

Session 6.10 – The Implementation of Differential Response in Child Protective Services: Identifying and Exploring the Intended and Unintended Consequences

Panelists:

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Please note: The following is a direct transcription and has not been edited.

Lisa Merkel-Holguin: Well good afternoon. We thought we would, worked to get started here as the hallway is fairly empty and we know that this is the last session before the research round table that will be occurring later this evening. I'm Lisa Merkel-Holguin and I'm the Director of System Advancement at the American Humane Association and also have a role in the Quality Improvement Center on Differential Response in Child Protective Sources. And so, the session you have elected to come to on a beautiful Tuesday afternoon, is related to the implementation of Differential Response. What we want to do is identify and explore with you the unintended and intended consequences of implementing this type of system change or system reform. You have elected to come to a what's categorized as a discussion group. So, just want to give everybody a little bit of the planners that means actually you're, we're going to have a small group exercise and you're going to be in discussion with people at different points of, in the room. So, if you are not up for that and are interested in being social or engaging in dialogue, we are not, we feel free to, to make a decision if you must stay.

Female Speaker: Some of you can make a decision.

Lisa Merkel-Holguin: Some of you can make a decision too if that's not exactly what you were looking for and you'd like to attend a different session and that, that will be absolutely fine with us. So, I'm going to just go through a few slides and, but, before I get started I thought, thought what we wanted to do is just get a little bit of a clue of who's in the room and we know the Differential Response is a reform that's kind of sweeping the nation in many regards, we heard about from Erin Sullivan Sutton this morning at the key note talking about the Randomized Controlled Trial in Minnesota and how instrumental that was and really kind of solidifying and learn, solidifying Family Assessment Response practice in Minnesota and how that evaluation has actually been used to inform many other evaluations that are currently going on.

So we know that Differential Response also known as Alternative Response or Multiple Response Systems is growing and that more States are interested in looking at, at what this States as well as tribes and counties, communities what this may mean for, for their systems. And so we thought it would just be good to get a pulse on how many of you are in states that are implementing Differential Response, if we could get a show of hands, excellent. How many of you are in...?

Female Speaker: No, no we wanted to count; we'd like to count it on and on.

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Lisa Merkel-Holguin: Oh they liked to count, so keep your hands up here. All right, and could you just tell us may be some of the states I know Colorado and...

Female Speaker: For implementing or have implemented?

Female Speaker: Both.

Lisa Merkel-Holguin: Both.

Female Speaker: Okay.

Female Speaker: Have.

Female Speaker: *[Indiscernible]* [00:03:05] New York.

Lisa Merkel-Holguin: Okay, New York.

Female Speaker: Louisiana.

Lisa Merkel-Holguin: Louisiana.

Female Speaker: Virginia.

Lisa Merkel-Holguin: Virginia.

Female Speaker: Minnesota and Colorado.

Lisa Merkel-Holguin: Minnesota and Colorado.

Female Speaker: DC.

Lisa Merkel-Holguin: DC.

Female Speaker: Oregon.

Lisa Merkel-Holguin: Oregon. Just getting started.

Female Speaker: Yeah.

Lisa Merkel-Holguin: Okay.

Male Speaker: Ohio.

Lisa Merkel-Holguin: Ohio, thank you. Yeah, okay so we don't want to leave anybody else. So now, are there any, are there any people from states that have discontinued implement, the implementation of Differential Response? Anybody and fit into that

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category you've, the state tried it and then it went away, okay. Was there any other question you wanted to ask?

Female Speaker: Ask who's got planning on want to do, interested in.

Lisa Merkel-Holguin: Oh and anybody who is planning, planning or, or is beginning to introduce Differential Response.

Female Speaker: Yes.

Lisa Merkel-Holguin: Yes.

Female Speaker: Yes.

Lisa Merkel-Holguin: 1, 2, 3.

Female Speaker: 1, 2, 3.

Lisa Merkel-Holguin: And what states are you'll from?

Female Speaker: Connecticut.

Lisa Merkel-Holguin: Connecticut.

Female Speaker: Utah.

Lisa Merkel-Holguin: Utah.

Female Speaker: Michigan.

Lisa Merkel-Holguin: Okay, excellent. Well thank you, that kind of gives us a little bit of a, of a, of a pulse and a little bit of picture as to who's in the room and, and the good news is that there are so many view that with knowledge and some experience related implementation that your small group exercises can be phenomenal, just based on the knowledge that you all have so we're excited about that. So, this Quality Improvement Center on Differential Response is a 5-year project, we are closing down year 3 here at the end of September. And as a partnership between the American Humane Association Walter R. McDonald & Associates as well as the Institute of Applied Research and in year 1 we had also the ABA Center on Children and the Law as well as the National Conference of State Legislatures who were our partners.

