



The Structured Decision Making[®] System in Child Welfare Services in California

Report Date: May 2020

Report Period:
January 1 – December 31, 2019

Five-Year SDM® Assessment Trends



Policy and Practice Guidelines

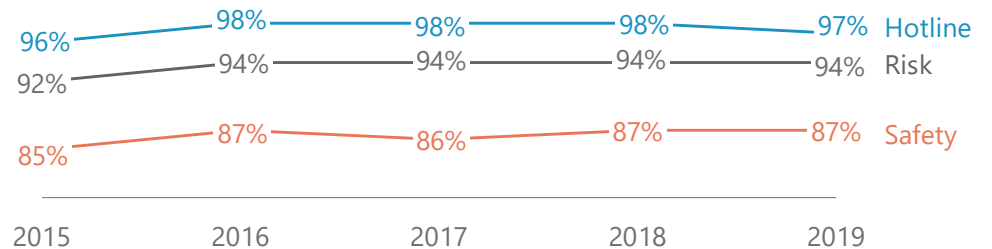
Hotline: The Structured Decision Making® (SDM) hotline tool, which includes multiple sections, must be used for all referrals recorded in the child welfare services case management system (CWS/CMS). The screening section helps workers decide whether referrals should be assigned in-person responses. If 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 in-person 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 determine the likelihood of subsequent system involvement. The SDM risk assessment is recommended to be completed at the end of every unfounded investigation.



The Data: Completion Rates



Takeaways

- Risk assessment completion rates include only substantiated and inconclusive investigations. In 2019, 69% of unfounded investigations had a risk assessment completed (not shown).
- Safety assessment completion rates include only assessments completed for allegation households (as recorded on the safety assessment). In 2019, an additional 8% of investigations had a non-allegation household safety assessment but no allegation household assessment (not shown).
- For 204,822 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 completed within two days after the first contact 79% of the time (not shown).



Connecting Data to Practice

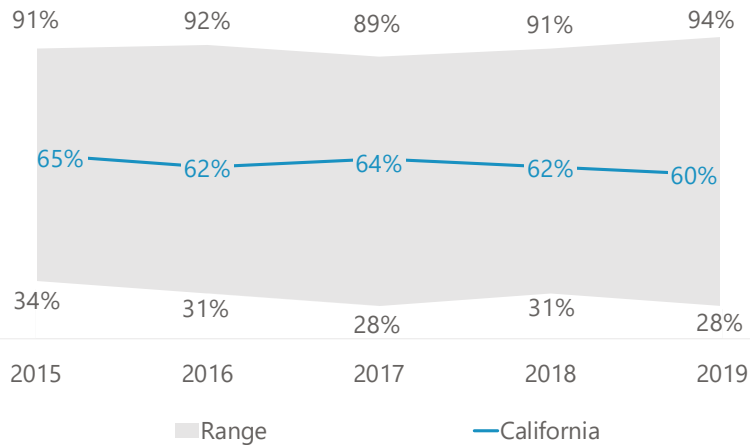
- The household on which allegations were made must be assessed for safety concerns. The California Department of Social Services (CDSS) may wish to work with county child welfare agencies to examine why some investigations did not have a safety assessment completed for the allegation household. For example, is there confusion on how to record this information? Are allegation households not being assessed? Or is some other issue present?
- SDM policy directs workers to enter the initial safety assessment into WebSDM within 48 hours after the first face-to-face contact to document the worker's assessment of immediate household safety. The initial safety assessment was completed more than two days after the first contact in 35,026 (17%) investigations, and an additional 7,807 (4%) assessments were completed before the first face-to-face contact. What could explain these trends? For instance, was a non-allegation household safety assessment completed within the recommended timeframe? Was a safety assessment pertaining to other household members completed prior to a face-to-face contact with an alleged victim? How can CDSS support counties in conducting and documenting timely safety assessments?



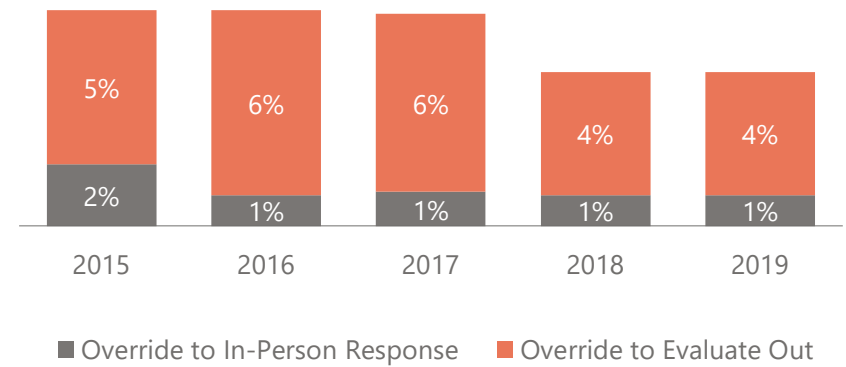
The Data: SDM® Hotline Tool Findings and Overrides

In 2019, 398,676 referrals had completed hotline tools.

Screening Decision: In-Person Response



Screening Decision Overrides



Note: Screening override decisions were made for the 368,246 referrals without preliminary screening items selected.



Takeaways

- The statewide screen-in rate has remained relatively stable with a slight decrease over the past three years. The percentage of screened-in referrals ranged between 28% and 94% across counties during 2019.
- The NCCD Children's Research Center (CRC) generally considers an override rate of about 5–10% for each assessment to be acceptable. In 2019, the screening decision override rate remained the same as in 2018 and fell within that range.



