DEPARTMENT OF CHILDREN, YOUTH, AND FAMILIES

Child Maltreatment Reporting Study

Legislative Report

06/01/2025

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As requested by Minnesota Statute 3.197: This report cost approximately $185,210 to prepare, including cost of the contract ($180,508) and department staff time ($4,702).

Contents

Introduction

The 2024 Minnesota legislature passed legislation that required the Department of Children, Youth, and Families (department) to conduct a review of child maltreatment reporting processes and systems. The legislation required that the department review child maltreatment reporting systems in other states, consult with stakeholders, and outline the benefits, challenges and costs of a transition. This report serves as the outcome of this review.

> **Direction to Commissioner; Child Maltreatment Reporting Systems Review and Recommendations**
>
> The commissioner of children, youth, and families must review current child maltreatment reporting processes and systems in various states and evaluate the costs and benefits of each reviewed state's system. In consultation with stakeholders, including but not limited to counties, Tribes, and organizations with expertise in child maltreatment prevention and child protection, the commissioner must develop recommendations on implementing a statewide child abuse and neglect reporting system in Minnesota and outline the benefits, challenges, and costs of such a transition. By June 1, 2025, the commissioner must submit a report detailing the commissioner's recommendations to the chairs and ranking minority members of the legislative committees with jurisdiction over child protection. The commissioner must also publish the report on the department's website.
>
> [Laws 2024, chapter 115, article 12, section 31]

The department contracted with The Improve Group to conduct the review within the time frame outlined in session law. The Improve Group is an evaluation consulting cooperative that has worked for 25 years with public, nonprofit and philanthropic clients and is based in St. Paul. The Improve Group conducted a review of other states, completed a survey to collect data from stakeholder groups and conducted listening sessions. The Improve Group developed initial themes from their activities that the department, after further engagement, narrowed down into recommendations.

Study overview

The Improve Group conducted a review of child maltreatment reporting systems beginning in October 2024, which involved:

- Conducting a survey
- Hosting listening sessions
- Reviewing other states' reporting systems and processes
- Conducting interviews of staff from other states on the benefits, challenges and costs of their reporting hotlines
- Developing themes and initial recommendations.

See The Improve Group's full study in Attachment A.

The Improve Group identified limitations to the project due to time and resource constraints. When reviewing the results, consider the following limitations:

- There was a lack of adequate time for full engagement with all Minnesota Tribal Nations, families with lived experience and Tribes or local agencies in other states.
- Survey and listening session responses were based on each person's vision of a centralized system; since Minnesota does not use a centralized system, responses were based on a person's knowledge of other states that have varied centralized systems.
- Survey and listening session responses may have been limited based on knowledge and interactions with Minnesota's current adult abuse reporting system and past experiences with the state and bureaucratic systems.

The Improve Group developed the following themes based on input from various sources. The individuals who engaged with the study identified similar themes and key considerations related to a centralized system. Opinions varied on whether Minnesota's current reporting and screening system already meets these needs or if a centralized system is necessary. The common themes identified a system that considers improvements in:

- Reporter experience
    - Reporters experience no wait times when reporting.
    - The system to make a report is available 24 hours per day and 7 days per week.
    - Reporters can make a report in a variety of methods, including by phone, email and/or in person.
    - Reporters can easily locate where to report.
    - Mandated reporters and local child welfare staff have robust working relationships to provide exceptional customer service.

- Quality of reports
    - The system employs highly trained professionals who take and document reports.
    - There are built-in mechanisms to ensure staff are supported when experiencing secondary trauma.

- Screening practices and decision making
    - There is statewide consistency in how reports are received, documented and screened.
    - Bias does not impact screening decisions.
    - Disparities in reporting and screening are decreased or eliminated.
    - Intake staff are adequately trained in cultural responsiveness to avoid a "one-size-fits-all" approach.
    - Intake staff receiving reports are aware of and understand the community culture.

- Timeliness and responsiveness
    - The reporting system is available 24 hours a day, 7 days a week.
    - Screening an intake occurs immediately or within 24 hours.