It is the purpose is really to try to under, try to improve child welfare outcomes through, the implementation of Differential Response and; we have research in demonstration sites, three of them that are in Ohio, Colorado and Illinois, that are really are laboratories of learning. So that we can not only build that cutting edge knowledge, at the local level, but, then there was a cross-side evaluation component to the Quality Improvement

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Center. We are wanting to enhance the capacity of the local level, around improved outcome for those families that are identified where it's suspected to Child Neglect. And ultimately at the end of the 5-year as what we're hoping to be able to provide as well as along the way was what are the different new, what are the different practices that change, what happens to its screening a Differential Response system, what happens along, along a lot of different decision making points when you implement Differential Response. How does your training, how does training and workforce look different. How do you create different staffing structures what is your so all sorts of different variables that we're trying to look at, so that ultimately for those states that are interested in or, and or tribes communities that are interested in implementing Differential Response we hope to have sufficient information from all the evaluation sources to be able to provide some guidance related to that. So in year one, we developed all sorts of different products a literature review, we've done state legislative analysis of all the different state legislation that's, that states have passed. We conducted information Summits and all of these materials are nested on our website at Differential Response QIC.org.

Then as those of you familiar with the QIC model, we created a request or proposals that was announced and we had a number of applicants of people that not only we're interested in implementing Differential Response, but, had very strong evaluation teams to evaluate the system change that they were undertaking. The one new ones of this QIC is that we also have the opportunity to award, support to this PhD students who are interested in doing their dissertation on Differential Response and we have three students currently funded and the possibility of one more so if, you know, this is a great obviously conference and venue to get the word out, but, you have a student or know of a student who may be interested in, in studying Differential Response there is information on our website related to that.

John: There is also a handout.

Lisa Merkel-Holguin: And John passed out a hand out as well. So, we are now in Phase 2, year 2 or Phase 2 or year 3 in, in total. And so we have these three research and demonstration sides again we're, we've got three dissertations that are up and funded. And, there is a process impact on cost evaluation happening within these three research and demonstration sides American Humane and, and Walter R. McDonald & Associates is doing the cross-side evaluation. And as we go along the path we're developing a variety of products from the learning's from the sites as well as the national learning's from non-QIC sites that are implementing Differential Response.

And, coming in your floor we'll be doing a bunch of different webinars as well. So, oh and some of the products are downstairs, in the, in the share...

John: In the sharing table.

Lisa Merkel-Holguin: At the sharing table. Thank you, John. Here are our three main research questions. One is, you heard Erin Sullivan if you were in the main session today

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you heard Erin Sullivan Sutton talk about the family, their Family Assessment Response pathway. So that's a kin to what we're labeling the non-investigation pathway. So the question is, are children who participate in the non-investigation pathway or that Family Assessment Response pathway are they a safer, safer than children who are receiving an investigation? So that's clearly one other core questions that everyone asks is, if you implement Differential Response and if you have in case in Minnesota, 70% of your families not receiving an investigation, are children going to be safe? So that's a very legitimate concern and something that all Differential Response evaluations are really looking at certainly is a core concern of the Quality Improvement Center. So then we want to know well, how are these pathways is different? So if you've got some families who are receiving a Family Assessment Response and some were receiving an investigation how are they different in terms of family engagement, is case, is this casework practice look any different, do you provide different services, different duration of services, different types of services. So really want to look at how are these pathways different? And how are they the same? Because I think what we're seeing is a lot of cross-fertilization across investigative casework practice and the Stanley assessment response or non-investigation response

And then lastly, especially I think even the tough economic times that we're having, we want to know what are the costs in funding application, funding implications to a child protection agency if you were to implement a Differential Response system, and so that, those are our three core research questions. Where I just want to briefly do, as we recognized that what kind of even murky waters when we talk about Differential Response or Alternative Response, because there are so many different variations about many people use the terms interchangeably, and so for our Quality Improvement Center we actually use the eight core elements to define the rubric of this system reform, and the sites were asked to follow these to the greatest ability that they, they could.

