over the five years observed, yet rates observed across individual counties varied widely (9–46% in 2024; response rates for individual counties are available in the County-Level Data Report). Additionally, while the lowest within-24-hours response rate fluctuated within 3 percentage points (8–11%) across individual counties over the past five years, the highest rate changed more substantially every year (43–52%). Changes in within-24-hours response rates may impact a county's resource allocation, staff workload, and quality of services. How can CDSS tailor support to counties with higher rates of within-24-hours response investigations to ensure timely contact with children and families? What guidance can CDSS offer to counties to address challenges that arise with changes in within-24-hours response rates?



THE DATA: 2024 SCREENING TOOL RESULTS BY REFERRED FAMILY RACE/ETHNICITY

Screening overrides exclude referrals in which preliminary screening criteria were selected on the SDM hotline tools.

		IN-PERSON RESPONSE			SCREE OVERR	NING IDE TO:
		Initial	Final		-Person esponse	Evaluate Out
American Indian/Alaska Native	(n=3,186)	50%	48%	(n=2,886)	2.2%	3.6%
Asian/Pacific Islander	(n=17,018)	50%	47%	(n=15,624)	0.6%	3.1%
Black/African American	(n=47,638)	56%	54%	(n=43,498)	1.3%	2.9%
Latino/Hispanic	(n=185,225)	55%	52%	(n=168,104)	0.9%	3.8%
Multiple Races/Ethnicities	(n=10,220)	71%	69%	(n=9,509)	1.0%	2.7%
White	(n=90,103)	49%	47%	(n=81,660)	1.0%	3.5%
Unavailable Race/Ethnicity	(n=40,617)	42%	37%	(n=38,248)	0.8%	6.1%
Total	(N = 394,007)	52%	50%	(N = 359,529)	1.0%	3.8%



OPPORTUNITIES

CDSS could examine what is contributing to the differences in in-person response rates by family race/ethnicity. What screening items are selected for referrals by family race/ethnicity, and are there differences in the prevalence of the items? Do these differences remain after controlling for other factors, such as location or socioeconomic status? CDSS also could examine workers' documented rationale for overrides to better understand variation in override use by family race/ethnicity.



- Final in-person response rates were lower than initial in-person response rates for referrals involving families across all race/ethnicity groups. Referrals involving families with multiple races/ethnicities had the highest initial and final in-person response rates (71% initial and 69% final), followed by referrals involving Black/African American families (56% initial and 54% final) or Latino/Hispanic families (55% initial and 52% final).
- Screening overrides to evaluate out were applied at higher rates than overrides to in-person response for referrals involving families across all race/ethnicity groups. Screening overrides to evaluate out were used at the lowest rate for referrals involving families with multiple races/ethnicities (2.7%) and at the highest rate for referrals involving Latino/Hispanic families (3.8%, excluding unavailable). Screening overrides to in-person response were used at the lowest rate for referrals involving Asian/Pacific Islander families (0.6%) and at the highest rate for referrals involving American Indian/Alaska Native families (2.2%).



THE DATA: 2024 RESPONSE PRIORITY TOOL RESULTS BY REFERRED FAMILY RACE/ETHNICITY

		24-HOUR RESPONSE		RESPONSE P OVERRID	
		Initial	Final	24 Hours	10 Days
American Indian/Alaska Native	(n=1,474)	27%	27%	2.2%	2.5%
Asian/Pacific Islander	(n=7,937)	28%	25%	2.0%	5.0%
Black/African American	(n=25,280)	30%	28%	2.5%	4.5%
Latino/Hispanic	(n=94,881)	25%	24%	2.3%	4.0%
Multiple Races/Ethnicities	(n=6,967)	28%	26%	2.6%	4.1%
White	(n=41,681)	25%	24%	2.3%	3.3%
Unavailable Race/Ethnicity	(n=14,897)	21%	20%	2.3%	3.1%
Total	(N = 193,117)	26%	24%	2.3%	3.9%



OPPORTUNITIES

What might account for the differences observed in the within-24-hours response priority rates and use of response priority overrides by family race/ethnicity? How might differences in in-person response rates by family race/ethnicity relate to the differences observed in the within-24-hours response priority rates? CDSS could partner with Evident Change to review the use of response priority overrides for investigations involving families in different race/ethnicity groups to ensure they are properly used in a way to support consistent and timely responses to child abuse or neglect concerns.

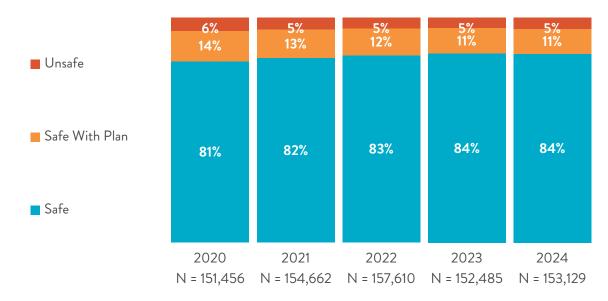


- Initial within-24-hours response priority rates were higher than the final response priority rates across investigations involving families from all race/ethnicity groups except American Indian/Alaska Native families. Investigations involving Black/African American families had both the highest initial and final within-24-hours response priority rates (30% and 28%, respectively), and investigations involving Latino/Hispanic families or White families had both the lowest initial and final within-24-hours response priority rates (25% and 24%, respectively, excluding unavailable).
- Response priority overrides to 10 days outnumbered overrides to 24 hours across investigations involving families from all race/ethnicity groups. Investigations involving American Indian/Alaska Native families had the lowest response priority override rate (4.7%), and investigations involving Black/ African American families or Asian/Pacific Islander families had the highest response priority override rates (7.0%). Investigations involving Asian/Pacific Islander families had the highest override rate to a response within 10 days (5.0%), and the lowest override rate to a response within 24 hours (2.0%).



THE DATA: SDM SAFETY ASSESSMENT RESULTS

In 2024, 153,129 investigations had a safety assessment completed on the allegation household.





TAKEAWAYS

- The proportion of investigations involving families assessed as safe with plan or unsafe decreased from 2020 to 2023 (19% to 16%), mainly due to the decrease in the proportion of investigations involving families assessed as safe with plan (14% to 11%). The distribution of safety assessment results was similar between 2023 and 2024.
- In 2024, the percentage of investigations with at least one safety threat identified ranged from 6% to 82% across counties with 25 or more investigations (not shown; see County-Level Data report).
- Statewide, in 2024 the three most prevalent safety threats identified in investigations in which the family was assessed as unsafe were child immediate needs not met, physical harm, and failure to protect (50%, 33%, and 23%, respectively, not shown; see County-Level Data report). The three most prevalent safety threats identified in investigations in which the family was assessed as safe with plan were domestic violence, physical harm, and child immediate needs not met (34%, 22%, and 20%, respectively, not shown; see County-Level Data report).

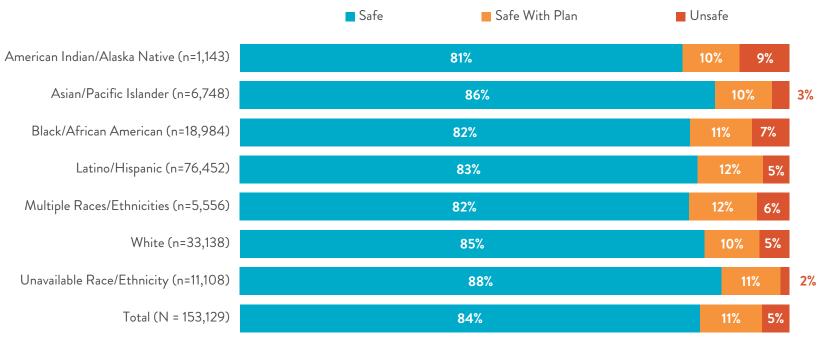


Over the past five years, at least 80% of investigations with a completed allegation household safety assessment involved families initially assessed as safe. In 2023 and 2024, about five in six investigations with a completed allegation household safety assessment had no safety threats identified on the initial safety assessment; in 2024, 20% of the investigations involving families assessed as safe had a within-24-hours response priority recorded on the SDM hotline tools (not shown). What are the reasons for the observed patterns in safety decisions? Does the high rate of "safe" findings indicate that safety threats are being under-identified or that there might be an opportunity to work with families outside the child welfare system to address concerns? What are the potential impacts on families, communities, and agency resources when CWS becomes involved in situations in which no child safety concerns are present?

Updates to the SDM safety assessment in 2024 included the addition of a safety threat to support the correct use and application of concerns related to domestic violence. The 2024 County-Level Data report now includes the three most prevalent safety threats identified for investigations involving families assessed as safe with plan. CDSS and counties may use this information as guidance to assist workers in developing safety plans.



THE DATA: 2024 SAFETY ASSESSMENT RESULTS BY INVESTIGATED FAMILY RACE/ETHNICITY





TAKEAWAYS

- Investigations involving American Indian/Alaska Native families had safety threats identified (i.e., unsafe or safe with plan) at the highest rate (19%), and those involving Asian/ Pacific Islander families had safety threats identified at the lowest rate (14%), followed by investigations involving White families (15%) (excluding unavailable). This variation was largely due to the different rates at which investigations involved families assessed as unsafe across the race/ethnicity groups (2-9%); rates at which investigations involved families assessed as safe with plan were more similar across race/ethnicity groups (10-12%).
- Investigations involving American Indian/Alaska Native families were assessed as unsafe at the highest rate (9%), and those involving Asian/Pacific Islander families were assessed as unsafe at the lowest rate (3%, excluding unavailable).



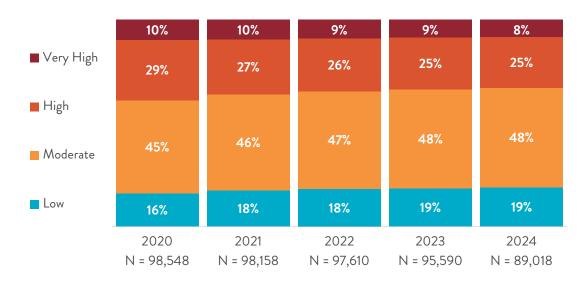
OPPORTUNITIES

On the initial safety assessment, workers identified safety threats that could not be addressed using inhome interventions (i.e., safety decision of unsafe) for a larger proportion of investigations involving families who were American Indian/Alaska Native. CDSS and Evident Change can partner to examine which safety threats are more often selected for investigations involving families in different race/ethnicity groups to develop insights into these findings and what might be getting in the way of in-home safety planning.