    - Counties have clear guidance on jurisdiction.
    - The data collection system used to document reports is adequate and up to date to meet the needs for reporting.

- Tribal sovereignty
    - The reporting and screening system helps maintain and strengthen Tribal sovereignty.
    - Intake and screening staff are adequately trained on Minnesota Indian Family Preservation Act (MIFPA), the Indian Child Welfare Act (ICWA) and cultural responsiveness.
    - Intakes are readily shared with Tribes, and Tribes are invited into decision-making, unless the Initiative Tribe is solely responsible for intakes.
    - There is a robust working relationship between counties and Tribes.

- Local knowledge and expertise
    - Staff who receive, document and screen intakes have knowledge of local resources to share with reporters.
    - There is robust collaboration and relationships between child welfare and local community organizations to support reporting and screening.

- Information access and sharing
    - There is clear guidance on jurisdiction to reduce confusion and disputes.
    - A data collection system is in place, providing swift and easy access to data throughout the state.
    - The intake system includes a process for monitoring and quality improvements, including timeliness and customer service.

The Improve Group developed the themes into initial recommendations for the commissioner to consider, including:

- Clarify the problem that needs to be addressed.
- Dedicate more time for meaningful engagement.
- Learn more from local agencies about successful intake and screening practices.
- Learn more from Minnesota's adult protection reporting system.
- Continue to engage all groups who would interact with a centralized system throughout its design.

Centralized reporting system cost analysis

In the state research, The Improve Group included a component related to costs for a centralized system. Public data about costs for a centralized hotline system was difficult to obtain, as each state's centralized system is operationalized differently. Through interviews, the study was able to obtain two state hotline reporting system budgets; one was $31 million, and the other was an annual budget of $1.15 million with an additional $4.3 million for child welfare training.

The department reviewed Minnesota's costs for the current centralized system for adult abuse reporting. Minnesota's adult abuse reporting system contracts with a third-party vendor with 25 FTE trained agents. The contract with the vendor is for $2.2 million in state fiscal year 2025. The adult reporting system costs do not include the information technology system for receiving and recording reports, or the additional 4.5 FTE Department of Human Services staff. A centralized child abuse reporting system would require additional staff due to the higher number of reports received annually in child protection compared to adult protection. Additionally, there will be costs for specific training that is required to receive and document child maltreatment reports.

A centralized child abuse reporting system would require significant updates to the current Social Service Information System (SSIS) used to document reports. The department was unable to obtain an estimated cost to centralize the child abuse reporting system in SSIS, because this work in the current system would not be feasible at this time. The current system lacks the capability to incorporate the necessary functionality for a centralized reporting system. The required updates to centralize would need to occur with modernization and it is not included in the current modernization plans or costs.

Development of recommendations

After the department received the report and recommendations for the commissioner's consideration, it hosted additional listening sessions in March. Department staff offered meetings with Initiative Tribes and non-Initiative Tribes to discuss the report and engage in recommendations. The department acknowledges that the limited time frame made it difficult, if not impossible, for Tribes to engage during and following the completion of the report.

After the final report, department staff held a meeting with the Initiative Tribes of White Earth Nation, Leech Lake Nation and Red Lake Nation. A centralized system was not supported by those present from the Tribal Nations due to concerns that it would weaken Tribal sovereignty and increase bias in screening decisions when those decisions are not allowed to be made locally. The recommendation was for the department to improve reporting and screening at the local level, which requires the inclusion of Tribes in screening decisions when it involves children who are enrolled or eligible for enrollment with Tribes. Additional recommendations were provided to improve quality assurance methods and accountability. The department acknowledges that further engagement with Tribes is necessary to fully explore the impact to Tribes as sovereign nations.

Department staff also hosted four listening sessions open to the public and attended by county staff, stakeholders and people with lived experience. During the listening sessions, participants learned about the Improve Group's study and the identified common themes to improve Minnesota's child maltreatment system. During the listening sessions with counties, participants expressed opposition to a centralized reporting system. Stakeholders and people with lived experience had differing opinions on centralization. From the themes, participants shared ideas for improvements and recommendations for the department to consider. The department acknowledges that further engagement with counties and other interested parties is needed to explore this topic fully. These engagement efforts informed the final recommendations.