So, let me just touch on them very briefly. The first is, is when we're talking about Differential Response we're talking about cases that are screened in. So, there are number of Differential Response systems that's screen, that have a screening out pathway, Erin even talked about this morning how they have the Parent Support Outreach Program in Minnesota that's for families who are screened out, but, when we talk about Differential Response in the families that were studying it's for cases that are screened in. So assignment to Differential Response for that Family Assessment Response pathway are based on a variety of factors. Everything from and, and states have all sorts of different definitions so could be the age of the child, it could be institutional reports always are investigated, it could be the reports source that comes from medical professional that might always receive an investigation, they type of maltreatment often times most states have their sexual, allegations of sexual abuse would go to investigation pathway.

So, there are different states are using different rubrics to determine who's even eligible to receive, to receive services through a non-investigation pathway or the family assessment pathway. We know that our third core element is that the assignment to be changed at a minimum you could move from a Differential Response to an investigation

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response, but, also there are many states that also allow to go the opposite direction, and you may go out, you may make a determination of screening to do an investigation response the worker may get out there and say, you know, really this family could be so better through a family assessment response, I'm going to change pathways, so there is that flexibility that can occur in this. So the question is, family, the fourth core element is that families can choose to refuse to participate in Differential Response. So this kind of goes to this whole voluntary nature and what we say there is a caveat, obviously if a worker is out there and they are identifying safety concerns, families may opt out of Differential Response, but, they will then get an investigation response. So, it's not voluntary within an asterisk if that makes sense. Families can choose to accept or not accept services, so that's just again what we're seeing in, in, in, in system where there implementing Differential Response and casework practice as that really working with the family to identify their needs, to understand what's going on and what's and to under, and to hear from the families what they think will make a difference. And so, families are hopefully, we're engaging families in a process where they're determining what services they need and, I think we're seeing an increase an uptick of families accepting services and determining what services makes sense for them.

As I mentioned, Differential Response often is codified and state statute a policy we have a great resource that really illuminates all the different state legislation, options and kind of the consistencies across the different states. That, and I'm missing so number seven, is the promising one, so that before get into the bullet on the right hand side, I missing one and that is that the, the notion of using a central registry changes. So families that receive the family assessment response are not entered into the central registry. So that's changed. And then lastly, is the notion of the formal assessment of the maltreatment allegation is not made. So there is no substantiation for these families. There is no determination whether maltreatment occurred, it's not part of the conversation that's had with families are on the family assessment response pathway, that's why Erin kind of alluded to the fact this morning about how the theory here is, is that, with that out of the picture you're able to engage families at a different rate and then in different way. So that's the, that's the eight core elements.

The last bullet on the, at the bottom is, was not one that was part of our study about American Humane and the Child Welfare League in 2006 and that was used to as the construct for our Quality Improvement Center, but, you really can't do Differential Response unless you're engaging families. So while it hasn't officially become like the ninth core element of a different, of Differential Response. We think it's, we think it's just really important to accentuate that casework practice changes significantly an engagement through all variety of different comprehensive family assessments where the family is involved or the larger family group is involved, a variety of family needing models are often times being implemented in Differential Response systems and other things along those lines. So I'm going to turn it over to John .

John: So some, some of these factors or things that we, we think are intended programmatic characteristics. So, so the first one is, are the caseload is smaller for Differential Response systems compared to investigation response? The second one, is

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their comprehensive services needs assessment of the family system in other words is the result of the implementation of Differential Response is it more likely that we will find a, a much more comprehensive assessment occurring? The theory there of course is that those assessments will lead to a better identification of service need and, with the, the concept of family engagement lead to a greater uptick at those services. And then, is the service delivery period longer? In this case it's, we're, we're suggesting longer than 30 days, in some cases we know that these service periods are much longer by design, but, the, the basic issue is, are these families engaged with the provision of services for a longer period than investigative response cases? And again, the sort of notion of the active ingredient of family engagement has encouraged by this particular type of practice. Some intermediary and long-term outcomes that are intended are viewed as things that should occur, are more services actually available to meet each family's specific needs, this is sort of both a question of the more broad use of community-based services, higher degrees of partnership, greater degrees of acceptance of families by various service providers as a result of the type of intervention that these families are involved in. And it may also have to do with the nature of the costs if a Differential Response system for example is able to bring costs down as a result of changing the nature of the investigatory activities, would that translate into more services that are available at the community level.

And then, do families receiving Differential Response show equal or lower rates of re-reporting compared to families receiving investigative response and of course as Lisa mentioned that sort of the key fundamental underlying question of our evaluation and many of the evaluations especially those in Minnesota and Ohio that had occurred previously, can we ensure that safety essentially is not compromised through the implementation of Differential Response system. Are you unintended consequence?

Female Speaker: I'm the unintended consequence.

John: So I think you could do that.

Female Speaker: I think the intended in your handouts one of the pages...