Connecting Data to Practice

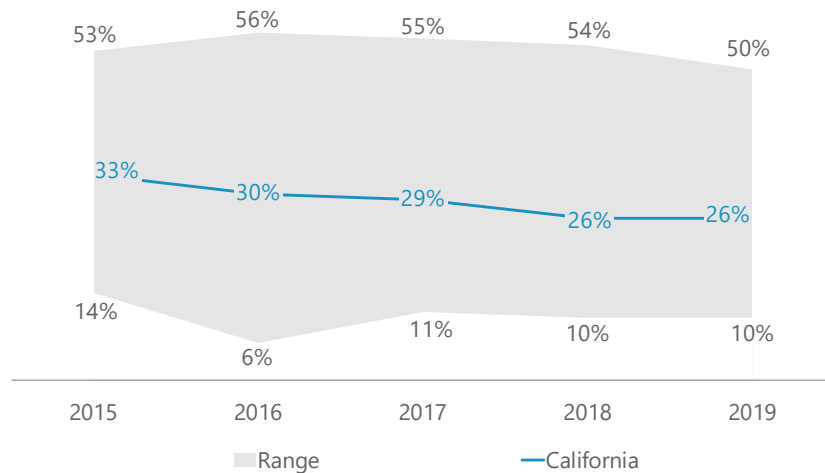
- What varying practices could explain the wide range in screen-in rates across counties? Do counties have similar policies related to which hotline calls are entered into CWS/CMS? Are county policies aligned with Division 31 regulations regarding the difference between an information and referral call and a referral that needs screening?
- Most screening overrides changed the screening decision to evaluate out. Quality reviews and supervisory oversight should be used to ensure that the decision to decrease the agency's response is warranted and that the reason for an override is adequately documented.



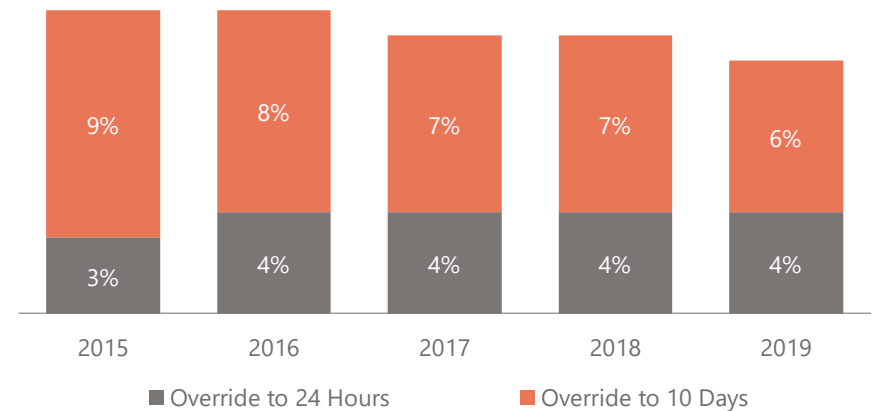
The Data: SDM® Response Priority Levels

Referrals with an initial and final recommendation for an in-person response (of which there were 233,240 in 2019) are eligible for the response priority section.

Response Priority: Within 24 Hours



Response Priority Overrides



Takeaways

- The statewide percentage of screened-in referrals assigned a 24-hour response priority in 2019 remained the same as in 2018; the 2019 rate ranged between 10% and 50% across counties. Note that there were changes to the SDM hotline tools in early 2018.
- The response priority override rate slightly decreased from 12% in 2015 to 10% in 2019, bringing it within the recommended range of 5–10%.



Connecting Data to Practice

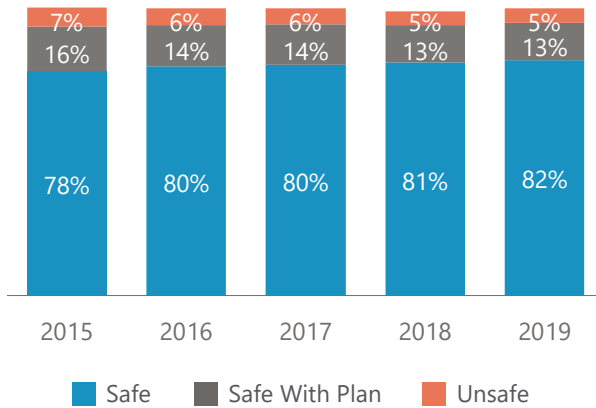
Response priority rates varied widely across California counties. The accompanying comparison data report can offer more insight into which counties are at the upper and lower ends of these ranges. CDSS could help county agency staff to examine why response times differ to ensure that counties appropriately respond to child protection reports, as differences in these rates may or may not relate to unique circumstances within each county. Based on the findings, CDSS could offer technical assistance, quality assurance, or training if needed.



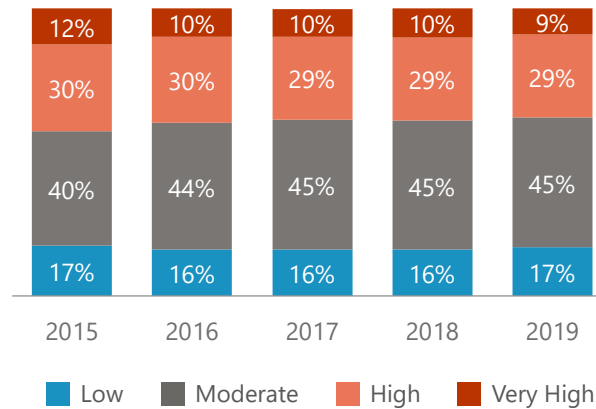
The Data: SDM® Safety and Risk Assessment Findings and Overrides

In 2019, 187,795 investigations had a safety assessment completed on the allegation household. Of substantiated or inconclusive investigations, 113,689 had a risk assessment completed.