Department recommendations

Time limitations prevented full engagement of all Tribes and voluntary reporters. Input obtained during the study was provided mainly by counties, mandated reporters and the Initiative Tribes. Most of these groups strongly opposed centralizing the child maltreatment reporting system. The department could continue to explore centralization with additional time and resources. However, the department does not recommend pursuing a centralized child maltreatment reporting system at this time due to insufficient support for centralization from partners who would be impacted as well as the need for SSIS modernization requirements. The department instead recommends the following support and resources to enhance the current reporting system:

- Access to reporting contact information: The department and local child welfare agencies should ensure child maltreatment reporting contact numbers are clearly publicized and kept up to date.
- Intake and screening training: The department should enhance, maintain and provide intake and screening training for intake and screening staff and multidisciplinary screening teams.
    - Additional resources are needed to implement this recommendation.
- Training on cultural responsiveness and legal protections for overrepresented communities, including disability and economic stability: Training must include education on the Minnesota Indian Family Preservation Act (MIFPA), the Indian Child Welfare Act (ICWA) and the Minnesota African American Family Preservation and Child Welfare Disproportionality Act (MAAFPCWDA).
    - Additional resources are needed to implement this recommendation.
- Mandated reporter training: The department should increase efforts to ensure widespread awareness of available mandated reporter training.
- Strengthened screening guidelines: The department should engage with the existing statewide intake and screening workgroup to enhance the current guidance on engagement and questions to ask when receiving a report, including the development of an intake desk aid.
- Anonymous screening: There should be further exploration of a pilot related to anonymous screening.
    - Additional resources are needed to implement this recommendation.
- Warm line: There should be further exploration on developing of a warm line for reporters.
    - Additional resources are needed to implement this recommendation.
- Modernizing technology: Social Service Information System (SSIS) modernization for reporting and documenting intakes is necessary.
    - Additional resources are needed to implement this recommendation.

Attachment A

Department of Children, Youth, and Families Child Maltreatment Reporting System Study

Final report

February 2025

The Improve Group

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EXECUTIVE SUMMARY

Background

Across the country, states use many strategies to operate their child welfare systems. In Minnesota's system, local child welfare agencies take and screen reports of suspected child abuse and neglect for each of their counties or reservations. However, in some other states, reporting and/or screening are centralized, or operated by the state.

In 2024, the Minnesota Legislature passed a bill requiring the Department of Children, Youth, and Families (DCYF) to develop recommendations about the possibility of implementing a statewide child maltreatment reporting system. The bill required a review of reporting systems in other states as well as consultation with stakeholders on the benefits, challenges, and costs of a statewide reporting system in Minnesota. DCYF engaged The Improve Group to conduct a study to address these needs.

Methodology

The Improve Group collected data for the study through three data collection methods:

- A short online **survey** for previous or potential child abuse and neglect reporters. The survey received 1,112 responses.
- Five **listening sessions** for stakeholders in the child welfare system: two for county child welfare staff, two for non-county stakeholders, and one for Minnesota's Initiative Tribes. In total, 113 individuals attended listening sessions.
- **Research on other states.** The Improve Group reviewed publicly available information for 20 states with a variety of administration systems and conducted interviews with state staff for five states. Eighteen state staff participated in interviews about their states' systems.

Limitations

This study has limitations that should be considered when interpreting and applying results. Limited time and resources meant DCYF and The Improve Group were not able to sufficiently engage some groups with important perspectives to share, such as Tribal Nations and people with lived experience with the child welfare system. Also, without a proposed centralized reporting system to which they could react, participants gave input based on what they envisioned for the system, which varied a great deal.

Findings

Current landscape

The 20 states reviewed through this study had varied systems and processes for taking and screening reports of suspected child abuse and neglect. Most state-administered states use centralized systems for taking reports, while most county-administered states use local

reporting. States vary in the roles of the individuals who take reports and whether they screen reports centrally or locally.