THE DATA: SDM RISK ASSESSMENT RESULTS

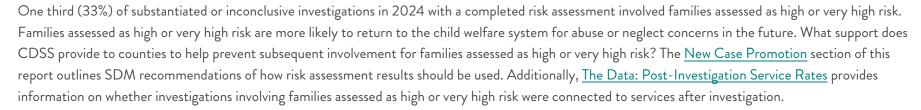
FINAL RISK LEVEL



RISK LEVEL OVERRIDE RATES

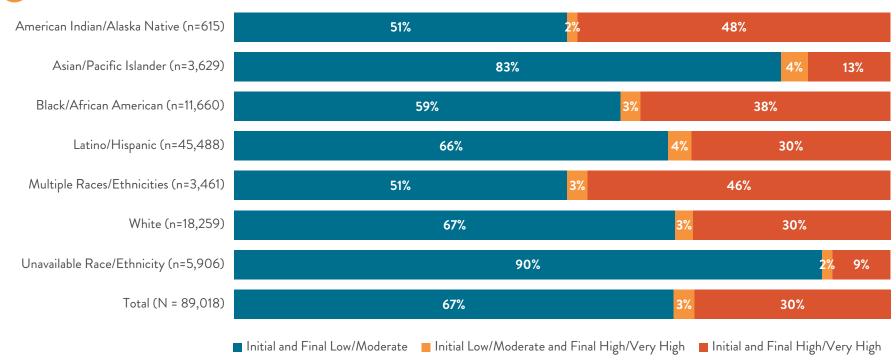
Override Type	2020	2021	2022	2023	2024
Policy	1%	2%	1%	1%	1%
Discretionary	5%	4%	3%	3%	3%

CONNECTING DATA TO PRACTICE



- The number of substantiated or inconclusive investigations with a completed SDM risk assessment decreased over the past five years.
- The proportion of substantiated or inconclusive investigations involving families assessed as high or very high risk decreased over the past five years, from 39% in 2020 to 33% in 2024.
- In 2024, the percentage of substantiated or inconclusive investigations in which the family was assessed as high or very high risk ranged from 8% to 55% across counties with 25 or more investigations (not shown; see County-Level Data report).
- The risk level override rate (policy override and discretionary override rates combined) was near or slightly below the lower end of the typical 5–10% range over the past five years (4–5%). Note that policy overrides are used to change the final risk level to very high while discretionary overrides are used to increase the final risk level by one level.

THE DATA: 2024 RISK ASSESSMENT RESULTS BY INVESTIGATED FAMILY RACE/ETHNICITY





TAKEAWAYS

Investigations involving American Indian/ Alaska Native families (48% initial and 49% final) or families with multiple races/ethnicities (46% initial and 49% final) were assessed as high or very high risk at the highest rates, and investigations involving Asian/Pacific Islander families were assessed as high or very high risk at the lowest rates (13% initial and 17% final) among the race/ethnicity groups (excluding unavailable).



OPPORTUNITIES

Investigations involving American Indian/Alaska Native families or families with multiple races/ethnicities were assessed as high or very high risk (initial or final) at higher rates compared with investigations involving families from all other race/ethnicity groups; this pattern has persisted for several years. What might account for these differences? CDSS and Evident Change can partner to examine which items are selected on the SDM risk assessment by family race/ethnicity to better understand what may be leading to these findings. Furthermore, Evident Change could assist in selecting a sample of investigations for an in-depth review to better understand why workers selected items on the risk assessment, including overrides, and to ensure that SDM item definitions are followed. Conducting a full risk validation study to update the assessment is essential to ensure accurate performance across key subpopulations such as family race/ethnicity.

CHILDREN PLACED IN OUT-OF-HOME CARE

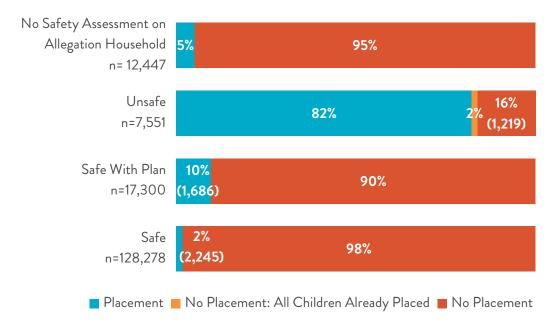


POLICY & PRACTICE GUIDELINES

A safety decision of unsafe means the worker has determined that placement into out-of-home care is the only intervention available to keep the child safe. To examine how often initial safety decisions correspond to children actually entering out-of-home placement, Evident Change identified the first placement episode that began between three days prior to the date the referral was received and the end of the investigation—or, if the investigation was still open, February 17, 2025 (the date this information was collected from CWS/CMS).



THE DATA: PLACEMENT BY INITIAL SAFETY DECISION





- In 2024, 153,129 investigations involved families with a safety assessment completed on the allegation household. It was not completed on the allegation household in 12,447 investigations (75% of which did not have a safety assessment completed and 25% of which had the assessment completed only on a non-allegation household, both not shown). Investigations involving families with no safety assessment completed on the allegation household resulted in a child entering placement at a lower rate (5%) than investigations involving families with a safety assessment completed on the allegation household (7%, not shown).
- Of 145,578 investigations in which families were initially assessed as safe with plan or safe, 3,931 (3%) had any child enter out-of-home placement during the investigation.
- Of 7,551 investigations in which families were initially assessed as unsafe, 1,219 (16%) had no child enter out-of-home placement during the investigation; another 118 (2%) resulted in no new out-of-home placement because all children were already in an existing out-of-home placement before and for the full duration of the investigation.



THE DATA: SUBSEQUENT SAFETY ASSESSMENT

Initial Safety Assessment Result	N	Subsequent Safety Assessment Result	Percentage
Safe or Safe With Plan With Child Placement	3,931	Unsafe	29%
Unsafe With No Child Placement	1,219	Safe or Safe With Plan	28%



TAKEAWAYS

- Of 3,931 investigations involving families initially assessed as safe with plan or safe who had any child enter out-of-home placement, 29% (1,147, not shown) had a subsequent safety assessment reflecting a change in safety to unsafe.
- Of 1,219 investigations involving families initially assessed as unsafe who had no children placed in out-of-home care, 28% (336, not shown) had a subsequent safety assessment reflecting a change to safe or safe with plan.



CONNECTING DATA TO PRACTICE

Placement decisions did not always align with the initial SDM safety decision recommendation: one in six investigations involving families initially assessed as unsafe did not have a child placed into out-of-home care, one in 10 investigations involving families initially assessed as safe with plan resulted in child placement, and 2% of investigations involving families initially assessed as safe had a child placement occur. Among investigations in which the placement action taken by the worker did not align with the initial safety decision for the family, less than one third had a new safety assessment documenting a safety decision that aligned with the action taken.

As circumstances change, safety should be reassessed. How can CDSS encourage using the SDM safety assessment to guide safety planning on an ongoing basis? CDSS could consider reviewing safety decision adherence rates and reassessment practices across the counties. Insights from such a review could help CDSS to learn what is working well for counties with strong practices and could be used to develop strategies to strengthen statewide adherence to SDM safety assessment guidelines and policy.

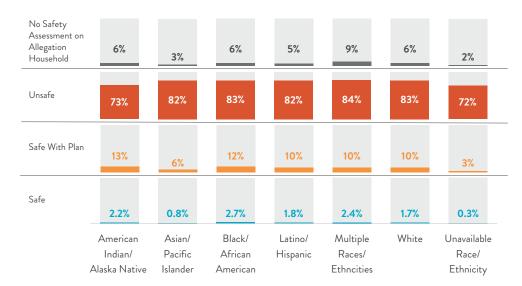
The rate at which investigations involving families initially assessed as safe with plan resulted in child placement (10%) decreased by 3 percentage points since 2023 (13%, not shown). What might account for this change, and does it relate to efforts made to strengthen in-home safety planning?

The rate at which investigations involving families initially assessed as unsafe resulted in child placement (82%) also decreased since 2023 (87%, not shown). What are the possible impacts on children and families when SDM safety assessment recommendations are not followed?

For investigations in which no safety assessment was completed for the allegation household, what guidelines did county workers use to make child placement decisions? What can CDSS do to help counties make consistent decisions in similar situations? How can counties assist workers in completing the safety assessment for all allegation households to ensure consistent assessment of safety concerns and child placement decisions?



THE DATA: PLACEMENT RATES BY INITIAL SAFETY DECISION AND INVESTIGATED FAMILY RACE/ETHNICITY





OPPORTUNITIES

Adherence to the initial safety decision varied by the race/ethnicity of the family involved in the investigation. A comparison of how often families have a child enter out-of-home care by safety threat and family race/ethnicity could provide more information about this variation. CDSS could conduct a review to observe differences in safety planning practices by family race/ethnicity and identify barriers to maintaining in-home safety plans, which could provide insight into the differences in child placement rates by race/ethnicity for families initially assessed as safe with plan.

CDSS and Evident Change could partner to examine why adherence to the initial safety assessment decision of unsafe was lower for investigations involving American Indian/ Alaska Native families and families whose race/ethnicity information was unavailable. This could help to explore whether SDM definitions and thresholds, worker perception, or a combination is contributing to the variation in safety threat and intervention identification and in the child placement rates, or highlight areas of the SDM safety assessment that could be strengthened to support effective safety planning with children and families.



- Within each race/ethnicity group, investigations involving families with no safety assessment completed on the allegation household had placement rates between the rates observed for those assessed as safe or safe with plan. Among investigations involving families with no safety assessment completed for the allegation household, those involving families with multiple races/ethnicities had the highest placement rate (9%), and those involving Asian/ Pacific Islander families had the lowest placement rate (3%, excluding unavailable).
- Among investigations in which the family was initially assessed as unsafe (excluding unavailable race/ethnicity), those involving families with multiple races/ethnicities had the highest placement rate (84%), and those involving American Indian/Alaska Native families had the lowest placement rate (73%). Note that investigations involving American Indian/Alaska Native families were initially assessed as unsafe at the highest rate (9%; see The Data: 2024 Safety Assessment Results by Investigated Family Race/Ethnicity).
- Among investigations in which the family was initially assessed as safe with plan (excluding unavailable race/ ethnicity), those involving American Indian/Alaska Native families (13%) or Black/African American families (12%) had the highest placement rates, and those involving Asian/Pacific Islander families had the lowest placement rate (6%). Placement rates for investigations involving families initially assessed as safe ranged from 0.8% to 2.7% across the race/ethnicity groups (excluding unavailable).

NEW CASE PROMOTION



POLICY & PRACTICE GUIDELINES

The SDM risk assessment classifies families by their likelihood of subsequent child protection involvement. Investigations for families at low or moderate risk levels may be closed without services unless outstanding threats to child safety remain at the end of the investigation. Ongoing services following investigation closure should be considered for families who are classified as high or very high risk.

Post-investigation services are a mechanism to improve and support the safety, stability, and permanency of children and families. SDM case promotion guidelines suggest providing services based on risk level and safety decision so that resources are allocated to the families who most need support to address safety concerns or prevent subsequent child protection involvement, regardless of investigation conclusion.