Lisa Merkel-Holguin: Oh Anita, we haven't passed this out yet.

Female Speaker: Oh, they haven't got the special sheets yet, they just have.

Lisa Merkel-Holguin: No.

Female Speaker: Okay, you will be receiving. There is a longer list of intended and unintended consequences. And, our intention which we're getting too also is to discuss these in better detail among ourselves and among this whole group here. I get to mention some of the unintended consequences. I think as we develop programs we all know now about having goals and objectives and intentions and how we're trying to improve the system. So, each program does whether it's considered a reform program or not, does have goals and objectives and its intentions.

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What happens as we develop program is that all sorts of things that we didn't anticipate also occur. And these then become issues some which are resolvable, some which are not resolvable sometimes which some which end up actually eliminating the program or changing the program very drastically so it becomes something else which may or may not be a good thing. So, when we talked about intended consequences we were also meaning anticipated which of course through evaluation you might also find don't, aren't true and that's why they were put out as questions, but, there are also the unanticipated and these occur and some of the ones that we'd like to talk about. The reason we're kind of interested in these are is that, any place beginning to plan for services needs to probably have a broader understanding of what can occur or what might occur given that when it's changing a total system even as ones going in with a small or large intervention, so that the chances of, of it impacting other parts of the system actually are always there. Then so that's useful for planning the, the other it's useful for mid-course correction, for people who are actively implementing programs as things occur that they don't get in totally a reactive mode and not know what to do or not know well how to go forward.

So in our discussions today one of the things we're really interested in is people reporting and discussing among themselves whether these things have occurred in their sides, what did they do, what was the impact, was there any positive impact or was there a negative impact etcetera. One category of unintended consequences is in the whole area of case processing from the beginning of Child Welfare namely if I'm very screening in and screening out to actually which cases are accepted, which ones are not, there are some people who would argue that you would screen out more cases than you would screen in. others have said no, you would screen in more, because now you have more options to provide two families. And actually both phenomenon have been observed in the field.

There are some programs which I think we need to also acknowledge which may not fit the original typology by which are called Differential Response in some places which are essentially programs where families are screened out. They may be screened out, but, they are referred to other agencies for either a community response which may be a very fine-tuned community response or may be relatively loose, but, these are also, places that are talking about triage, places that are talking about multiple tracks also as may have another pathway where families can receive services even though they are not screened in as a CPS response case.

Another type of issue is, if those families who come in and are served to the Differential Response pathway, do not result in findings of either substantiation or unsubstantiation. And, allegations are not tracked will this inevitably reduce the numbers of children who are found to have been victims or be at risk of being victims of maltreatment. Now some of you may be of a group who believes and sometimes I belong to this group too, that there is no meaning to the word substantiation or unsubstantiation.

But, this is not the point, the point is, there is another conversation we can have another time, but, the point is, if you see a drop of the numbers of children in your state who are

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considered to be victims of child abuse and neglect what would be the community response and legislative response, will the response be good for you Child Welfare, more many more work or good for you Child Welfare, much this is no longer such a big problem for us therefore we can cut budget etcetera. So that's kind of like the unintended consequence side of that. We have a couple of others that the next one we said, our whole areas of the workforce. In general, in the development of programs in Child Welfare we, we do focus on training, we do say people are going to have to be trained, we are going to be in their training proms, but, we don't necessarily think what is this going to mean to our workforce in general. And those of you who participate in the an area of family preservation saw that there was quite a bit of impact on the workforce and much of it was unintended and the responses were very reactionary and not to the benefit of any program any place. So, first of all, what has occurred to-date is that we are now seeing mixed caseloads. The original design really what to not consider that there would be mixed caseloads. If the same worker who is learning how to be engaging and friendly to families and understanding their needs and providing intensive assessments it's also doing an investigation which has much more reporting necessity, more for instance, activities, shorter timelines, etcetera, but, we are seeing this okay, we are seeing mixed caseloads and so that has certain impacts on the workforce.

The other issue is do, will people be seen differently, or do we see their different skill sets needed, whether you're providing family, whether you're providing Differential Response or you're providing an investigation. If there a different skill sets then are there different recruitment, retention and even salary implications to this where we have a higher skilled worker or which worker is the higher skilled or are these interchangeable or whatever. We have several other workforce issues which you could look at also including supervision, including unions things like that.