In Minnesota, survey respondents, especially those who made reports in the past, generally provided positive feedback about their experiences with Minnesota's reporting system.

Key considerations related to a centralized system

Participants had a range of hopes and fears around the possible implementation of a centralized child maltreatment reporting and/or screening system in Minnesota. These findings show what participants think is important to consider or address in designing and implementing a centralized system.

Reporter experience

Participants raised that a centralized hotline could make the reporting process easier. Participants also expressed concerns about how distrust of the State and challenges like long wait times and removal of in-person reporting could impact the number of reports.

Quality of report-takers and reports

Participants hoped that a centralized system would use highly trained and specialized intake staff. However, participants shared concerns that a centralized system would use unqualified staff, which could decrease report quality. They also feared that staff solely focused on intake would have a higher risk of experiencing secondary trauma and burnout.

Screening practices and decision-making

Participants raised that a centralized system could improve consistency and reduce personal bias introduced during intake and screening. However, participants also expressed concerns that a one-size-fits-all approach and a lack of multidisciplinary decision-making teams in a centralized system could negatively impact families. They also raised concern around decision-making without awareness of local culture and context.

Information-sharing and access to information

Participants hoped that a centralized system could reduce jurisdiction issues and improve information management and access. They also saw potential for better monitoring and quality improvement practices and procedures. However, participants also expressed concern that the current information sharing system, Social Service Information System (SSIS), is not capable of meeting the needs of a centralized reporting and/or screening system.

Timeliness and responsiveness

Participants raised that a centralized system could improve access to reporting, especially for county agencies that defer after-hours reports to law enforcement. However, participants also raised concerns about a centralized system negatively impacting the timeliness of report processing and decision-making.

Local knowledge and expertise

Participants hoped for increased resource availability and coordination in a centralized system. Participants also described possible harm to local relationships as well as challenges due to lack of knowledge of local resources in a centralized system.

Tribal sovereignty and collaboration

Participants at the listening session for the Initiative Tribes emphasized the fact that Tribal administration of child welfare directly maintains Tribal sovereignty and allows for cultural knowledge and for community relationships, which are extremely important. They also drew attention to the need for more information before they could provide adequate feedback about a potential shift to a centralized child maltreatment reporting and/or screening system.

Study participants identified possible benefits around streamlined collaboration with Tribes. Conversely, participants discussed possible harm to Tribal sovereignty through exclusion from decision-making.

Implementation and resources

Participants suggested that shifting intake workload from local agencies to the State could benefit local agencies. Participants also raised potential challenges related to the financial cost of implementing a centralized system, as well as possible unintended consequences of a transition.

Other potential impacts

Participants expressed concern that a centralized system could negatively impact local child protection workers and could decrease child safety overall.

Impacts on disparities and inequities

There was no clear agreement on how a centralized reporting and/or screening system could or would impact disparities and inequities in Minnesota. In addition, participants raised concerns that due to systemic forces, a centralized system may perpetuate or worsen existing disparities.

Resources needed to implement a centralized system

Participants felt that a shift to a centralized system would require significant investments in a wide range of areas, such as staffing, training, education, technology, and more.

Recommendations

The following recommendations are intended to help guide the State's future work considering a centralized child abuse and neglect reporting system in Minnesota. Recommendations include:

- Clarify the problem that needs to be addressed.
- Dedicate more time and financial resources for meaningful engagement.
- Learn more from local agencies about successful intake and screening practices
- Learn more from Minnesota's adult protection system.
- Continue to engage all groups who would interact with a centralized system throughout its design.

Conclusion

Despite the range of beliefs around potential benefits and challenges, these ideas reflect an underlying desire for the safety and wellbeing of children and families statewide through a fully funded and resourced child welfare system. Further engagement and research will be needed to determine whether or how a centralized system would best achieve these goals.