THE DATA: PREVALENCE OF RISK LEVEL AND SAFETY DECISION COMBINATIONS

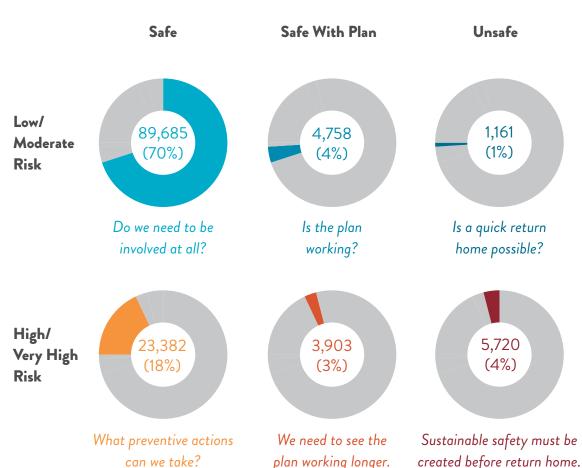
In 2024, 128,609 investigations for families who did not already have an open case had a completed safety and risk assessment. The analysis examined findings from the last safety assessment completed during the investigation and the risk assessment.



- The analysis reflects only investigations with completed safety and risk assessments. Counties conducted an additional 21,463 investigations in 2024 without completed safety and/or risk assessments.
- There were 38,924 investigations involving families who were assessed as high or very high risk and/or had outstanding safety threats at the end of the investigation. Of those, 12,543 (32%, not shown) were promoted to a new ongoing CWS case.



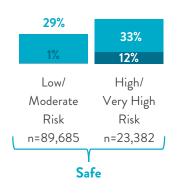


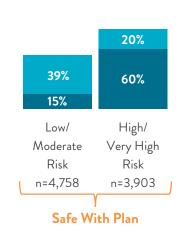


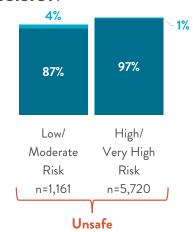
THE DATA: POST-INVESTIGATION SERVICE RATES

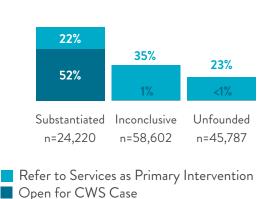
BY RISK LEVEL AND SAFETY DECISION

BY INVESTIGATION CONCLUSION









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TAKEAWAYS

- CWS case opening rates related more strongly to the presence of safety threats at the end of the
 investigation or substantiation than to SDM risk levels. CWS cases were opened for 62% (not
 shown) of investigations with outstanding safety threats, 52% of substantiated investigations, and
 33% (not shown) of investigations involving families assessed as high or very high risk.
- Of the investigations involving families assessed as low or moderate risk and safe, 29% were referred to services as primary intervention and 1% had a CWS case opened.
- Of the investigations involving families assessed as high or very high risk and safe, 12% had a CWS case opened, and 33% were referred to services as primary intervention.
- Of the investigations involving families assessed as low or moderate risk and safe with plan, 15% had a CWS case opened, and 39% were referred to services as primary intervention.
- Of the investigations involving families assessed as high or very high risk and safe with plan, 60% had a CWS case opened, and 20% were referred to services as primary intervention.
- Combining both types of services, 80% (not shown) of investigations involving families with safety
 threats present at the end of the investigation and 74% of investigations involving families with
 substantiated allegations had a post-investigation service documented. Only 59% of investigations
 involving families assessed as high or very high risk had such services documented (not shown).

CONNECTING DATA TO PRACTICE

SDM post-investigation service recommendations were updated in 2024. Families assessed as safe with plan or unsafe at the end of the investigation are recommended to be opened for CWS cases; families assessed as safe and high or very high risk are recommended for CWS case opening or referral to services as primary intervention. Postinvestigation service rates by SDM risk level and safety decision show that actions documented did not always align with the recommendation. What might account for the divergence between recommendations and actions taken by workers? What are the potential impacts on children, families, and agency resources when recommendations are not followed? How can CDSS promote a strong understanding of the service recommendations and support counties in adhering to them?

EXAMINING THE SDM SYSTEM BY CHILD SUBPOPULATION



CHILDREN INVOLVED IN 2023

The race/ethnicity distribution of children involved in new cases that began in family maintenance (FM) services and new placement episodes with family reunification (FR) services provides key context for interpreting the SDM risk reassessment and reunification assessment findings. Subsequent CWS involvement can also be examined for children identified as alleged victims in investigations. The child race/ethnicity categorization method is available in Appendix A.



OPPORTUNITIES

There were differences in the proportional representation by race/ethnicity of children involved in investigations, in-home cases, or new placement episodes. What factors may account for the variation across CWS populations? How might differing SDM safety and risk assessment results and adherence to SDM safety and risk assessment recommendations by race/ethnicity impact these patterns?

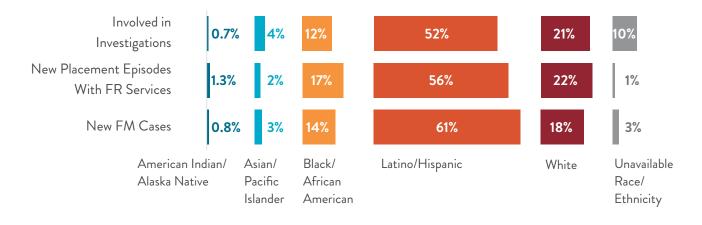


TAKEAWAYS

- One in 10 children involved in investigations did not have race/ ethnicity recorded; this missing rate makes it difficult to accurately understand the proportion of children involved in investigations within each race/ethnicity group.
- Compared with the proportions of children involved in investigations in their respective race/ethnicity groups, larger proportions of new placement episodes involved Latino/ Hispanic children (52% and 56%, respectively), White children (21% and 22%, respectively), Black/African American children (12% and 17%, respectively), or American Indian/ Alaska Native children (0.7% and 1.3%, respectively).
- Compared with the proportions of children involved in investigations in their respective race/ethnicity groups, larger proportions of new FM cases involved Latino/Hispanic children (52% and 61%, respectively) or Black/ African American children (12% and 14%, respectively).

THE DATA: RACE/ETHNICITY OF CHILDREN INVOLVED IN INVESTIGATIONS AND CASES

In 2023, 268,987 distinct children were alleged victims involved in an investigation. There were 15,817 new placement episodes with FR services active during the episode, and 12,028 cases began in FM services. Note that individual children may be part of more than one case or placement episode in the year; there were 103 children who had more than one placement episode and 41 children who had more than one in-home case (not shown).



MALTREATMENT INVESTIGATION AND SUBSTANTIATION RECURRENCE



THE DATA: SUBSEQUENT CWS INVOLVEMENT

The recurrence sample includes children who were alleged victims involved in investigations in 2023 and compares 12-month subsequent maltreatment investigations and substantiations across investigation conclusion and initial risk level. This analysis does not include children who were placed in out-of-home care for the entire outcome period.

POLICY & PRACTICE GUIDELINES

The SDM risk assessment is an actuarial tool that, when completed with fidelity, classifies families based on shared characteristics that relate to the likelihood of experiencing subsequent child protection involvement. The investigation conclusion is a determination, made without structured support, on whether the alleged maltreatment is likely to have occurred; substantiated allegations are determined to have been more likely than not to have occurred.

SUBSEQUENT MALTREATMENT INVESTIGATION

BY ALLEGATION CONCLUSION

24% 20% 21% Substantiated Inconclusive Unfounded

n=119,467

n=115,528

n=33,992

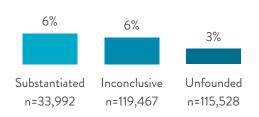
21% 19% No Risk Low/ Assessment Moderate Noderate No High/ Very High No Risk No Risk

BY INITIAL RISK LEVEL

SUBSEQUENT SUBSTANTIATED MALTREATMENT INVESTIGATION

BY ALLEGATION CONCLUSION

BY INITIAL RISK LEVEL





CONNECTING DATA TO PRACTICE

The analysis shows that risk level provides better distinction than the investigation finding regarding which children and families are most likely to have subsequent child welfare system involvement. How can CDSS help counties make sure that workers understand the information they can get from the allegation conclusion and the risk levels and that workers are supported in using both pieces of information when making decisions related to post-investigation service provision?

More than one fifth (21%) of children whose 2023 investigation had unfounded allegation conclusions were part of a new investigation within 12 months. Completing a risk assessment for every family investigation, regardless of investigation conclusion, can be used to connect families who are at high risk of subsequent child welfare system involvement with prevention resources.

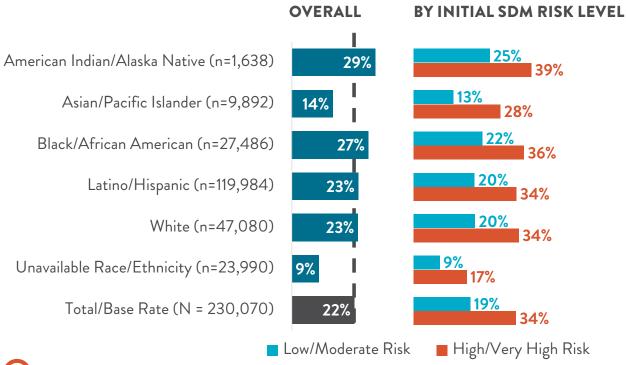
A large proportion (44%, not shown) of children involved in investigations in 2023 had an investigation finding of inconclusive; nearly a quarter (24%) of these children had a subsequent investigation within a year. Does the elevated rate of reinvolvement for these children reflect unresolved issues from the child's initial investigation? What might explain the high rate of inconclusive allegation findings?



- Rates of subsequent investigation varied slightly for children with differing allegation conclusions.
 Subsequent maltreatment investigations occurred at a slightly higher rate for children with inconclusive allegations (24%) at the time of their 2023 investigations than for those with substantiated or unfounded allegations (20% and 21%, respectively).
- Compared with the investigation allegation conclusion, SDM risk level more accurately identifies who is most likely to return to the child protection system for abuse or neglect concerns. Children in families assessed as high or very high risk experienced subsequent system involvement at substantially higher rates (34% subsequent investigation; 9% subsequent substantiated investigation) than children in families assessed as low or moderate risk (19% subsequent investigation).
- There were 38,917 children in families who did not have a completed risk assessment. Of those, 21% had a new investigation, and 5% had a new substantiated investigation. The new investigation rate was slightly lower than the base rate (22% not shown), and the substantiation rate was similar to the base rate (5%, not shown). Among the children whose 2023 investigations had no completed risk assessment, 3% were substantiated, 37% were inconclusive, and 61% were unfounded (not shown).