Another area we had, we labeled as other, because just as so we wouldn't have too many slides. So, other is actually some of the more compelling issues we related to Differential Response, one of them is, will we end up in providing more services to low-risk families, because we now have a pathway which is defined by providing services to, then we will to higher-risk families, because unless it's a mandatory service it's; totally voluntary and the time is not provided for providing services or that there may actually now be an allocation of service providers so that even if you open a service case they may not be available to services. Those of you have big frowns on your faces, let me assure that this has already occurred in some places that this issue is not one that is just a theoretical issue.

The other one that may be is a little theoretical, but, if and it's a longer-term issue for Child Welfare and some of these issues are really perhaps not present today, but, need to be things that we think about as Child Welfare in general, CPS in general, if we are now considering that we have one route still into CPS, namely an allegation of maltreatment. We don't have another door yet, we don't have a family services different door way we have one doorway allegation of maltreatment, but, that we triage or we bifurcate based on assessment we have all of those questions too, but, based on some assessment so some families will get Differential Response and others will get investigation now notably, not

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everybody is substantiated. However, once you go to Differential Response you have no chance of being substantiated although there is some controversy about this also. No chance, therefore, right away none of those families are going to be considered as having had maltreatment or perpetrators, none of those parents will go on to any whether you have a data repository whether you have a registry, whatever you have as being having been a perpetrator of child abuse and neglect. Does this mean that we need to look at who we have on our registries, because is this just now an issue of timing. Two years ago for exactly this in condition we considered to a perpetrator today, because we have some other alternatives we don't. This is actually an issue for those states that have registries and depending on how they use them, and also how are we considered. So, there are other whole areas of unintended consequences and we mentioned some others. So which we think that those of you who are planning or those of you who are implementing programs may want to consider. Now, we have a little plan on how we're going to consider this, but, given that we always empower our participants, you will get to choose at multiple levels this is the hierarchal of modeling exercise for those of you been attending research sessions. Our regional concept, without knowing how many people would come would be that we would have break into three groups. And we would talk about the intended programmatic characteristics, how these are being evaluated, whether these are happening or not, what are the other things that are happening, what are the other programs put on their list as intended programmatic characteristics, because not all of them have been listed even in that initial formulation.

We would also have a group that we'd look at intended outcomes and intended consequences to sort of share what are the markers of success for these programs, and how our jurisdictions looking at that. And another group that we'd talk about unintended consequences and what has been their experience. Then each group would have a reporter and the reason we decided three it was before if we were needed as extra facilitators the three of us were going to help on this. And that, then one gets to review the list of questions which they have now received and you could also make up your own, but, you can talk with your peers, so it's a peer discussion group activity. And then we would, you would decide whether you want to discuss two or three among each other and then we would be put back at about 4:45 from each group. So, definitely that means somebody is volunteering as reporter.

And it does occur to us, given the size of the group that we could do a couple of things, one we could follow this model and if you'd like to know how we would do it, we have thought that group one would meet in that corner, group two would meet in this corner and group three would meet in this corner. So some of you might have to move those in the middle, we may have to choose a corner. And so we would have three. The another way to do this is to talk, because we have quite a few tables that are quite full, and those of you who have tables that are not too full is actually talk at, at, at a table level. And you could talk among yourselves and actually you can touch on one or three, or you could choose which group you wanted to, which topic you wanted to discuss. Those are the two extreme possibilities, the other extreme possibility which some people have already chosen is to leave, but, we have decided that rest of you're staying, so you can choose. So I'm, we are now taking suggestions of how you would like to meet and talk with your

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peers, which you like to divide up and oh, and we, the other one is you could, we could have four big groups one corner, one corner, one corner, and two could do one of something right.

Female Speaker: Right sure.

Female Speaker: Right. So, we're ready to do it anyway you like, would you like to do it by tables or is that someone said that point.

Female Speaker: Okay.

Female Speaker: All right. So, we're going to do it by tables. Those of you who are very small number of people at your table they have, I think you might self invite yourselves over to another table or you might discuss if you would like to discuss among yourselves there is no issue of discussing with or yes.

Female Speaker: So, you know, we have a mixed people like we come from like next to the table here two people from New York they are kind of...

Female Speaker: Right.

Female Speaker: Then they may come through tables it doesn't have anybody?

Female Speaker: Oh that would be good, okay.

Lisa Merkel-Holguin: Yeah, that's a really good recommendation and may be if, if you're here with peers, you know, you split up a little bit so that you disperse that. These folks need people. So if you, if you have a need that your table to have somebody with Differential Response experience if you raise your hand.

Female Speaker: Right. And then don't forget the reporter. As I see two people, do I see people moving out.

Lisa Merkel-Holguin: Okay, right that would be good.

John: Yeah.