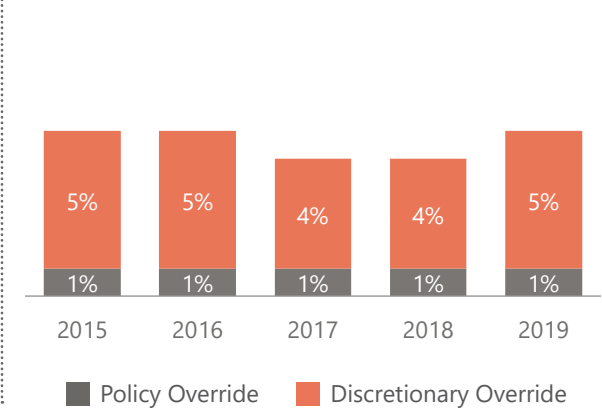
Safety Decision



Risk Level



Risk Level Overrides



Takeaways

- The proportion of households assessed as safe has increased slightly and steadily since 2015. The proportion of households initially assessed as safe with plan or unsafe during 2019 ranged between 8% and 65% (not shown) across all counties that had a completed safety assessment for at least 25 investigations.
- The percentage of families assessed as high or very high risk has been decreasing slightly and steadily for the last five years. In 2019, 39% of families statewide whose dispositions were substantiated or inconclusive were high or very high risk; across counties that had a completed risk assessment for at least 25 investigations, the percentage ranged between 24% and 65% (not shown).
- More detail regarding safety decisions and final risk levels across counties is available in the comparison data report. Note that revisions to the SDM safety and risk assessments were implemented in late 2015.
- Overrides to the SDM risk assessment increased slightly in 2019 and continued to fall within the recommended range.



Connecting Data to Practice

The proportion of investigated families that had identified safety threats or were assessed as high or very high risk varied widely across counties in 2019. The accompanying comparison data report can offer more insight into which counties are at the upper and lower ends of these ranges. CDSS could help county agency staff to examine differences in safety assessment findings and the most prevalent safety threats to better understand what unique issues families face in different counties. Similarly, CDSS can work with counties to examine differences in risk assessment profiles and resulting decisions based on risk assessment use. Based on the findings, CDSS could offer technical assistance, quality assurance, or training if needed.

SDM[®] Safety Assessment



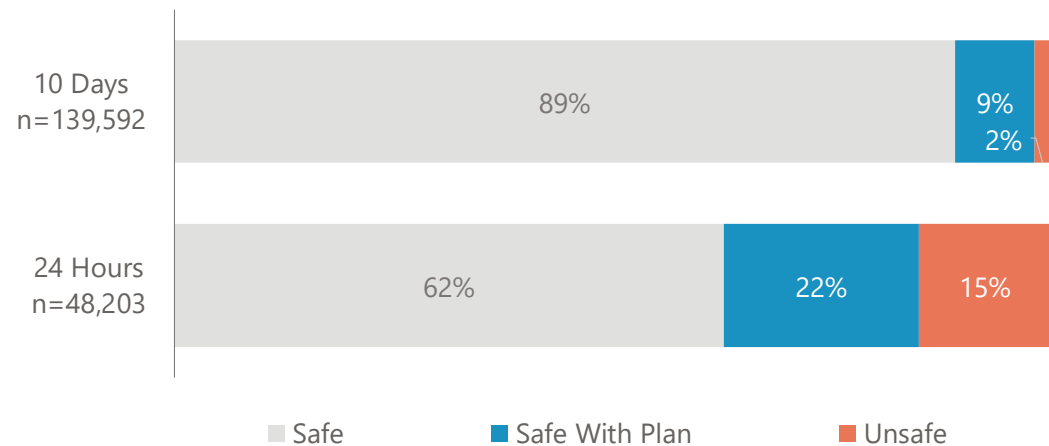
Policy and Practice Guidelines

The SDM safety assessment helps workers evaluate the presence of immediate danger of serious harm for any child in a family during the investigation. A safety assessment should be completed at the first face-to-face contact with a family and whenever circumstances change during the investigation. The SDM response priority recommendation from the hotline tool helps workers determine how quickly to initiate contact with the family. Both assessments measure aspects of immediate safety of children in the home; therefore, observing a relationship between the assessments' findings is expected. For example, CRC would expect a higher proportion of referrals with a 24-hour response to be subsequently assessed as unsafe or safe with plan compared with a 10-day response.



The Data: Initial Safety Decision by Response Priority

The analysis compares the initial SDM safety decision to the response priority recorded in CWS/CMS. For 180,464 investigations with a completed response priority section of the hotline tool, agreement between the response priority recorded in CWS/CMS and the final SDM response priority was 96%.



Takeaways

As expected, workers assessed a higher proportion (38%) of 24-hour response priority referrals as having at least one safety threat present than 10-day response priority referrals (11%). (The sum of the figure percentages does not add to 100% due to rounding.)



Connecting Data to Practice

Considering that safety threats are identified more frequently in 24-hour response investigations, CDSS should advise counties to prepare workers responding to these reports for the likely need to engage in safety planning or protective placement processes. Additionally, the more frequent identification of safety threats in 24-hour response investigations reinforces the importance of making timely face-to-face contacts with families to ensure child safety.



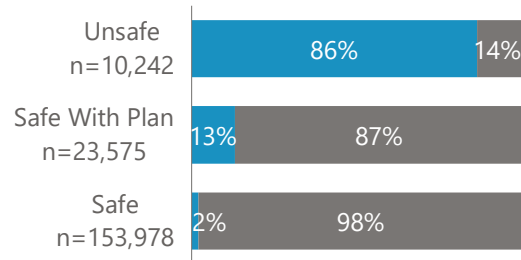
Policy and Practice Guidelines

A safety decision of unsafe means the worker has determined that removal is the only intervention available to keep the child safe. To examine how often initial safety decisions correspond to actual child removals, CRC identified the first placement episode that began between three days prior to the referral received date and the end of the investigation—or, if the investigation was still open, February 18, 2020 (the date this information was collected from CWS/CMS and WebSDM).