THE DATA: SUBSEQUENT INVESTIGATION BY CHILD RACE/ETHNICITY





The SDM risk assessment is functioning accurately within individual race/ethnicity groups and across available race/ethnicity groups, yet the functioning of the assessment could improve. For example, the subsequent investigation rate for Asian/Pacific Islander children from families assessed as high/very high risk is only 3 percentage points higher than the rate observed for American Indian/ Alaska Native children from families assessed as low/moderate risk. Evident Change continues to recommend a collaborative, stakeholder-informed risk validation study to update and improve the performance of the risk assessment.



- American Indian/Alaska Native children and Black/African American children had higher subsequent investigation rates within 12 months (29% and 27%, respectively) among the race/ethnicity groups.
- Across all race/ethnicity groups, children whose families were assessed as high/very high risk experienced subsequent investigations at higher rates than those whose families were assessed as low/moderate risk.
- Among children whose families were assessed as high/very high risk (excluding unavailable race/ethnicity), American Indian/Alaska Native children had the highest rate of subsequent investigation within 12 months (39%; note that 33% of children were from families assessed as high/very high risk, not shown), and Asian/Pacific Islander children had the lowest rate of subsequent investigation within 12 months (28%; note that 9% of children were from families assessed as high/very high risk, not shown).
- Among children whose families were assessed as low/moderate risk (excluding unavailable race/ethnicity), American Indian/Alaska Native children had the highest rate of subsequent investigation within 12 months (25%), and Asian/Pacific Islander children had the lowest rate of subsequent investigation within 12 months (13%).

SDM REUNIFICATION ASSESSMENT



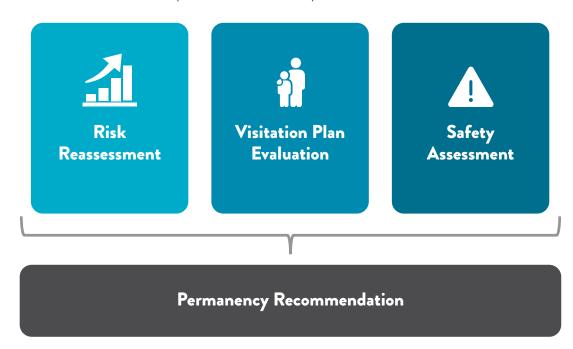
POLICY & PRACTICE GUIDELINES

The SDM reunification assessment (called the reunification reassessment prior to 2024) should be completed for children in placement with a goal of returning home. This assessment should be completed prior to each status review hearing and/or Division 31–required review, which occurs at least once every six months. The recommendation from the reunification assessment guides a worker's decision about the permanency plan: to pursue permanency alternative (called "terminate FR services" prior to 2024), continue FR services, or return a child to the removal home. FR services should be terminated only when the reunification assessment's permanency plan recommendation is either to pursue permanency alternative/terminate FR services or to return home.



COMPONENTS OF THE SDM REUNIFICATION ASSESSMENT

The reunification assessment includes a risk reassessment, visitation plan evaluation, and safety assessment. The safety assessment is completed only when the risk level from the risk reassessment and visitation plan evaluation are acceptable.





RECENT UPDATES

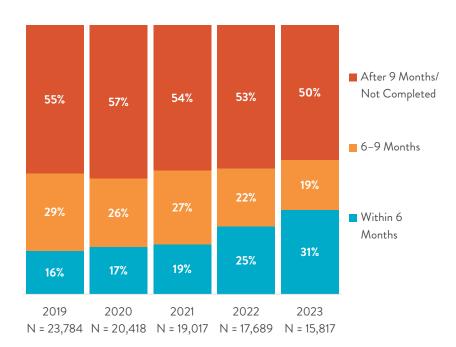
In January 2024, an updated version of the SDM reunification assessment was released in California. The update resulted in language changes, including renaming the tool from "reunification reassessment" to "reunification assessment" and using "pursue permanency alternative" in place of "terminate FR services." Another major change was the policy regarding timely completion: The reunification assessment should now be completed every six months from the point of removal. If adequate time has passed to demonstrate progress on the case plan, it is recommended to complete the assessment every 90 days. The assessment should also be completed prior to any court hearing at which the permanency goal or progress toward case plan goals is reviewed or any time the child is being considered for return home.

Much of the timeframe covered in this management report predates the 2024 updates. Therefore, the reunification assessment policy and some terminology reflects what was in place prior to 2024.



THE DATA: SDM REUNIFICATION ASSESSMENT TIME-TO-COMPLETION TREND

This analysis focuses on children in placement episodes beginning in each year and shows the time from the start of the child's FR services to the completion of their first reunification assessment. The analysis excludes placement episodes lasting less than eight days and probate guardianship, Kinship Guardianship Assistance Payment Program, and Interstate Compact on the Placement of Children placement episodes. Note that the dates on which these started and whether the young person reached their 18th birthday were used for exclusions. Starting in 2021, placement episodes with FR services active less than nine months and still open as of the extract date during each year examined (e.g., the extract for this report was February 17, 2025) were excluded to allow equal opportunity (i.e., at least nine months) to complete the reunification assessment.





TAKEAWAYS

- The number of children entering care each year who received FR services decreased over the five years observed.
- Completion rates of the reunification assessment within nine months of FR services starting increased for children who entered care in 2020 through 2023 (43%, 46%, 47%, and 50%, respectively), and the within-six-months completion rates increased from 16% to 31% from 2019 to 2023.
- Within-nine-months completion rates varied from 6% to 94% across counties with 25 or more new placement episodes in 2023 (not shown; see County-Level Data report).
- Starting in 2024, SDM reunification assessment policy now specifies that the assessment should be completed every six months from the point of removal. For children involved in placement episodes starting in 2023, 48% (not shown) had a reunification assessment completed within nine months of the placement episode removal date; this is just 2 percentage points lower than the within-nine-months completion rate using the pre-2024 completion policy standards.

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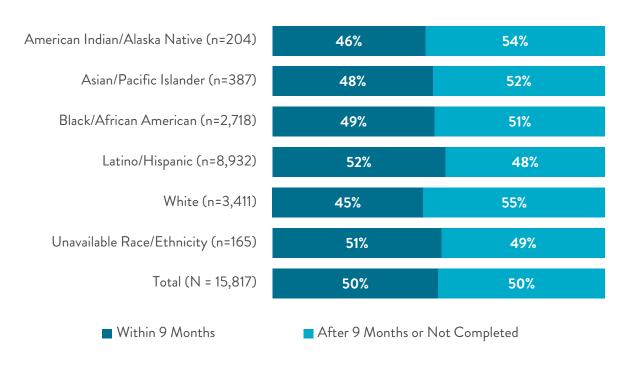
CONNECTING DATA TO PRACTICE

Reunification assessment completion rates continue to increase, especially the within-six-months completion rate, which nearly doubled between the rate observed for children involved in placement episodes starting in 2019 compared with children involved in placement episodes starting in 2023. Yet, there remains room for significant improvement: Only half of children involved in placement episodes starting in 2023 had a reunification assessment completed within nine months of their FR services starting. How can CDSS encourage use of the reunification assessment to improve service quality and to help counties to consistently and fairly assess children in care and their families for reunification opportunities?



THE DATA: 2023 REUNIFICATION ASSESSMENT COMPLETION WITHIN NINE MONTHS BY CHILD RACE/ETHNICITY

In 2023, there were 15,817 placement episodes for children with FR services active during the placement episode. Of these, 7,894 (50%) had a reunification assessment completed within nine months of their FR services starting.





OPPORTUNITIES

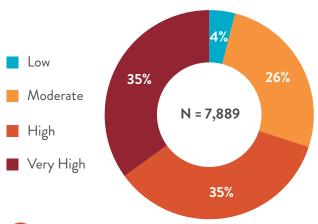
The reunification assessment completion rates increased for placement episodes involving children from several race/ethnicity groups. For children involved in new placement episodes in 2023, completion rates were more similar across race/ethnicity groups (45–52%) than in prior years (e.g., 35–49% in 2022, not shown). What might account for these increases? How can strengthened completion rates across all race/ethnicity groups support consistent service delivery and permanency outcomes for all children in out-of-home care? What efforts can CDSS make to support consistent use of the reunification assessment?

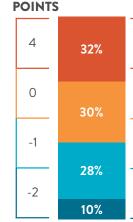
- Among new placement episodes in 2023, those involving White children had the lowest reunification assessment completion rate (45%) within nine months of FR services starting, and those involving Latino/Hispanic children had the highest completion rate (52%).
- Compared with the rates observed for new placement episodes in 2022 (not shown), the completion rates of the reunification assessment within nine months for placement episodes involving American Indian/Alaska Native or Asian/Pacific Islander children or children with unavailable race/ethnicity information increased at least 10 percentage points, and the rates for placement episodes involving White or Latino/Hispanic children increased 5 and 3 percentage points, respectively. Completion rates for placement episodes involving Black/African American children remained consistent.

THE DATA: SCORED RISK LEVEL



THE DATA: CASE PLAN PROGRESS





Does not demonstrate new skills and behaviors consistent with case plan objectives and/or refuses engagement

Minimally demonstrates new skills and behaviors consistent with case plan objectives and/or has been inconsistently engaged in obtaining the objectives specified in the case plan

Demonstrates some new skills and behaviors consistent with family case plan objectives and actively engaged in activities to achieve objectives

Demonstrates new skills and behaviors consistent with all family case plan objectives and actively engaged to maintain objectives



- Five reunification assessments lacked an initial recommendation and were excluded from remaining analyses.
- Over two thirds (5,542, or 70%) of 7,889 placement episodes
 with a completed reunification assessment within nine months
 of FR services starting involved children from families with a
 scored risk level of high or very high risk. The scored risk level
 was overridden for 279 (4%, not shown) placement episodes
 with a reunification assessment completed.
- The case plan progress item score is the higher between the primary and secondary (if applicable) caregiver score(s). For nearly a third (32%, or 2,500) of placement episodes with a completed reunification assessment within nine months, caregivers did not demonstrate new skills and/or refused engagement. Of these, the score reflected both caregivers' score 25% of the time and only the primary caregiver's score 58% of the time while for 17%, the score reflected only the secondary caregiver's lack of skills and engagement while the primary caregiver's score was more favorable (not shown).

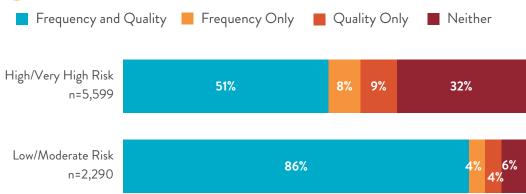


CONNECTING DATA TO PRACTICE

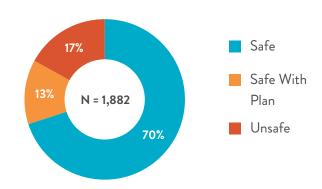
The caregiver's progress with case plan objectives item on the reunification assessment includes two options with negative point values, which reduce a family's risk score on the assessment and possibly the family's scored risk level. The only other way to lower the risk level on the assessment is by using an override. The proportion of placement episodes involving children from families assessed as high or very high risk relates to the scoring of this item, as the high-risk threshold is 4 points.