Lisa Merkel-Holguin: Yeah.

John: So.

Lisa Merkel-Holguin: It's good.

John: As Ying-Ying said, please remember to appoint somebody to report back.

Female Speaker: And you're going to call the timing.

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Lisa Merkel-Holguin: Yeah.

Female Speaker: I think 4:45.

Lisa Merkel-Holguin: Yeah.

Female Speaker: About 20 minutes, it's about 20 minutes discussion.

John: And you can circulate it.

Lisa Merkel-Holguin: Sure, I'll circulate.

Female Speaker: So, so Lisa you're going to chair the, Lisa you've to chair the reporting back right.

Lisa Merkel-Holguin: I'll be, I'll be happy to do that.

Female Speaker: And you could do the last slide.

Lisa Merkel-Holguin: Yes. Its okay, the die-hards mistake.

Female Speaker: What?

Lisa Merkel-Holguin: The die-hards mistake.

Female Speaker: Yeah, Yeah no that's good, that's good fine.

Lisa Merkel-Holguin: I told them what it was going to be before.

Female Speaker: You did.

Lisa Merkel-Holguin: Choose an advertisement.

Female Speaker: Which is the way to the elevator?

Female Speaker: Watch it; it was which is right on the other side of the elevator on this level.

Female Speaker: Oh okay, great.

[Background conversation] [00:36:00] [01:04:33]

Lisa Merkel-Holguin: We're going to get restarted here. I know that, so just kind of take the next two minutes to wind up your conversations. All right so we want to get restarted

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here. And the way we'd like to, we don't know if every table appointed an official recorder, but, we're hoping that there is someone at each table who would like to give just a one or two points that came out of your table discussions. And it could be I mean, we recognized that conversations were a little sprawling in the sense that you probably talked about programmatic characteristics as well as the unintended and intended consequences that you're seeing and I hypothesizing could, we could see as, as, this continues to unfold in communities around this nation.

So, we want to just do two quick points, because we're smart enough to know that we don't want to separate you from either putting your feet up on your bed, doing all your emails or going to dinner. So, and it's, we're to end it about 5:15, so I think we've got 15, 16, 17 minutes or so left in our session, but, we think of you really great to hear just some of the main points that came out of each group. And if I can just ask if there is two microphones down on the floor, one here at the front table and one at the back table, they are recording the session and I am to say as a reminder, I as this is, this is the reminder, the audio for the session will be digitally recorded and once formatted for accessibility standards will be made available through the Summit website. In lieu of written consent, participants who ask questions or provide comments during the session will be giving their permission or consent to this recording. And if you have any questions about the recording please feel free to talk to one of the Summit support staff. So, basically what you do say, can behold against you.

Male Speaker: And what are the other two disclaimers?

Lisa Merkel-Holguin: Exactly. So anyway, so, if you would, I mean not to be the wet blanket or anything, but, you know, we appreciate.

Male speaker2: I don't have anything to say.

Lisa Merkel-Holguin: Yeah we just, but, you don't have to identify yourself that's the good news, but, we do ask you to use the microphone when you, when you report out your tables one or two kind of main topics that you discussed. So do we have table that would be willing to go first? There has to be a bungee jumper in the group.

Female Speaker: I'm the bungee jumper.

Lisa Merkel-Holguin: Thank you.

Female Speaker: Is it actually I have to turn this?

Lisa Merkel-Holguin: Oh, yeah you have to turn it on and wait a second. Thank you.

Female Speaker: We have some colleagues from Louisiana, the wonderful State of Maryland, Alaska tribe as well as a researcher, PhD student from Wisconsin and I'm from Virginia. And, a couple of us have implemented some alternative response, or AR, AR systems, one of the things that just right upfront came up as, as a consequence I don't

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know if it's intended or unintended, but, it's that, it just helped to improve the screening process right at the hotline before there a lot of things were taken more on sort of gut level or how people were feeling that these families needed help, but, it wasn't standardized criteria. This helped on this, on the screening decisions. And another thing that we experienced in Virginia the Family Assessment initially we've been doing this for I don't know 8 or 10 years initially we thought that the Family Assessments would take less time. And of course you guys know that the, they probably in many, many cases take more time if you're doing a natural comprehensive assessments. So that was probably may be an unintended consequence that we found. Oh and we also have a radical suggestion that everybody, why don't everybody get AR, and then for anything that should really be an investigation have law enforcement handle?