INTRODUCTION

The State of Minnesota uses a state-supervised, county-administered child welfare system. The State oversees child welfare services, while local child welfare agencies manage day-to-day operations and carry out child welfare work. In this system, people make reports about suspected child maltreatment (e.g., physical abuse, neglect, sexual abuse, substantial child endangerment, threatened injury, mental injury, human trafficking, etc.) to the local child welfare agency where suspected maltreatment occurred. These local agencies also screen reports (i.e., decide whether the report meets the definition of child maltreatment). Local child welfare agencies include Minnesota's 87 counties and the 11 Tribal Nations who share geography with Minnesota. Three tribes—White Earth Nation, Leech Lake Band of Ojibwe, and Red Lake Nation—directly receive and screen child protection reports for children and families living on their reservations as part of the American Indian Child Welfare Initiative ("Initiative Tribes"). Counties are required to notify and include the appropriate Tribe(s) when they receive intakes on children who are enrolled or eligible for enrollment in that Tribe. Counties are also required to conduct inquiry to identify if a child has American Indian heritage and, if so, notify the appropriate Tribe(s) for further involvement.

However, there are different ways states manage child abuse and neglect reporting. In addition to locally administered systems, like Minnesota's, some states have centralized systems that are state-administered. Other state systems are a mix of state- and locally administered.

In 2024, the Minnesota Legislature passed a bill that required the commissioner of Minnesota's Department of Children, Youth, and Families (DCYF) to review child abuse and neglect reporting processes and systems in other states. The bill also required the commissioner to gather input on the implementation of a centralized (i.e., state-administered) abuse and neglect reporting system in Minnesota. The bill, Minn. S.F. 115 art. 12, sec. 31, states:

> "The commissioner of children, youth, and families must review current child maltreatment reporting processes and systems in various states and evaluate the costs and benefits of each reviewed state's system. In consultation with stakeholders, including but not limited to counties, Tribes, and organizations with expertise in child maltreatment prevention and child protection, the commissioner must develop recommendations on implementing a statewide child abuse and neglect reporting system in Minnesota and outline the benefits, challenges, and costs of such a transition. By June 1, 2025, the commissioner must submit a report detailing the commissioner's recommendations to the chairs and ranking minority members of the legislative committees with jurisdiction over child protection. The commissioner must also publish the report on the department's website."

About this report

This report presents the study findings focused on understanding the potential implications of implementing a centralized child abuse and neglect reporting and/or screening system. The research questions that guided the study were:

1. How do child maltreatment reporting and screening systems work in other states?

    a. What benefits and challenges do other states experience through different approaches?
    b. What are the resources necessary for different approaches?
    c. How do different approaches affect engagement with Tribal nations?
2. What do Minnesota stakeholders and Tribal nations think would be the implications of implementing a statewide child maltreatment reporting and/or screening system in Minnesota?
    a. What do stakeholders and Tribal nations see as potential benefits of implementing a statewide system?
    b. What do stakeholders and Tribal nations see as potential challenges with implementing a statewide system?
    c. What resources are necessary in implementing a statewide system?
3. How might a statewide child maltreatment reporting and/or screening system impact disparities and inequities in Minnesota's child welfare system?

In addition to this report, DCYF will submit a report by June 1, 2025, to legislative committees with jurisdiction over child protection with their recommendations on implementing a statewide child abuse and neglect reporting system in Minnesota.

About The Improve Group

DCYF selected The Improve Group as its external research partner for this study. The Improve Group is a worker-owned evaluation consulting cooperative that provides evaluation, planning, facilitation, and community engagement to support mission-driven organizations. Based in St. Paul, The Improve Group has worked with public, nonprofit, and philanthropic clients across Minnesota, the U.S., and internationally for 25 years.

METHODOLOGY

The Improve Group collected both qualitative and quantitative data to answer the research questions.

Data sources

Data sources for this study included a survey, community listening sessions, and research into other states with selective interviews. Each data source sought to provide insight into one or more research questions, as shown in Table 1.

Table 1. Data sources and aligned research questions.

Data source	Aligned research questions
Survey	2, 2a, 2b, 2c, and 3
Listening Sessions	2, 2a, 2b, 2c, and 3
State Research	1, 1a, 1b, 1c and 3

Survey

The Improve Group administered a short online survey to previous or potential reporters of child abuse or neglect. The survey focused on their knowledge of and experience with the current child maltreatment reporting system. The target audience for the survey was mandated reporters (professionals identified by law who must make a report if suspected or known child abuse and neglect has occurred, such as teachers, childcare providers, health care providers, and more) as well as the general public, since anyone could report potential child abuse or neglect.