A majority (70%) of placement episodes with a reunification assessment completed within nine months involved children from families assessed as high or very high risk. The case plan objectives item contributes significantly to the scored risk level, underscoring the need to help caregivers gain new skills and behaviors consistent with case plan objectives in order to manage the family's risk level. In what ways are counties supported to ensure case plan objectives continue to focus on parental needs most related to initial safety concerns? Additionally, when a child's primary and secondary caregivers have different case plan progress scores, what strategies can be used to improve the case plan progress for one caregiver while maintaining consistent progress with the other?

THE DATA: VISITATION COMPLIANCE BY FINAL RISK LEVEL



THE DATA: SAFETY DECISION FOR ACCEPTABLE RISK AND VISITATION





TAKEAWAYS

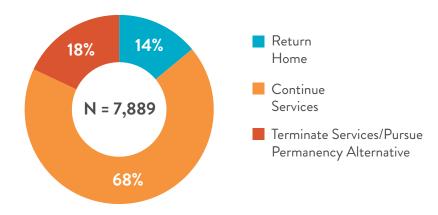
- In 2023, 86% of placement episodes involving children whose families were assessed as low or moderate risk and 51% of placement episodes involving children whose families were assessed as high or very high risk had acceptable visitation frequency and quality on their first reunification assessment. Around a third (32%) of placement episodes involving children whose families were assessed as high or very high risk met neither frequency nor quality visitation compliance.
- Workers overrode the evaluated visitation compliance for 802 (10%) placement episodes, with 5.5% overriding to non-compliance and 4.7% overriding to compliance (not shown). After visitation compliance overrides, 2,904 (52%) placement episodes involving children from families with a high or very high final risk level and 1,882 (82%) placement episodes involving children from families with a low or moderate final risk level were assessed as having acceptable visitation frequency and quality (not shown).
- For placement episodes involving children from families assessed as low or moderate risk and having acceptable visitation compliance, 83% (1,564) were assessed as safe or safe with plan.

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CONNECTING DATA TO PRACTICE

When a family is assessed as low or moderate risk on the risk portion of the reunification assessment, the visitation compliance and the safety decision can impact the recommendation to return children home. To achieve the goal of safely returning children home from placement, counties could focus on developing practices and strategies to improve visitation quality and frequency, particularly for children from families assessed as low or moderate risk. When visitation quality or frequency is assessed as not acceptable, what steps do county practitioners take to re-engage families and reset agreements for visitation? What guidance has CDSS provided to the counties to support safe and stable visitation? Additionally, when risk and visitation are assessed as acceptable and the family is assessed as unsafe, how are workers supported to address safety threats or develop effective in-home safety plans as soon as possible to support timely reunification?

THE DATA: SDM REUNIFICATION ASSESSMENT—FINAL RECOMMENDATION





14%



TAKEAWAYS

- Of the placement episodes involving children with a completed reunification assessment within nine months, over two thirds (68%) had a final recommendation to continue FR services, 18% had a final recommendation to terminate services/pursue permanency alternative, and 14% had a final recommendation to return home.
- Workers overrode the initial permanency recommendation for children in 1,118 placement episodes (14%). About 44% (493, not shown) of overrides switched the permanency recommendation from return home to continue services, and an additional 34% (376, not shown) switched the permanency recommendation from continue services to terminate services/ pursue permanency alternative.

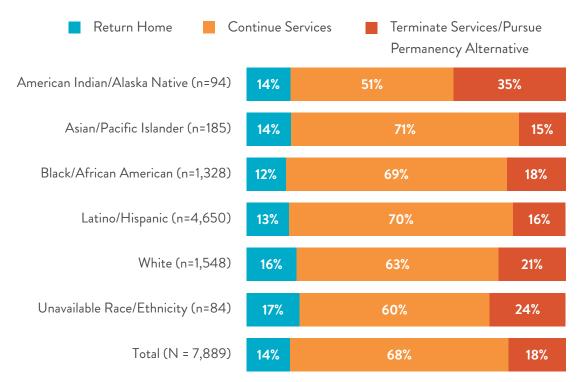
CONNECTING DATA TO PRACTICE

Almost one in five (18%) placement episodes involved children who were recommended to terminate FR services/pursue permanency alternative on their first reunification assessment within nine months of FR services starting. How can visitation, safety planning, and progress toward case plan goals be strengthened earlier in FR services in a way that could support a safe return home or continuation of reunification services beyond the first review period? How might the updated policy regarding timely completion of the reunification assessment allow for families to "course correct" in time for their review and permanency hearings, and how might this impact reunification and permanency outcomes? The new policy for reunification assessment completion within six months of the child's placement episode removal date will challenge workers to engage with families in this important work earlier in the placement episode than under the prior policy. How can CDSS assist counties to achieve this work?

The permanency plan recommendation was overridden in 14% of placement episodes, which is higher than the typical override rate for SDM assessments. Most overrides were used to change the permanency decision or goal away from reunification (e.g., from return home to continue services or continue services to terminate services/pursue permanency alternative). CDSS could review the use of permanency plan recommendation overrides and whether they were applied appropriately.



THE DATA: SDM REUNIFICATION ASSESSMENT FINAL RECOMMENDATION BY CHILD RACE/ETHNICITY





TAKEAWAYS

- Placement episodes involving White children had the highest rate of the "return home" final
 recommendation (16%), and placement episodes involving Black/African American children had
 the lowest rate of the "return home" final recommendation (12%) on their first SDM reunification
 assessment within nine months of FR services starting (excluding unavailable).
- The final recommendation of the first reunification assessment for 35% of placement episodes involving American Indian/Alaska Native children was to terminate FR services/pursue permanency alternative. This was the final recommendation for 21% or less of placement episodes involving children in other race/ethnicity groups (excluding unavailable). Note that the unavailable race/ethnicity and American Indian/Alaska Native race/ethnicity groups represent a small number of placement episodes, and findings could be influenced by small fluctuations.



OPPORTUNITIES

Reunification assessment final recommendations varied by race/ethnicity. What might account for these differences? What are the implications for children and families in situations in which the first reunification assessment recommends that FR services be terminated/an alternative permanency option is pursued? CDSS may wish to further explore these findings by examining what happened to children after completion of the reunification assessment. Did workers' actions align with the reunification assessment recommendation? How can strengthening timely completion of the assessment support workers to get children home safely and sooner?

Placement episodes involving American Indian/
Alaska Native children had the second lowest
completion rate of the SDM reunification
assessment within nine months of FR services
starting (see <u>The Data: 2023 Reunification</u>
Assessment Completion Within Nine Months by
Child Race/Ethnicity) and the highest rate of
the "terminate services/pursue permanency
alternative" recommendation across all race/
ethnicity groups. How can CDSS encourage
counties to engage in collaborative work and
decision making with tribes, especially to support
children and families in the reunification process?

SDM RISK REASSESSMENT



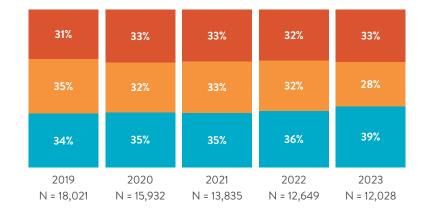
POLICY & PRACTICE GUIDFLINES

The SDM risk reassessment should be completed for all open cases in which all children remain in the home, or for cases in which all children have returned home and are in FM services. It should be completed prior to each Division 31-required review, which occurs at least once every six months. The risk reassessment guides a worker's decision to keep the case open or to close the case: cases involving children from families assessed as low or moderate risk should be closed as long as there are no unresolved safety threats, and cases involving children from families assessed as high or very high risk are recommended to continue.

This analysis focuses on children in FM cases beginning in each year and shows the time from the start of the child's FM services to the completion of their first risk reassessment. Analysis was limited to cases in FM services for at least nine months or for the entirety of the case if it was open less than nine months.

THE DATA: RISK REASSESSMENT TIME-TO-COMPLETION TREND

- After 9 Months/Not Completed
- 6-9 Months
- Within 6 Months





TAKEAWAYS

- The number of children in new cases starting in FM services decreased over the past five years.
- Over the five years observed, the within-nine-months completion rate was relatively steady while the within-six-months completion rate gradually increased from 34% for new FM cases starting in 2019 to 39% for new FM cases starting in 2023.
- Within-nine-months completion rates varied from 11% to 91% across counties with 25 or more new FM cases in 2023 (not shown; see County-Level Data Report).

CONNECTING DATA TO PRACTICE

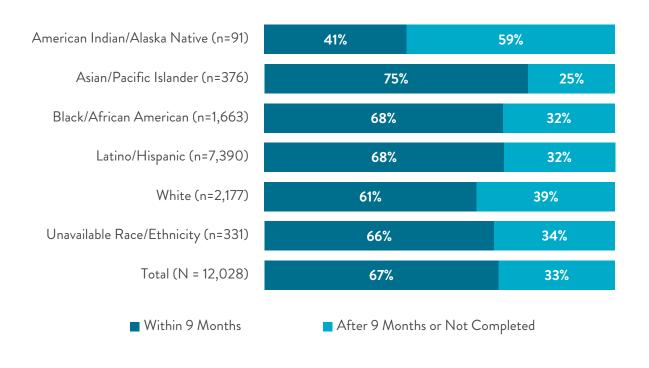
The within-six-months completion rate of the risk reassessment increased for new FM cases beginning in 2023. However, this trend did not carry to the within-nine-months completion rate, which remained consistent over the five years observed. What might account for the increase in within-six-months completion rates, and how can CDSS help counties to build momentum in continuing this trend?

When the risk reassessment is not used, what critical information might workers be missing when making decisions related to continuing or closing FM services, and how might this impact children, families, and agency resources? When the risk reassessment is not used, how are decisions about continuing or closing FM services made, and are there concerns that these decisions are being made inconsistently for families with similar circumstances?



THE DATA: 2023 RISK REASSESSMENT COMPLETION WITHIN NINE MONTHS BY CHILD RACE/ETHNICITY

In 2023, 12,028 cases began in FM services. The children in these cases received FM services for at least nine months or for the entirety of the case if it was open less than nine months.





OPPORTUNITIES

Completion rates of the risk reassessment within nine months of FM services starting varied by child race/ethnicity. Given the low completion rate for cases involving American Indian/Alaska Native children, it is worth reflecting on what might be getting in the way of completing the risk reassessment for families of American Indian/ Alaska Native children. What other factors may explain the variation in completion rates by child race/ethnicity (e.g., county-level practices)? How does completion of the risk reassessment relate to timely case closure for children receiving FM services? Low or varying completion rates hinder the ability to review and understand differences in risk reassessment results across race/ethnicity groups.