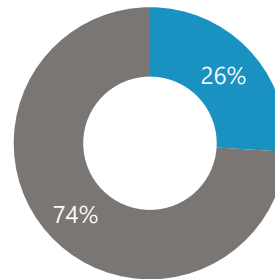
The Data

Removal by Initial Safety Decision



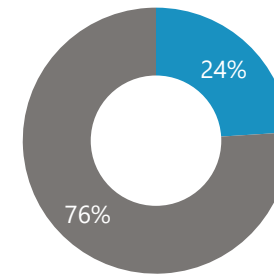
■ Removal ■ No Removal

Initially Safe or Safe With Plan and Removal During Investigation



■ Unsafe Assessment ■ No Unsafe Assessment

Initially Unsafe Without Removal During Investigation



■ Safe or Safe With Plan Assessment ■ No Safe or Safe With Plan Assessment



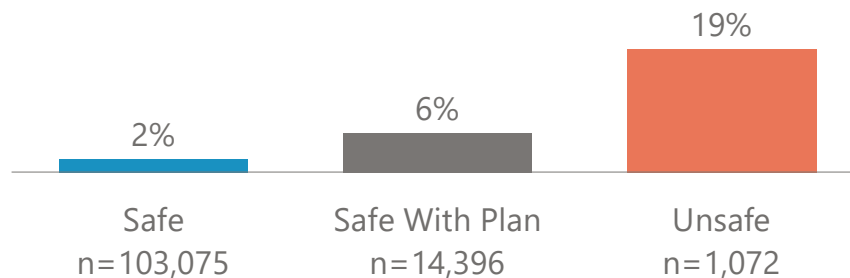
Takeaways

- Of families initially assessed as safe with plan or safe, 6,252 (4%, not shown) experienced a removal during the investigation. Of these families, 1,625 (26%) had another safety assessment documenting a change in child safety (i.e., a safety assessment with a finding of unsafe), while 74% were not assessed as unsafe at any time during the investigation.
- Of households assessed as unsafe at the time of the initial safety assessment, 8,824 (86%) experienced a child removal during the investigation. Of the 1,418 households without a removal during the investigation, 334 (24%) had another safety assessment documenting a change in child safety (i.e., a decision of safe or safe with plan).



The Data: Removal Within Three Months of Investigation End by Safety Decision

CRC examined subsequent removals by safety decision for households investigated and assessed for safety in 2019 that did not result in a removal. To allow a sufficient follow-up period, investigations that closed after October 31, 2019, were excluded from this analysis. All alleged victims listed on 118,543 referrals were followed for three months after the investigations ended to see if they were subsequently removed.



Takeaways

Families assessed initially as unsafe at the time of their 2019 investigation but without a child removal experienced a removal within three months after the investigation more often (19%) than did families initially assessed as safe (2%) or safe with plan (6%).



Connecting Data to Practice

- The safety assessment reflects household safety status at the current point in time; as circumstances change, safety should be reassessed. How can CDSS help counties promote a strong understanding of the fluid concept of child and family safety and encourage using the safety assessment to support safety planning decisions over time?
- Removal decisions were mostly in accordance with safety assessment decisions. However, a removal occurred in 4,627 investigations never assessed as unsafe, and no removal occurred in 1,084 investigations only assessed as unsafe. It may be useful to learn more about how the safety assessment is used in the removal decision process. CDSS may wish to further examine investigations in which the safety decision and removal decision misalign to understand whether there are trends in family or investigation characteristics. This could include counties conducting a quality review of investigations in which the safety decision and removal decision do not align.

Case Promotion



Policy and 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. Investigations for families at high or very high risk should be provided with ongoing services.



The Data: Prevalence of Risk Level and Safety Threats

In 2019, 147,508 investigations of families that did not already have an open case had completed safety and risk assessments. The analysis examines findings from the last safety assessment completed during the investigation and the risk assessment.

	Safe	Safe With Plan	Unsafe
Low/ Moderate Risk	95,975 (65%) <i>Do we need to be involved at all?</i>	6,353 (4%) <i>Is the plan working?</i>	1,262 (1%) <i>Is a quick return home possible?</i>
High/ Very High Risk	29,445 (20%) <i>What preventive actions can we take?</i>	6,672 (5%) <i>We need to see the plan working longer.</i>	7,801 (5%) <i>Create sustainable safety before return home.</i>



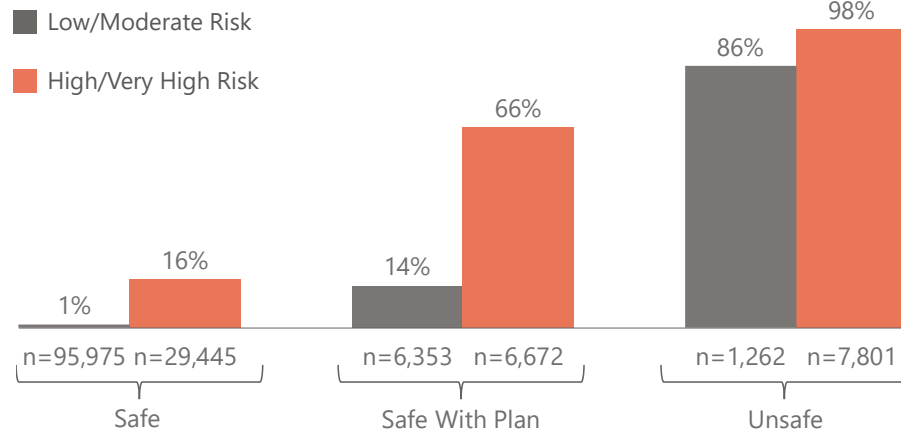
Takeaways

- The analysis reflects only investigations with completed safety and risk assessments. California counties conducted an additional 43,618 investigations in 2019 without completed safety and/or risk assessments.
- Based on California's SDM risk-based case promotion guidelines, 51,533 (35%) investigations (all high- or very high-risk investigations and all low- or moderate-risk investigations with outstanding safety threats) should have been promoted to ongoing services. Of those investigations, only 18,717 (36%) were promoted to new cases (not shown).