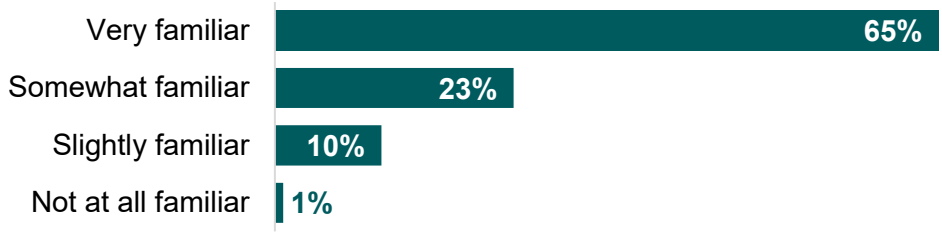
The survey mainly collected quantitative data but included a few brief open-ended qualitative questions for participants to elaborate on their responses. The survey included questions about what people know and/or feel about the current child abuse and neglect reporting system and their beliefs about the impacts of a centralized reporting and/or screening system. The survey protocol is included as Appendix A.

DCYF conducted most survey outreach, using its networks and leveraging existing relationships, organizations, listservs/newsletters, and other internal systems to invite stakeholders to participate and share the survey link. The Improve Group supported outreach by suggesting outreach avenues/language for DCYF to use, and by conducting limited outreach.

A total of 1,112 respondents took the survey. These respondents represent 81 of Minnesota's 87 counties (1,037 responses) and two of the 11 Tribal Nations that share geography with Minnesota (three responses). Geographical information was missing in 72 responses.

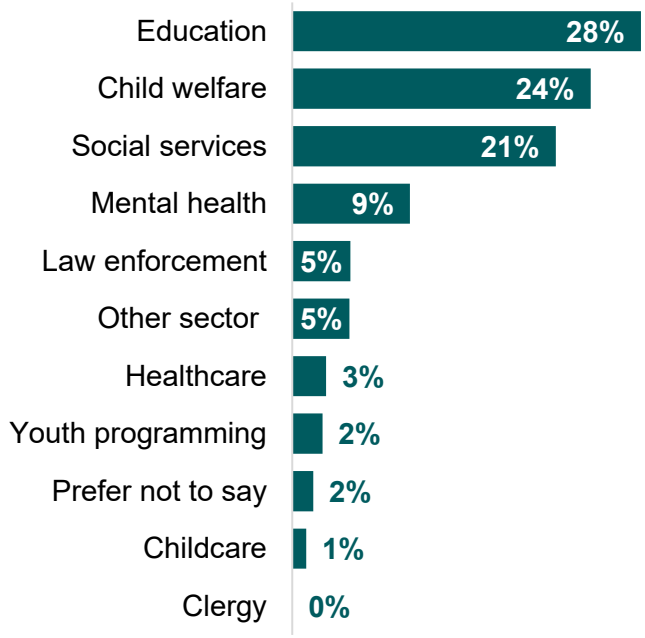
The majority of respondents (65 percent) were "very familiar" with the child welfare system, as shown in Figure 1 below, with 96 percent indicating they were a mandated reporter of child abuse and neglect.

Figure 1. Survey respondents' level of familiarity with the child welfare system (n=1,108).



Survey respondents mostly worked in education, child welfare, or social services, as shown in Figure 2. Of those who selected "child welfare," 88 percent indicated they currently worked in a county or Tribal child welfare agency. Ninety-one percent of survey respondents had reported suspected child abuse/neglect.

Figure 2. Survey respondents' primary sector of work (n=1,066).