TAKEAWAYS

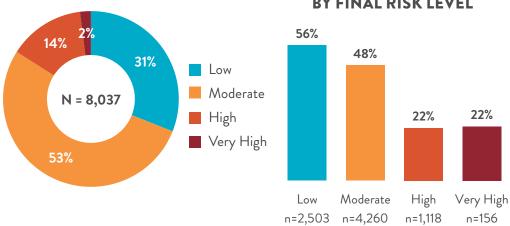
Cases involving Asian/Pacific Islander children had the highest within-nine-months risk reassessment completion rate (75%) while cases involving American Indian/Alaska Native children had the lowest completion rate (41%) among the race/ethnicity groups. This is similar to the pattern observed for children involved in new FM cases starting in 2022 (not shown). Note that American Indian/Alaska Native children represent a small number of cases, and findings can be influenced by small fluctuations.



THE DATA: FIRST RISK REASSESSMENT



CASE CLOSE WITHIN 90 DAYS BY FINAL RISK LEVEL



O.

CONNECTING DATA TO PRACTICE

SDM policy recommends that cases involving children from families assessed as low or moderate risk with no outstanding safety threats be closed. Based on the case closure rates within 90 days of the risk reassessment by risk reassessment final risk level, it appears that workers often did not follow the recommendation from the first risk reassessment completed during a child's FM case. Large proportions of cases involving children from families assessed as low or moderate risk remained open for at least another 90 days, even when the family's recent safety decision was safe. What are the impacts on children, families, and agency resources when low- and moderate-risk cases with no safety threats present remain open?

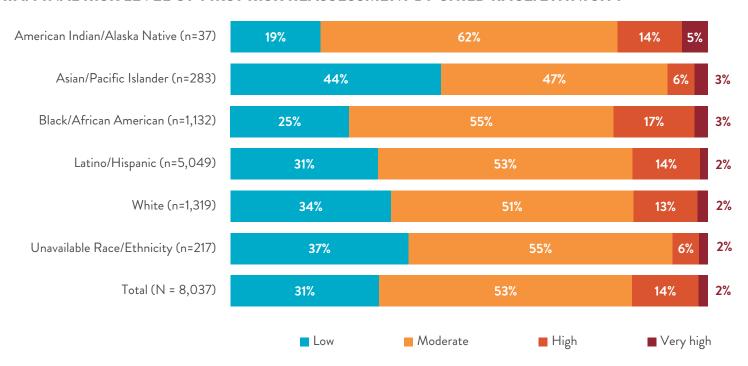
Over one in five cases involving children from families assessed as high or very high risk closed within 90 days of the first risk reassessment, many with no additional risk reassessments documenting a risk level of low or moderate. How are workers making the decision to close these cases, and how are families supported to not return to child welfare for abuse or neglect concerns in the future?



- Of the cases involving children from families with a risk reassessment completed within nine months, 84% (6,763) were assessed as low or moderate risk.
- Overall, 525 cases (7%, not shown) with a completed risk reassessment had a risk level override. Most (84% or 443, not shown) overrides were discretionary, and 80% (420, not shown) of all overrides were used to increase the risk level.
- Cases for children in families assessed as low or moderate risk on their first risk reassessment closed within 90 days of the reassessment at higher rates compared with cases for children from families assessed as high or very high risk. There were 3,320 (49%, not shown) cases involving children from families assessed as low or moderate risk that did not close within 90 days; of these, 779 (23%) had a safety assessment completed within 30 days before or after the initial risk reassessment, and 115 (3%, not shown) had such a safety assessment documenting outstanding safety threats (i.e., safe with plan or unsafe).
- Of the 279 cases closed within 90 days of the first risk reassessment with a high or very high risk level on the risk reassessment, 82 (29%) had an additional risk reassessment completed prior to case closure, and 197 (71%) had no new risk reassessment (not shown). Of those with an additional risk reassessment, 41 reflected a low or moderate risk reassessment level, and 41 only had an additional risk reassessment with a high or very high risk level (not shown). It is unknown why cases with no subsequent low or moderate risk reassessment were closed.



THE DATA: FINAL RISK LEVEL OF FIRST RISK REASSESSMENT BY CHILD RACE/ETHNICITY





TAKEAWAYS

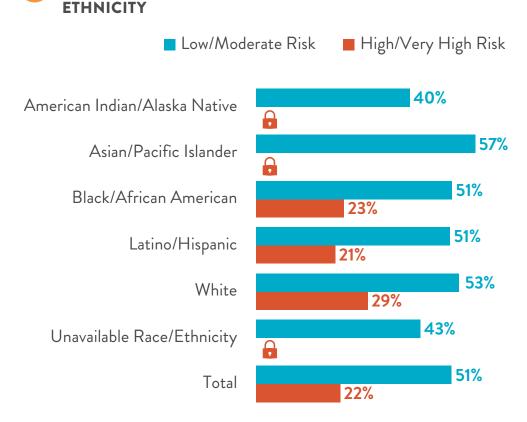
Cases involving Asian/Pacific Islander children were from families assessed as low or moderate risk at the highest rate (92%), and cases involving Black/African American children were from families assessed as low or moderate risk at the lowest rate (80%) among the race/ethnicity groups (excluding unavailable). Note that cases involving American Indian/Alaska Native children represent a small number of cases, and findings can be influenced by small fluctuations.

CONNECTING DATA TO PRACTICE

The risk reassessment risk level distribution varied by child race/ethnicity. To what extent is this variance impacted by differing completion rates of the risk reassessment by race/ethnicity? CDSS could further explore the variation by examining how item selection or application of risk level overrides on the risk reassessment differs by child race/ethnicity.



THE DATA: CASE CLOSE WITHIN 90 DAYS BY FINAL RISK LEVEL OF FIRST RISK REASSESSMENT AND CHILD RACE/





OPPORTUNITIES

There was variation in the rates at which risk reassessment case closure guidelines were followed by child race/ethnicity. For example, low/moderate-risk case closure guidance was followed at a higher rate for FM cases involving Asian/Pacific Islander children from families assessed as low or moderate risk on their first risk reassessment (i.e., cases were closed within 90 days at a higher rate) compared with cases involving children from other race/ethnicity groups from families assessed as low or moderate risk. What might account for these differences, and how might this impact outcomes for children and families?

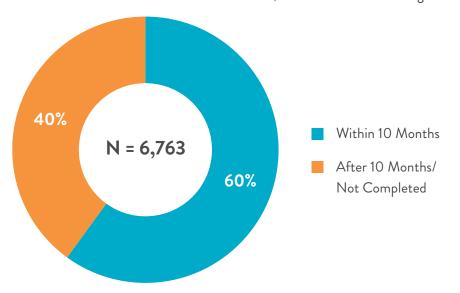


- Case closure rates within 90 days of the risk reassessment were higher for children from families assessed as low or moderate risk than for children from families assessed as high or very high risk on the first risk reassessment across all race/ethnicity groups.
- ethnicity information from families assessed as low or moderate risk on the first risk reassessment, cases involving Asian/Pacific Islander children closed within 90 days at the highest rate (57%), and cases involving American Indian/Alaska Native children closed within 90 days at the lowest rate (40%). Note that cases involving American Indian/Alaska Native children represent a small number of cases, and findings can be influenced by small fluctuations.
- For cases involving children from families assessed as high or very high risk on the first risk reassessment, cases involving White children had the highest rate of case closure within 90 days (29%), and cases for Latino/Hispanic children had the lowest rate of case closure within 90 days (21%). There were fewer than 25 cases for American Indian/Alaska Native children, Asian/Pacific Islander children, or children with unavailable race/ethnicity information from families assessed as high or very high risk; results for those groups are not shown.



THE DATA: SAFETY ASSESSMENT COMPLETION FOR LOW- AND MODERATE-RISK CASES

Per SDM recommendation, cases assessed as low or moderate risk on the risk reassessment should be considered for case closure unless outstanding safety threats exist. A case will not be closed if household safety threats are present. The analysis examined safety assessment completion for the 6,763 cases with low or moderate risk on their first risk reassessment, which were therefore eligible for case closure.





TAKEAWAYS

- Only 60% (4,074) of cases involving children from families assessed as low or moderate on their first risk reassessment had a safety assessment completed within 10 months of FM services starting. This safety assessment completion rate fluctuated from 58% to 61% over the past four years.
- For cases with a safety assessment completed within 10 months of FM services starting, 70% had a safety assessment conducted within 30 days before or after the first risk reassessment (not shown). This rate decreased for children involved in new FM cases from families assessed as low or moderate risk on their first risk reassessment from 2019 to 2023 (76% in 2019, 73% in 2020 and 2021, 71% in 2022, and 70% in 2023; not shown).



According to SDM risk reassessment case closure policy, cases involving children from families assessed as low or moderate risk should be assessed for safety to identify if there are any existing safety threats before considering case closure. It appears that this guidance is not being widely followed; 40% of cases involving children from families assessed as low or moderate risk on their first risk reassessment had no safety assessment completed within 10 months of their FM services starting, and of the cases in which a safety assessment was identified within the 10-month window, just 70% were within 30 days of the first risk reassessment. How might the low rate of safety assessment completion relate to the timely case closure rates for cases involving children from families assessed as low or moderate risk? And does the low safety assessment completion rate get in the way of closing cases in which the child's family is assessed as low or moderate risk on the risk reassessment? What guidance has CDSS provided to the counties about assessing safety prior to case closure? What additional supports or guidance can be offered to help counties close cases when the family is assessed as low or moderate risk and any remaining safety threats are managed with a safety plan? What training and guidance is offered to ensure practitioners understand how the risk reassessment and closing safety assessment can be used to guide decisions when they are considering closing a case?





ABOUT EVIDENT CHANGE

Evident Change is a nonprofit that uses data and research to improve our social systems. For more information, call (800) 306-6223 or visit EvidentChange.org. You can also find us on social media by visiting Linktr.ee/EvidentChange.

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APPENDIX A: METHODS FOR IDENTIFYING RACE/ETHNICITY

For the purposes of this analysis, Evident Change used the primary ethnicity type and Hispanic origin recorded in the Child Welfare Services/Case Management System (CWS/CMS) for each child to define the race/ethnicity of referred families or children in cases.¹ Evident Change used a method employed by University of California, Berkeley California Child Welfare Indicators Project to consider both primary ethnicity and the Hispanic origin indicator. This method considers individuals Latino/Hispanic when Hispanic origin is indicated, regardless of the recorded primary ethnicity type.²

Note that this approach is not without limitations. For example, if a child's client record indicates that they are of Hispanic origin, they will be classified as Latino/ Hispanic regardless of the primary ethnicity recorded. Therefore, certain races/ ethnicities that commonly present in conjunction with the Hispanic origin indicator could be underrepresented (e.g., American Indian/Alaska Native). These limitations should be considered when interpreting results. Additionally, only the child's primary ethnicity type was considered for the analysis; secondary race/ ethnicity information was not used.