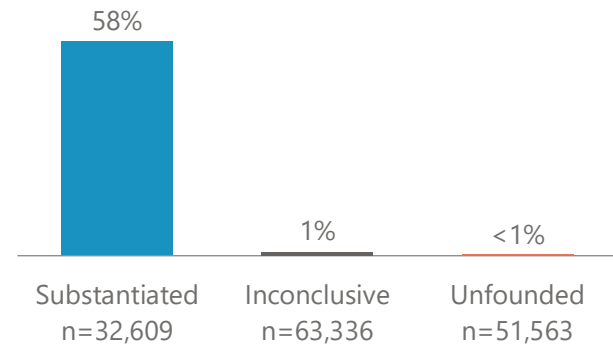


The Data

New Promotions by Risk Level and Safety Threats



New Promotions by Investigation Conclusion



Takeaways

Case promotion decisions appear to be more related to identification of safety threats during the investigation and substantiation than to SDM risk levels. Overall, 63% (not shown) of investigations with outstanding safety threats and 58% of substantiated investigations were promoted to a case compared with 38% of high- or very high-risk investigations (not shown).



Connecting Data to Practice

- Of investigations with a most recent safety decision of safe with plan, ongoing services were not provided to 86% of families assessed at low or moderate risk and 34% of families at high or very high risk. Of investigations with a most recent safety decision of unsafe, ongoing services were not provided to 14% of families at low or moderate risk and 2% of families at high or very high risk. What are counties doing to ensure safety for children in these families prior to closing investigations?
- Does CDSS policy and practice support counties in using all available information—investigation conclusion, safety, and risk—to make decisions regarding case promotion/service provision? What barriers exist to providing ongoing services to families in many high- and very high-risk investigations? What benefits may there be to serving these families?

Maltreatment Investigation and Substantiation Recurrence



Policy and Practice Guidelines

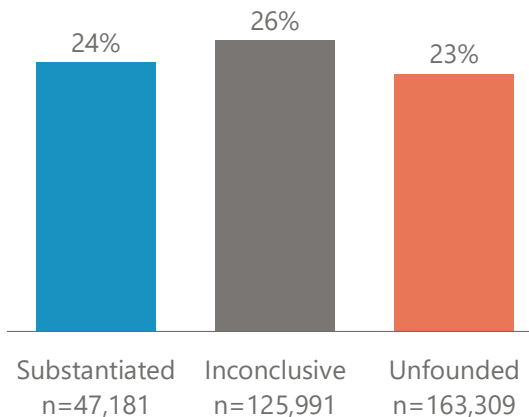
The SDM risk assessment is an actuarial tool that, when completed with fidelity, classifies families based on shared characteristics that relate to the likelihood of experiencing subsequent child protection involvement. The investigation conclusion is a determination, made without structured support, on whether the alleged maltreatment is likely to have occurred (substantiated allegations are determined to have been more likely than not to have occurred). Service provisions are a mechanism to improve the safety, stability, and permanency of children and families. SDM case promotion guidelines suggest providing services based on risk and safety in order to allocate limited resources to the families in greatest need of support to achieve stability and permanency, regardless of investigation conclusion.



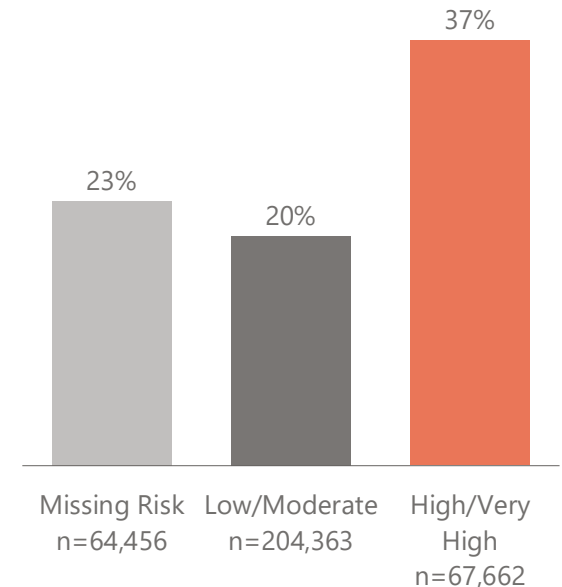
The Data

The recurrence sample, composed of alleged victims involved in investigations in 2018, provides a comparison of 12-month subsequent maltreatment investigations and substantiations across investigation conclusion and initial risk level.