Listening sessions

The virtual listening sessions gathered in-depth information and insights from various stakeholders related to the child maltreatment reporting system, such as county staff, child maltreatment prevention/protection organizations, law enforcement, families, advocacy groups, culturally specific organizations, and others. The Improve Group conducted five 90-minute listening sessions. Two listening sessions were held for county child welfare staff ("county listening sessions"). Two additional listening sessions were intended for all other stakeholders, such as mandated reporters across a wide range of sectors, families with lived experience, child abuse prevention organizations, and others interested in giving input ("non-county listening sessions").

Tribal representatives were invited to attend both county and non-county listening sessions. The Improve Group also held one listening session for representatives of the Initiative Tribes ("Initiative Tribes listening session") and conducted one interview with a non-Initiative Tribe. In addition, The Improve Group attended an Indian Child Welfare Advisory Council meeting and offered feedback opportunities through an anonymous survey, email, and interviews. However, the limited timeline and process for data collection prevented many Tribes from engaging through these mechanisms; insufficient Tribal engagement and feedback is a limitation of this study.

The Improve Group designed listening sessions to be interactive, facilitated spaces to gather input and ideas. Participants used an online platform, Padlet, to share feedback on the question "How do you think the following factors would be affected if Minnesota used a statewide child maltreatment reporting and/or screening system?" Proposed factors included: access to information, community resources and referrals, counties' role in reporting and screening, disparities and inequities, families and children, jurisdiction issues, immediate response and placement situations, staffing, Tribal role in reporting and screening, your work/experiences, and other factors. Following the full group Padlet activity and conversation, participants transitioned into small group breakout rooms to discuss potential benefits, challenges, equity considerations, and the resources that would be required to transition to a centralized system.

DCYF and The Improve Group used similar outreach strategies and methods for the listening sessions as they did for the survey.

A total of 63 county child welfare staff attended the two listening sessions dedicated to county workers. Fifty-three counties were represented in the county listening sessions, with 51 participants working in greater Minnesota and 12 participants working in the seven-county metro. As shown in Figure 3, almost half of participants reported their primary roles as leadership or management positions.

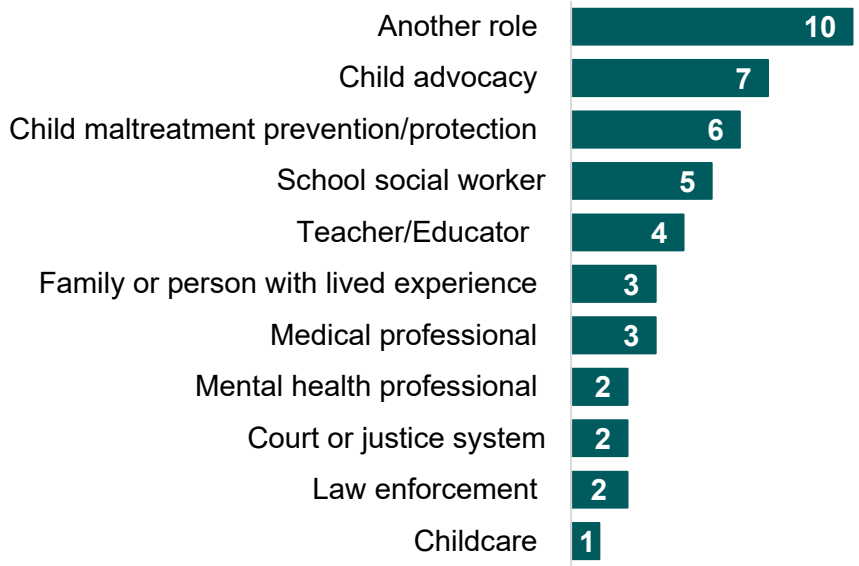
Figure 3. County listening session participants' primary role in the child welfare system (n=63).

A total of 45 stakeholders attended the two listening sessions dedicated to non-county stakeholders. Twenty-two counties were represented in the non-county listening sessions, with

24 participants living and/or working in greater Minnesota and the remaining 21 living and/or working in the seven-county metro.

As shown in Figure 4, participants reported working in a variety of roles across the advocacy, education, medical, and justice sectors. A few participants had lived experience with the child protection system. Stakeholders who selected “Another role” when registering specified that they worked in a variety of child welfare community programs or initiatives.