Race/ethnicity was defined using two different methods, depending on whether the focus of the analysis was cases/clients or referrals/investigations/families.

¹Primary ethnicity type and Hispanic origin are the specific names of variables recorded in CWS/CMS. The Hispanic origin variable contains the information on a child's Latino/Hispanic ethnicity.



² For more information, visit https://ccwip.berkeley.edu/

CASE- AND CHILD-BASED **ANALYSES**

For case-based and child-based analyses, Evident Change used the primary ethnicity type and Hispanic origin code information combinations outlined below to define race/ ethnicity.

REFERRAL-, INVESTIGATION-, AND **FAMILY-BASED ANALYSES**

For referral-, investigation-, and family-based analyses, the family's race/ethnicity was defined by examining the primary ethnicity type and Hispanic origin code recorded in CWS/CMS for all alleged child victims on the referral/investigation. Each child was first categorized by race/ethnicity as described below. For analysis purposes, the family's race/ethnicity was then assigned using the races/ethnicities of all children on the referral/investigation. When children on a single referral/investigation had races/ethnicities that differed from each other, the family was defined as having multiple races/ethnicities within the household.

CASE- AND CHILD-BASED RACE/ETHNICITY **DEFINITIONS**

Hispanic origin code

is "Yes" OR primary

Hispanic

Central

Mexican

South

Carribean

American

American

ethnicity type is:

code is "No" or type is:

Hispanic origin "Unknown" AND primary ethnicity

- Asian Indian
- Cambodian
- Chinese
- Filipino
- Guamanian
- Hawaiian
- Hmong
- Japanese
- Korean
- Laotian
- Polynesian
- Samoan
- Vietnamese
- Other Asian
- Other Pacific Islander
- Other Asian/ Pacific Islander

Asian/ Pacific Islander

- Black
- Ethiopian

Black/ African American

Note: "American Indian/Alaska Native" matches the federal government's category label. Past SDM management reports used "American Indian/Alaskan Native" for the same group, as recorded in CWS/CMS. Additionally, past reports used "Unable to Determine/ Missing" for "Unavailable Race/Ethnicity."

- White
- White-Armenian
- White-Central American
- White-European
- White-Middle Eastern
- White-Romanian

White

- Unable to determine
- Decline to state
- Other race unknown
- Invalid codes (such as 0)
- Children for whom ethnicity is not coded

Unavailable Race/ Ethnicity

Latino/ Hispanic

- Alaskan Native
- American Indian

American Indian/ Alaska Native

APPENDIX B: DATA TABLES

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FINAL IN-PERSON RESPONSE RATE

YEAR	LOWER RANGE	UPPER RANGE	CALIFORNIA
2021	25%	89%	58%
2022	23%	82%	56%
2023	24%	88%	53%
2024	16%	84%	50%

SAFETY ASSESSMENT COMPLETION RATES

YEAR	ALLEGATION HOUSEHOLD	ONLY NON-ALLEGATION HOUSEHOLD	NOT COMPLETED
2023	86%	8%	5%
2024	92%	2%	6%

SAFE WITH PLAN AND CHILD PLACEMENT

YEAR	CHILD PLACEMENT
2023	13%
2024	10%

POST-INVESTIGATION SERVICE RATES BY RISK LEVEL AND SAFETY DECISION

RISK LEVEL AND SAFETY DECISION	OPEN FOR CWS CASE	REFER TO SERVICES AS PRIMARY INTERVENTION
Low/Moderate Risk and Safe	1%	29%
High/Very High Risk and Safe	12%	33%
Safe With Plan and Any Risk Level	35%	31%

REUNIFICATION ASSESSMENT COMPLETION WITHIN NINE MONTHS BY CHILD RACE/ETHNICITY

RACE/ETHNICITY	2023	2022
American Indian/Alaska Native	46%	35%
Asian/Pacific Islander	48%	38%
Black/African American	49%	49%
Latino/Hispanic	52%	49%
White	45%	40%
Unavailable Race/Ethnicity	51%	40%
Total	50%	47%

LOW/MODERATE-RISK CASES NOT CLOSED WITHIN 90 DAYS AND PRESENCE OF SAFETY THREATS

CASE CLOSE	PERCENTAGE		
Not Closed Within 90 Days	49%; 3% of cases that did not close had outstanding safety threats		
Closed Within 90 Days	51%		

RACE/ETHNICITY OF REFERRED FAMILIES

ACTION	American Indian/ Alaska Native	Asian/ Pacific Islander	Black/African American	Latino/ Hispanic	Multiple Races/ Ethnicities	White	Unavailable Race/Ethnicity
Referrals	0.8%	4%	12%	47%	3%	23%	10%
Investigations	0.8%	4%	13%	50%	4%	22%	7%
Investigations Resulting in a Child Entering Placement	1.1%	3%	17%	50%	5%	23%	2%

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COMPLETION RATES

YEAR	HOTLINE	SAFETY	RISK
2020	98%	87%	95%
2021	98%	85%	95%
2022	98%	85%	95%
2023	99%	86%	95%
2024	98%	92%	95%

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SAFETY ASSESSMENT COMPLETION ON ALLEGATION AND NON-ALLEGATION HOUSEHOLDS (N = 165,576)

SAFETY ASSESSMENT COMPLETION ON ALLEGATION AND NON ALLEGATION HOUSEHOLDS	PERCENTAGE
Allegation Household Safety Assessment	92%
Non-Allegation Household Safety Assessment Only	2%
No Safety Assessment	6%

RISK ASSESSMENT COMPLETION ON UNFOUNDED INVESTIGATIONS (N = 62,803)

76%

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FINAL SCREENING DECISION: IN-PERSON RESPONSE

YEAR	N	LOWER RANGE	UPPER RANGE	CALIFORNIA
2020	327,647	30%	85%	58%
2021	357,763	25%	89%	58%
2022	389,593	23%	82%	56%
2023	397,209	24%	88%	53%
2024	394,007	16%	84%	50%

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FINAL RESPONSE PRIORITY: WITHIN 24 HOURS

YEAR	N	LOWER RANGE	UPPER RANGE	CALIFORNIA
2020	187,763	11%	52%	25%
2021	202,221	10%	49%	24%
2022	215,680	8%	46%	24%
2023	207,582	9%	43%	23%
2024	193,117	9%	46%	24%

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2024 SCREENING TOOL RESULTS BY REFERRED FAMILY RACE/ETHNICITY

RACE/ETHNICITY	N for Race/ Ethnicity	In-Person Response: Initial	In-Person Response: Final	N For Screening Override	Screening Override to In-Person Response	Screening Override to Evaluate Out
American Indian/Alaska Native	3,186	50%	48%	2,886	2.2%	3.6%
Asian/Pacific Islander	17,018	50%	47%	15,624	0.6%	3.1%
Black/African American	47,638	56%	54%	43,498	1.3%	2.9%
Latino/Hispanic	185,225	55%	52%	168,104	0.9%	3.8%
Multiple Races/Ethnicities	10,220	71%	69%	9,509	1.0%	2.7%
White	90,103	49%	47%	81,660	1.0%	3.5%
Unavailable Race/Ethnicity	40,617	42%	37%	38,248	0.8%	6.1%
Total	394,007	52%	50%	359,529	1.0%	3.8%

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2024 RESPONSE PRIORITY TOOL RESULTS BY REFERRED FAMILY RACE/ETHNICITY

RACE/ETHNICITY	N	24-Hour Response: Initial	24-Hour Response: Final	Response Priority Override to 24 Hours	Response Priority Override to 10 Days
American Indian/Alaska Native	1,474	27%	27%	2.2%	2.5%
Asian/Pacific Islander	7,937	28%	25%	2.0%	5.0%
Black/African American	25,280	30%	28%	2.5%	4.5%
Latino/Hispanic	94,881	25%	24%	2.3%	4.0%
Multiple Races/Ethnicities	6,967	28%	26%	2.6%	4.1%
White	41,681	25%	24%	2.3%	3.3%
Unavailable Race/Ethnicity	14,897	21%	20%	2.3%	3.1%
Total	193,117	26%	24%	2.3%	3.9%

SDM SAFETY ASSESSMENT RESULTS

YEAR/N	N	SAFE	SAFE WITH PLAN	UNSAFE
2020	151,456	81%	14%	6%
2021	154,662	82%	13%	5%
2022	157,610	83%	12%	5%
2023	152,485	84%	84% 11%	
2024	153,129	84%	11%	5%

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2024 SAFETY ASSESSMENT RESULTS BY INVESTIGATED FAMILY RACE/ETHNICITY

RACE/ETHNICITY	N	SAFE	SAFE WITH PLAN	UNSAFE
American Indian/Alaska Native	1,143	81%	10%	9%
Asian/Pacific Islander	6,748	86%	10%	3%
Black/African American	18,984	82%	11%	7%
Latino/Hispanic	76,452	83%	12%	5%
Multiple Races/Ethnicities	5,556	82%	12%	6%
White	33,138	85%	10%	5%
Unavailable Race/Ethnicity	11,108	88%	11%	2%
Total	153,129	84%	11%	5%

FINAL RISK LEVEL

YEAR	N	LOW	MODERATE	HIGH	VERY HIGH
2020	98,548	16%	45%	29%	10%
2021	98,158	18%	46%	27%	10%
2022	97,610	18%	47%	26%	9%
2023	95,590	19%	48%	25%	9%
2024	89,018	19%	48%	25%	8%

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2024 RISK ASSESSMENT RESULTS BY INVESTIGATED FAMILY RACE/ETHNICITY

RACE/ETHNICITY	N	INITIAL AND FINAL LOW/MODERATE	INITIAL LOW/MODERATE AND FINAL HIGH/VERY HIGH	INITIAL AND FINAL HIGH/VERY HIGH
American Indian/Alaska Native	615	51%	2%	48%
Asian/Pacific Islander	3,629	83%	4%	13%
Black/African American	11,660	59%	3%	38%
Latino/Hispanic	45,488	66%	4%	30%
Multiple Races/Ethnicities	3,461	51%	3%	46%
White	18,259	67%	3%	30%
Unavailable Race/Ethnicity	5,906	90%	2%	9%
Total	89,018	67%	3%	30%

PLACEMENT BY INITIAL SAFETY DECISION

SAFETY DECISION	N	PLACEMENT	NO PLACEMENT: ALL CHILDREN ALREADY PLACED	NO PLACEMENT
Safe	128,278	2%	N/A	98%
Safe With Plan	17,300	10%	N/A	90%
Unsafe	7,551	82%	2%	16%
No Safety Assessment on Allegation Household	12,447	5%	N/A	95%

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SUBSEQUENT SAFETY ASSESSMENT

INITIAL SAFETY ASSESSMENT RESULT	N	SUBSEQUENT SAFETY ASSESSMENT RESULT	PERCENTAGE
Safe or Safe With Plan With Child Placement	3,931	Unsafe	29%
Unsafe With No Child Placement	1,219	Safe or Safe With Plan	28%