Subsequent Maltreatment Investigation by Allegation Conclusion



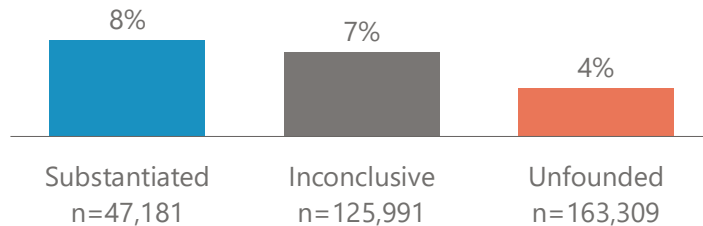
Subsequent Maltreatment Investigation by Initial Risk Level



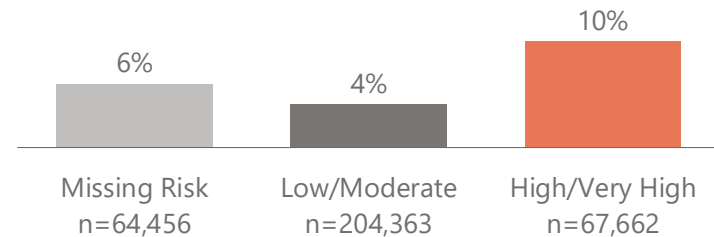


The Data

Subsequent Maltreatment Substantiation by Allegation Conclusion



Subsequent Maltreatment Substantiation by Initial Risk Level



Takeaways

- Rates of subsequent investigation did not substantially differ by allegation conclusion. Subsequent substantiated allegation occurred slightly more often for children with substantiated or inconclusive allegations at the time of the 2018 investigation.
- Compared with the investigation conclusion, SDM risk level more accurately identifies who is most likely to return to the child protection system for abuse or neglect concerns. Alleged victims in families assessed as high or very high risk experienced subsequent system involvement at a substantially higher rate than victims in families assessed as low or moderate risk.



Connecting Data to Practice

Do counties recognize the information they can get from the investigation conclusion and SDM risk level? Is the purpose of the SDM risk assessment clearly understood? How are workers supported to use both pieces of information to make decisions related to ongoing service provision? Does local policy create a barrier to serving high- or very high-risk families? Given the risk assessment provides information on which families are most likely to return to the child protection system and that just over a third of high- or very high-risk investigations were promoted in 2019 (see Content Area 3), CRC and CDSS could consider a joint facilitation with counties to discuss and determine best policy and practice for the intervention decision for families assessed as high or very high risk.

Initial SDM® Strengths and Needs Assessments



Policy and Practice Guidelines

An initial SDM family strengths and needs assessment (FSNA), including the child strengths and needs assessment (CSNA), should be completed for families receiving family maintenance (FM) and/or family reunification (FR) services. CSNA completion is recommended for every child in permanency planning. These assessments must be completed on new cases prior to developing the case plan or within 30 days after the first face-to-face contact. Despite this 30-day requirement, a 60-day timeframe was used for this analysis to allow workers adequate time to enter paper-based assessments into the computer system.



Takeaways

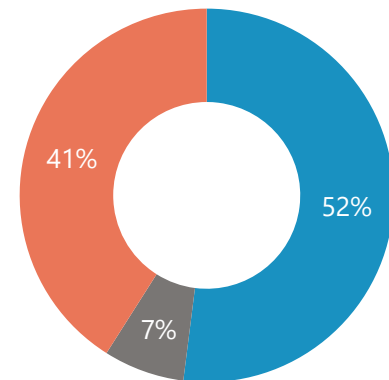
Initial strengths and needs assessments were not consistently completed prior to case planning, which suggests the assessment did not inform case planning for these families and children.



The Data: Completion Rates

In 2019, 41,714 new cases with an initial service component of FM, FR, or permanent placement were opened and remained open for at least 60 days.

- Completed Within 60 Days and Prior to Case Plan
- Completed Within 60 Days
- Not Completed Within 60 Days



Connecting Data to Practice

- As of the writing of this report, CRC was still maintaining the FSNA as part of the California suite of SDM assessment tools. As counties transition to the child and adolescent needs and strengths tool, they are still able to complete the FSNA and CSNA in WebSDM and monitor completion rates in SafeMeasures®. Regardless of which assessment is used, it is important for appropriate case planning and safety planning to engage the family in a balanced assessment of both needs and strengths. CDSS should consider how to support and monitor counties' completion of strengths and needs assessments for families receiving ongoing child protective services.
- The FSNA should guide a conversation with families that helps to assess and prioritize needs and strengths for the purposes of case planning. Was another assessment or process used when an SDM FSNA was not completed?



Policy and Practice Guidelines

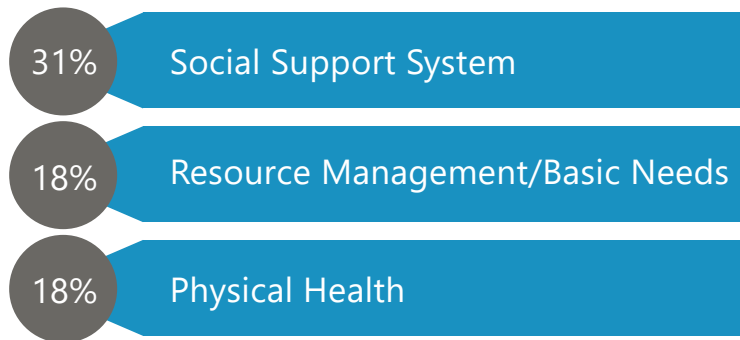
Workers assess family functioning by responding to each of 11 caregiver domains with an A, B, C, or D. "A" responses indicate a family strength and should be considered a potential resource and aid. "C" and "D" responses indicate an area that is a need. At the end of the assessment, workers select the most serious needs to be prioritized and integrated into the case plan.



The Data: Strengths and Needs

The 24,694 initial FSNA's completed within 60 days for cases opened during the period represented 13,591 distinct families. The items most frequently identified as priority strengths and priority needs for families are shown here.

STRENGTHS



NEEDS



Takeaways

- Substance use and parenting practices were assessed and viewed as priority needs for many families.
- About one-third of families had a strong social support system.



Connecting Data to Practice

What services and interventions are most appropriate for these needs, and what is known about them? Counties should examine their trends around needs and strengths to assess their funding service array.