Male Speaker: Okay, I'll start off, with a couple of them and then may be others in the table can, can chime in. We focused really on the unintended consequences. And, one, one of the unintended consequent was on the effect of DR on screening rates. And, what, what I appreciated about the discussion was that they were, they were equally good arguments for why it would, could push it up or pushing, push them down. Initially the argument for pushing them up being there is more service availability, people who are going to, who are, may report a family where it might not be more likely to report if they know that there is greater ability to help, you know, low-risk families who are having problems that may not have resources coming in from elsewhere.

One could also see the hotline screener is being if it's a tossup being more likely to toss them into the, in, in, into the system if, if they have a more confidence that they are going to receive some help that might improve their, there a lot on the other side though. Well and this actually goes back to this improving the screening process. And I do the same Colorado they really in preparing this screen-in process that support DR decisions, really sort of rebuilt that and added a lot of questions that gave you a depth of understanding of all the cases that came in. That to maybe you didn't, they didn't quite have before. And, and with more information means of higher quality decision all the way around and then that could well be reducing the, the, the rate and that's something one could see, one might see elsewhere

Other unintended consequences in the system thing that I, I do understand sort of, that there is a captive mandated, mandate for early intervention assessments for, for children. So when they go the DR track the mandate that, the mandate of referral is no longer required and that's something that one might within a forethought foresee, but, that's not, that's seem pretty far down the line and I think Minnesota is now reconsidering whether or not to make those referrals mandatory even for DR. So that was like a real life case of unintended, unintended consequences of DR.

Other than that there was mentioned unintended consequences of having a randomized control trial, just by the fact that, you know, it can affect, it can affect how the system treats families if they know there is people who are making decisions about where they're going to go, now there is only a 50-50 chance look good Differential Responses considering with investigative response rather than 100% chance for others. In a way is

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less control by the people who are making the decisions that can affect the thing that is supposed to be of value we're getting. So, and we evaluators we worry about stuff like that. That's, that's mostly what I had it before.

Female Speaker: Hi, we started talking about the unintended consequences as well. We kind of beat around the bush and we just started talking about it in general. Some of the points we were ahead up was that in order to really work with families when we work in this area we have to engage with them and the difficulty with that is among someone's knocking on your door you don't know if they're necessarily there to take your children and then help you. And, from that conversation we got into I'm an attorney and I still represent parents and kids and we started talking about how even representing parents until we had first, until we had our first court day it was really too hard to have them believe that I was there to advocate for them.

And so, how people must feeling people are knocking on their doors. And, from that situation someone else mentioned to process and you just touched on the whole having a child without actually when you're talking about voluntary placement and putting kids in other places when you find out things without having a court situation we think that's a very bad unintended consequence. And, I think, I think that's basically where we were at where in our group there were three states and just one that started so we're all kind of new to the site here and so we were just kind of talking it through. And I think we enjoyed the conversation I don't know if we are really adding to it, but, that's, that's where we went.

Lisa Merkel-Holguin: Thank you.

Female Speaker: Thank you.

Female Speaker: All right. So our group, we talked about some of the things some other groups have talked about, but, I guess a few major themes that emerge was that we talked about one unintended consequence would be the challenge of data analysis with the changes and Differential Response and how trauma treatment is defined and the numbers and how they, how they change over time. So from a statewide our management perspective being able to identify the numbers of children who been maltreated and knowing where to, whether those numbers are going up or down as often indicative of how the states doing overall and they are just supposed the challenge the interpretation especially with the other, another unintended consequence possibly being that with great, with greater public awareness of these programs and additional services for low-risk families there may be a spike in referral rate so they may say, you know, they need more likely to report children knowing they may not be a negative stigmatized and they may not be victims or perpetrators involved, but, just there is more services.

So, with the, then you see, if you see an increase in referral rates and again that kind of ties back to the challenge in the data analysis perspective and say, oh, what is this mean, do we have a big problem. So, those were kind of the, some of the major questions that we, that we talked about just in terms of tracking the data, what kind of information and

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how much information is being kept in the system on children who are getting Differential Response and whether that, how consistent if that is across counties with private providers and so forth having the data in different places and not necessarily all centralized in the state system. Is there anything left out? Okay. That was basically.

Female Speaker: We clearly didn't have a recorder. I guess they were when I'm thinking that we talked to about lot of different issues focused mainly on unintended consequences, but, from the beginning we learnt that one person in our group worked for the majority of his career in Switzerland where apparently and you can correct me if I'm wrong on this, that all cases are handled through Family Assessment except three, four cases that need law enforcement when that was then handled in the courts.