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PLACEMENT RATES BY INITIAL SAFETY DECISION AND INVESTIGATED FAMILY RACE/ETHNICITY

INITIAL SAFETY DECISION	American Indian/ Alaska Native	Asian/Pacific Islander	Black/African American	Latino/ Hispanic	Multiple Races/ Ethnicities	White	Unavailable Race/Ethnicity
No Safety Assessment on Allegation Household	6%	3%	6%	5%	9%	6%	2%
Unsafe	73%	82%	83%	82%	84%	83%	72%
Safe With Plan	13%	6%	12%	10%	10%	10%	3%
Safe	2.2%	0.8%	2.7%	1.8%	2.4%	1.7%	0.3%

PREVALENCE OF RISK LEVEL AND SAFETY DECISION COMBINATIONS

RISK LEVEL AND SAFETY DECISION	N	%
Low/Moderate Risk and Safe	89,685	70%
Low/Moderate Risk and Safe With Plan	4,758	4%
Low/Moderate Risk and Unsafe	1,161	1%
High/Very High Risk and Safe	23,382	18%
High/Very High Risk and Safe With Plan	3,903	3%
High/Very High Risk and Unsafe	5,720	4%

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POST-INVESTIGATION SERVICE RATES BY RISK LEVEL AND SAFETY DECISION

SERVICES PROVIDED	SAFE AND LOW/MODERATE RISK (N=89,685)	SAFE AND HIGH/VERY HIGH RISK (N=23,382)	SAFE WITH PLAN AND LOW/MODERATE RISK (N=4,758)	SAFE WITH PLAN AND HIGH/VERY HIGH RISK (N=3,903)	UNSAFE AND LOW/MODERATE RISK (N=1,161)	UNSAFE AND HIGH/VERY HIGH RISK (N=5,720)
Refer to Services as Primary Intervention	29%	33%	39%	20%	4%	1%
Open for CWS Case	1%	12%	15%	60%	87%	97%

POST-INVESTIGATION SERVICES RATES BY INVESTIGATION CONCLUSION

SERVICES PROVIDED	SUBSTANTIATED (N=24,220)	INCONCLUSIVE (N=58,602)	UNFOUNDED (N=45,787)
Refer to Services as Primary Intervention	22%	35%	23%
Open for CWS Case	52%	1%	<1%

RACE/ETHNICITY OF CHILDREN INVOLVED IN INVESTIGATIONS AND CASES

TYPE OF INVOLVEMENT	American Indian/ Alaska Native	Asian/Pacific Islander	Black/African American	Latino/ Hispanic	White	Unavailable Race/Ethnicity
Involved in Investigations	0.7%	4%	12%	52%	21%	10%
New Placement Episodes With FR Services	1.3%	2%	17%	56%	22%	1%
New FM Cases	0.8%	3%	14%	61%	18%	3%

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SUBSEQUENT MALTREATMENT INVESTIGATION BY ALLEGATION CONCLUSION

SUBSTANTIATED (N = 33,992)	INCONCLUSIVE (N=119,467)	UNFOUNDED (N=115,528)
20%	24%	21%

SUBSEQUENT MALTREATMENT INVESTIGATION BY INITIAL RISK LEVEL

NO RISK ASSESSMENT (N = 38,917)	LOW/MODERATE (N=177,305)	HIGH/VERY HIGH (N=52,765)
21%	19%	34%

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SUBSEQUENT SUBSTANTIATED MALTREATMENT INVESTIGATION BY ALLEGATION CONCLUSION

SUBSTANTIATED (N=33,992)	INCONCLUSIVE (N=119,467)	UNFOUNDED (N=115,528)
6%	6%	3%

SUBSEQUENT SUBSTANTIATED MALTREATMENT INVESTIGATION BY INITIAL RISK LEVEL

NO RISK ASSESSMENT (N=38,917)	LOW/MODERATE (N=177,305)	HIGH/VERY HIGH (N=52,765)
5%	4%	9%

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SUBSEQUENT INVESTIGATION BY CHILD RACE/ETHNICITY

RACE/ETHNICITY	N	PERCENTAGE
American Indian/Alaska Native	1,638	29%
Asian/Pacific Islander	9,892	14%
Black/African American	27,486	27%
Latino/Hispanic	119,984	23%
White	47,080	23%
Unavailable Race/Ethnicity	23,990	9%
Total/Base Rate	230,070	22%

SUBSEQUENT INVESTIGATION BY CHILD RACE/ETHNICITY AND SDM RISK LEVEL

RACE/ETHNICITY	LOW/MODERATE	FINAL HIGH/VERY HIGH
American Indian/Alaska Native	25%	39%
Asian/Pacific Islander	13%	28%
Black/African American	22%	36%
Latino/Hispanic	20%	34%
White	20%	34%
Unavailable Race/Ethnicity	9%	17%
Total/Base Rate	19%	34%

SDM REUNIFICATION ASSESSMENT TIME-TO-COMPLETION TREND

YEAR	N	AFTER 9 MONTHS/NOT COMPLETED	6-9 MONTHS	WITHIN 6 MONTHS
2019	23,784	55%	29%	16%
2020	20,418	57%	26%	17%
2021	19,017	54%	27%	19%
2022	17,689	53%	22%	25%
2023	15,817	50%	19%	31%

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2023 REUNIFICATION ASSESSMENT COMPLETION WITHIN NINE MONTHS BY CHILD RACE/ETHNICITY

RACE/ETHNICITY	N	WITHIN 9 MONTHS	AFTER 9 MONTHS/NOT COMPLETED
American Indian/Alaska Native	204	46%	54%
Asian/Pacific Islander	387	48%	52%
Black/African American	2,718	49%	51%
Latino/Hispanic	8,932	52%	48%
White	3,411	45%	55%
Unavailable Race/Ethnicity	165	51%	49%
Total/Base Rate	15,817	50%	50%

SCORED RISK LEVEL (N = 7,889)

LOW	MODERATE	HIGH	VERY HIGH
4%	26%	35%	35%

CASE PLAN PROGRESS

POINTS	DESCRIPTION	PERCENTAGE
4	Does not demonstrate new skills and behaviors consistent with case plan objectives and/or refuses engagement	32%
0	Minimally demonstrates new skills and behaviors consistent with case plan objectives and/or has been inconsistently engaged in obtaining the objectives specified in the case plan	30%
-1	Demonstrates some new skills and behaviors consistent with family case plan objectives and actively engaged in activities to achieve objectives	28%
-2	Demonstrates new skills and behaviors consistent with all family case plan objectives and actively engaged to maintain objectives	10%

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VISITATION COMPLIANCE BY FINAL RISK LEVEL

RISK	FREQUENCY AND QUALITY	FREQUENCY ONLY	QUALITY ONLY	NEITHER
High/Very High Risk (n=5,599)	51%	8%	9%	32%
Low/Moderate Risk (n=2,290)	86%	4%	4%	6%

SAFETY DECISION FOR ACCEPTABLE RISK AND VISITATION (N = 1,882)

SAFE	SAFE WITH PLAN	UNSAFE
70%	13%	17%

SDM REUNIFICATION ASSESSMENT—FINAL RECOMMENDATION (N = 7,889)

RETURN HOME	CONTINUE SERVICES	TERMINATE SERVICES/PURSUE PERMANENCY ALTERNATIVE
14%	68%	18%

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SDM REUNIFICATION ASSESSMENT FINAL RECOMMENDATION BY CHILD RACE/ETHNICITY

RACE/ETHNICITY	N	RETURN HOME	CONTINUE SERVICES	TERMINATE SERVICES/PURSUE PERMANENCY ALTERNATIVE
American Indian/Alaska Native	94	14%	51%	35%
Asian/Pacific Islander	185	14%	71%	15%
Black/African American	1,328	12%	69%	18%
Latino/Hispanic	4,650	13%	70%	16%
White	1,548	16%	63%	21%
Unavailable Race/Ethnicity	84	17%	60%	24%
Total	7,889	14%	68%	18%

RISK REASSESSMENT TIME-TO-COMPLETION TREND

YEAR	N	AFTER 9 MONTHS/NOT COMPLETED	6-9 MONTHS	WITHIN 6 MONTHS
2019	18,021	31%	35%	34%
2020	15,932	33%	32%	35%
2021	13,835	33%	33%	35%
2022	12,649	32%	32%	36%
2023	12,028	33%	28%	39%

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2023 RISK REASSESSMENT COMPLETION WITHIN NINE MONTHS BY CHILD RACE/ETHNICITY

RACE/ETHNICITY	N	WITHIN 9 MONTHS	AFTER 9 MONTHS OR NOT COMPLETED
American Indian/Alaska Native	91	41%	59%
Asian/Pacific Islander	376	75%	25%
Black/African American	1,663	68%	32%
Latino/Hispanic	7,390	68%	32%
White	2,177	61%	39%
Unavailable Race/Ethnicity	331	66%	34%
Total	12,028	67%	33%

FINAL RISK LEVEL OF FIRST RISK REASSESSMENT (N = 8,037)

LOW	MODERATE	HIGH	VERY HIGH
31%	53%	14%	2%

CASE CLOSE WITHIN 90 DAYS BY FINAL RISK LEVEL OF FIRST RISK REASSESSMENT

LOW (N=2,503)	MODERATE (N=4,260)	HIGH (N=1,118)	VERY HIGH (N=156)
56%	48%	22%	22%

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FINAL RISK LEVEL OF FIRST RISK REASSESSMENT BY CHILD RACE/ETHNICITY

RACE/ETHNICITY	N	LOW	MODERATE	HIGH	VERY HIGH
American Indian/Alaska Native	37	19%	62%	14%	5%
Asian/Pacific Islander	283	44%	47%	6%	3%
Black/African American	1,132	25%	55%	17%	3%
Latino/Hispanic	5,049	31%	53%	14%	2%
White	1,319	34%	51%	13%	2%
Unavailable Race/Ethnicity	217	37%	55%	6%	2%
Total	8,037	31%	53%	14%	2%

CASE CLOSE WITHIN 90 DAYS BY FINAL RISK LEVEL OF FIRST RISK REASSESSMENT AND CHILD RACE/ETHNICITY

RACE/ETHNICITY	LOW/MODERATE RISK	HIGH/VERY HIGH RISK
American Indian/Alaska Native	40%	Not Shown; N<25
Asian/Pacific Islander	57%	Not Shown; N<25
Black/African American	51%	23%
Latino/Hispanic	51%	21%
White	53%	29%
Unavailable Race/Ethnicity	43%	Not Shown; N<25
Total	51%	22%

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SAFETY ASSESSMENT COMPLETION FOR LOW- AND MODERATE-RISK CASES (N = 6,763)

WITHIN 10 MONTHS	AFTER 10 MONTHS/NOT COMPLETED
60%	40%