SDM[®] Family Risk Reassessment



Policy and Practice Guidelines

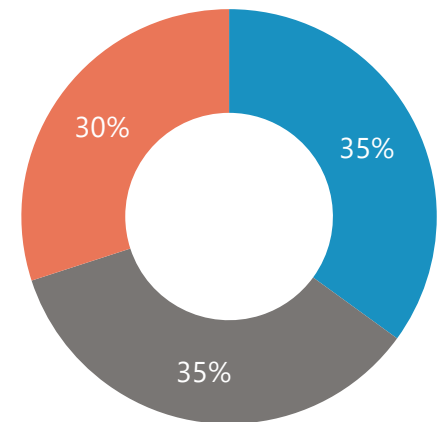
The SDM risk reassessment should be completed for all open cases in which all children remain in the home, or cases in which all children have been returned home and are in FM services. The assessment should be completed prior to each Division 31-required review, which occurs at least once every six months. The recommendation from the risk reassessment guides a worker's decision to keep the case open or to close the case. When the risk reassessment level is low or moderate, the SDM recommendation is to close the case as long as there are no unresolved safety threats. When the risk reassessment level is high or very high, the SDM recommendation is to keep the case open. This analysis examined if children received a completed risk reassessment within six or nine months of their FM services starting.



The Data: Completion Rates

In 2018, counties initiated 17,568 cases that began in FM services. These cases received FM services for at least nine months, or the case was active for less than nine months but received FM services for the life of the case.

- Completed Within Six Months
- Completed Between Six and Nine Months
- Not Completed, or Completed After Nine Months



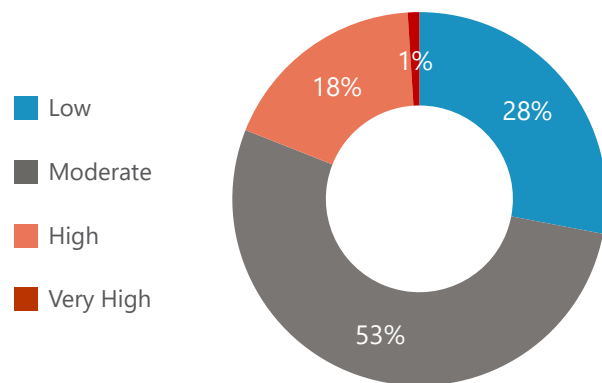
Takeaways

Of the 17,568 cases, 12,300 (70%) had a risk reassessment completed within nine months of FM services starting.

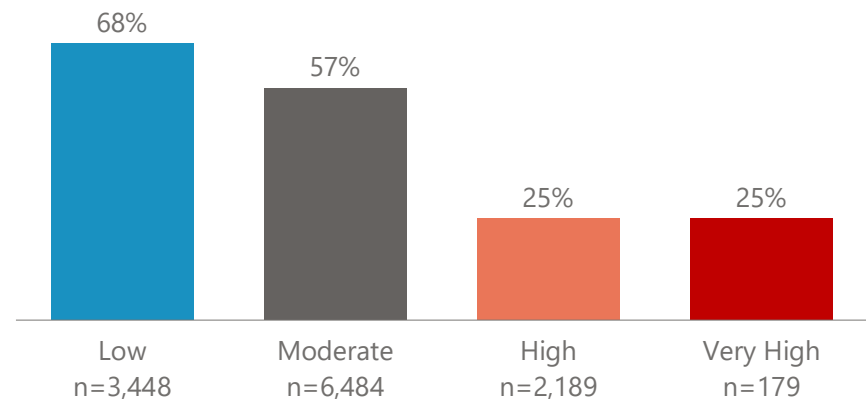


The Data

Final Risk Reassessment Level



Case Close Within 90 Days by Final Risk Reassessment Level



Takeaways

- Of the risk reassessments completed within nine months, 81% were assessed at low or moderate risk.
- Of the cases with a completed risk reassessment, 1,141 (9%) had a risk override (not shown). Most (97%) were discretionary. Overall, 835 (73%) overrides were used to increase the risk reassessment level.
- Cases assessed as low or moderate on their first risk reassessment were more likely to close within 90 days of the reassessment than cases assessed as high or very high.



Connecting Data to Practice

Thirty-two percent of cases initially assessed as low on the risk reassessment and 43% of cases initially assessed as moderate were not closed within 90 days of the risk reassessment. SDM recommends closing these cases unless outstanding safety threats exist. For low and moderate cases that remain open, what circumstances prevented closure? For example, did these families have outstanding safety threats that prevented case closure? Do case closure decisions by risk reassessment level differ by child and family characteristics?

SDM[®] Reunification Reassessment



Policy and Practice Guidelines

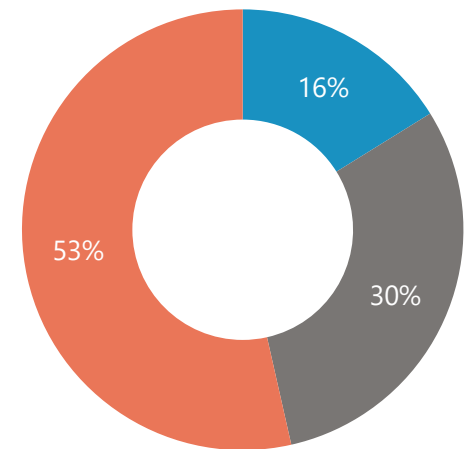
The SDM reunification reassessment should be completed for children in placement with a goal of returning home. This assessment should be completed prior to each status review hearing and/or Division 31-required review, which occurs at least once every six months. The recommendation from the reunification reassessment guides a worker's decision about the permanency plan: to terminate FR services, continue FR services, or return a child to the removal home. FR services should be terminated only when the reunification reassessment's permanency plan recommendation is either to terminate FR services or return home. This analysis examined if workers completed a reunification reassessment within six or nine months of a child's FR services starting. Removals lasting less than eight days were excluded from the analysis; probate guardianship, Kinship Guardianship Assistance Payment Program, and Interstate Compact on the Placement of Children removals were also excluded. Removals in FR services less than nine months as of the extract date (February 18, 2020) were excluded as well.