So that kind of split a conversation of, is that ideal, is that something we should be moving towards, what are the present concept of moving toward this system, like that. And, we also talked a lot about in terms of workforce, mixed caseloads, or having caseworkers in one office that are doing alternative response and then also caseworkers who like doing like an investigation and how they're might be spill over and how that's hard to measure and what are the present concept having a caseworker handle both types of cases, is that positive thing or is that going to results in, in effective investigations. I think those are the two areas we spent the most time or is that we have anything else to add?

Female Speaker: Our table what was left of it? We had three folks from three different states and we had Pennsylvania, North Carolina and Wyoming. And, so one state has had a Differential Response system for a number of years. One of them has an informal kind of, way of sorting definitions that feels like a Differential Response and the other one is considering, implementing a Differential Response. Under intended consequences, in North Carolina the model uses legal definitions of abuse neglect and dependency to screen our reports in or out before they are assigned to a track. So, we had the intended consequence of not changing those screening decisions at all. The number of reports that come in might be different, but, they'd still be, they'd all be screened by the same criteria before they were assigned to a track.

Unintended consequences, in North Carolina what we have seen is that in the Family Assessment cases services are being "frontloaded" and provided to the family during the assessment process instead of after the case decision. And the concern about that is that, families not getting a formal case planning process that they would have if it had gone to a case decision and been assigned to in-home services. And I think that was all that we that we noticed that we wanted to bring to the group's attention.

Female Speaker: I think everyone has kind of disappeared to hear at our table end. I think at our table we actually ended up having a lot more questions than we did answers. None of us were directly in the field, I'm two years removed from the state of North Carolina and you just heard about what North Carolina is doing. But, we had a good conversation what's John and appreciate him answering. A lot of the questions that we had and especially one that keeps coming back to me, are children as safe using the

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Differential Response model as they are and do with an investigative response? And John assures me they are, right John.

John: Oh, oh.

Female Speaker: Oh, oh.

Female Speaker: Oh, oh. So, we really don't have a lot to and we have a lot of the same conversation as everybody else did, but, we do have a lot of questions that would be interesting to see as people really implement this to get our questions answered through the data.

Lisa Merkel-Holguin: You know, there are so many, there are, this first kind of originated itself at Florida in 1993. And then we saw Missouri implement and then Minnesota. And once Minnesota did a randomized controlled trial which Erin described this morning here are the, a number of states that were increasingly interested. And as sub-states of common they've been about four states that started and expanded. And we know now with the captive guidance while it's very general in nature, but, the new captive guidance is asking states to describe how they're going to implement Differential Response and again it's very general so there is going to be a lot of latitude in how states can define what they mean by Differential Response, but, we know that it, you can, on our website we have a little map that shows all the different states and where they're at with implementation and it seems like almost, you know, once every quarter we have to update the map, because there is some type of change either somebody new is considering, somebody has expanded, you somebody went from a pilot in ten countries to a full state implementation.

And so we, and yet we know that there are just from the questions that you raised in the comments that you're in the discussions that your group had. There are so many questions as systems go about implementing these type of reform, there are so many questions whether they be at, at, from a screening standpoint, services, do families get the service planning look different for families, are we really frontloading services, are families engaged any differently, does removing the substantiation decision make any impact at all for families, does it matter whether you have a caseworker who has got both types of cases that their working does that change their casework practice with families. That there are so many questions and we know that we're very thankful to the children bureau for investing in an ordinary amount of resources to study this, because and while we know that our Quality Improvement Center will not be able to answer all of these questions that you have.

Female Speaker: She still can treat her.

Lisa Merkel-Holguin: We, we, we are hopeful that the local side evaluators that we have or local research and demonstration sides, and the cross side evaluation that we will have some answers in two years related to the three core questions, but, then obviously from those three core questions there are many, pieces that we will studying more in depth as

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well. And we hope at the end of the five year journey that we're on that we will be able to provide sufficient guidance to the field. And the lessons that have been learnt from at least the three research and demonstrations sides that have been part of our project.

So with no further ado, I think I want to thank you for sticking it out. And we appreciate it just the dialog and the free sharing of information and should you have any questions there is our contact information which is also on the slides. So, those are my guys, he is a little ones in angel, so. And also I should also just tell you if you're interested with, at the American Humane Association does host a conference on Differential Response every year this year it's in Chicago in November and so we have just some sample copies of the program that what it looks like, it's usually gathering about 400 people from around the country that are working towards implementation or wanting to learn about it. And then one of the resources that we'll have at our display tables also just the literature review which, which looks at the existing literature on Differential Response. So, again thank you very much for your participation.

Female Speaker: Thank you, thank you Lisa.