The Data: Completion Rates

In 2018, California counties removed 22,745 children who entered FR services.

- Completed Within Six Months
- Completed Between Six and Nine Months
- Not Completd, or Completed After Nine Months



Takeaways

Of the 22,745 cases, 10,609 (47%) had a reunification reassessment completed within the first nine months of the FR service.



Connecting Data to Practice

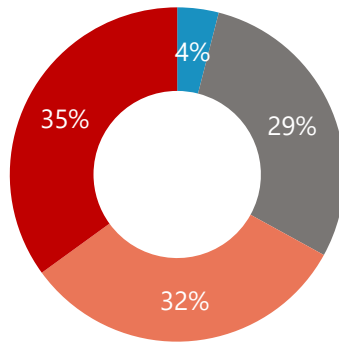
How does CDSS support counties to use the reunification reassessment in conducting monthly case contacts to support families in addressing barriers to reunification prior to court hearings?



The Data: SDM® Reunification Reassessment Results

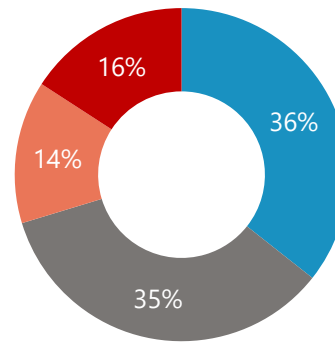
Scored Risk Level

- Low
- Moderate
- High
- Very High



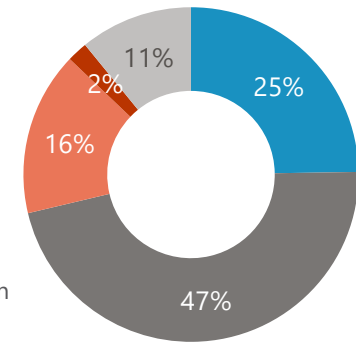
Visit Frequency

- Totally
- Routinely
- Sporadically
- Rarely or Never



Visit Quality

- Strong
- Adequate
- Limited
- Destructive
- No Visitation



Takeaways

- Of the 10,609 cases with a completed reunification reassessment, 7,114 (67%) were initially assessed as high or very high risk, and 352 (3%, not shown) had overrides to the scored risk level.
- The majority of cases (71%) were assessed as having visitation frequency totally or routinely. In addition, the majority of cases (71%) were assessed as having strong or adequate visitation quality. Overall, over half (59%) of cases were assessed as having compliant visitation frequency and quality (not shown).



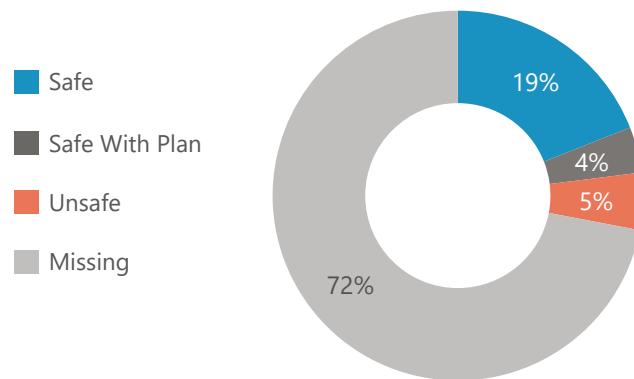
Connecting Data to Practice

- Most cases scored high or very high on the risk portion of the initial reunification reassessment. Caregivers' progress on case plan objectives contributes largely to the scored risk level. How can CDSS support counties to create clear, actionable case plan objectives, based on behavior change instead of services, to set up families for success?
- How can CDSS support integration of behavior-based case planning as way to measure family progress as well as training/coaching on the use of the reunification reassessment in monthly case contacts?

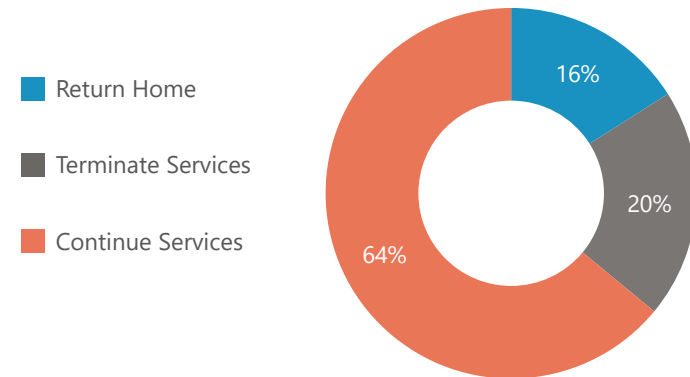


The Data: SDM® Reunification Reassessment Results

Safety Decision



Final Recommendation



Takeaways

- Most cases (72%) did not receive the safety portion of the reunification reassessment. These cases were assessed as high or very high risk and/or did not meet visitation compliance.
- Of the 10,609 cases with a completed reunification reassessment, over half (64%) had a final recommendation to continue FR services. One-fifth (20%) had a final recommendation to terminate services, and 16% had a final recommendation to return home.
- Workers overrode the initial permanency recommendation for 1,914 (18%) cases (not shown). Two-thirds (67%) of the overrides were policy, and one-third (33%) were discretionary (not shown).



Connecting Data to Practice

What guidance is provided to counties on how to facilitate conversations with families about visitation quality, supervision level of visitations, case plan progress, and recommendations for reunification?



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