Figure 4. Non-county listening session participants’ primary role in the child welfare system (n=45).



Five Tribal representatives attended the listening session dedicated to Initiative Tribes. These individuals represented the three Initiative Tribes: White Earth Nation, Leech Lake Band of Ojibwe, and Red Lake Nation.

State research

For 20 states, The Improve Group reviewed publicly available information (“basic research”) to collect data about the state’s reporting and screening processes, engagement with Tribes and other entities, investigation and case management practices, disparities, and recent system changes. The Improve Group and DCYF selected the 20 states to represent all three types of administration: county administration, state administration (i.e., centralized administrative system), and hybrid administration (i.e., some areas administered by the state and some by counties). All county-administered states were included in the sample due to their similarity to Minnesota’s current system. The selected state-administered states were chosen because of their similar population density patterns to Minnesota (i.e., one or two higher density areas with the remaining geography having moderate to low population density). Both hybrid states were included due to the uniqueness of their administration systems. The selected states are shown in Table 2.

Table 2: States selected for basic research.

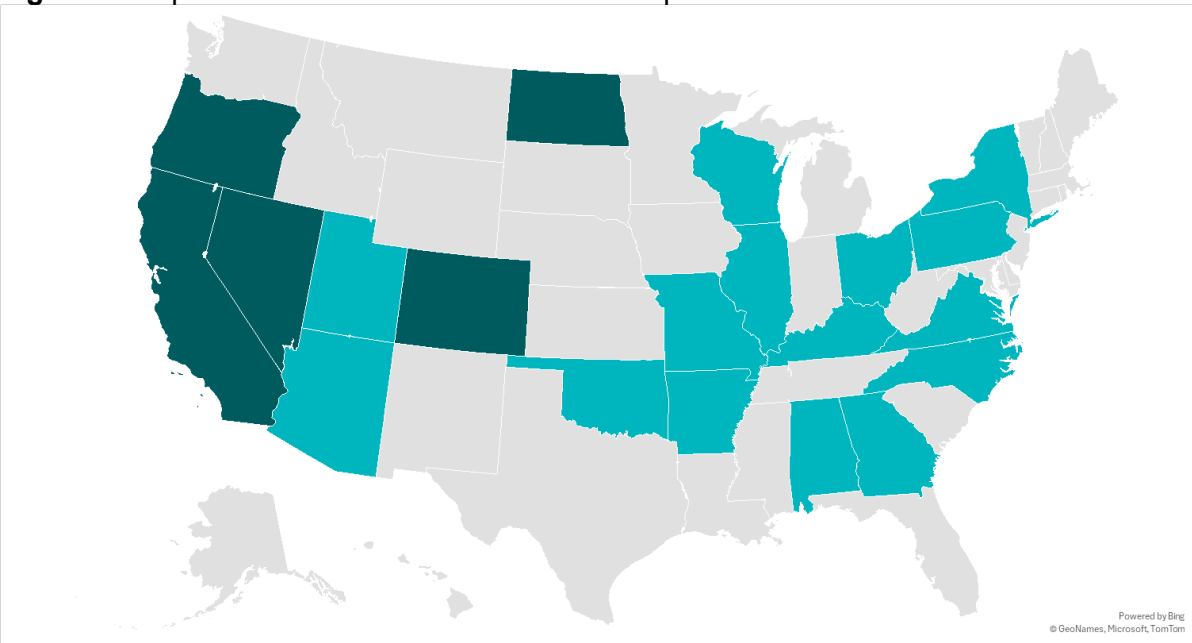
County-administered states	State-administered states	Hybrid states
California	Alabama	Nevada
Colorado	Arizona	Wisconsin
New York	Arkansas	
North Carolina	Georgia	
North Dakota	Illinois	
Ohio	Kentucky	
Pennsylvania	Missouri	
Virginia	Oklahoma	
	Oregon	
	Utah	

The Improve Group conducted more comprehensive research, which included further review of publicly available information as well as interviews with state staff, for five of the 20 states. The Improve Group and DCYF selected California, Colorado, Nevada, North Dakota, and Oregon to represent a mix of administration systems and to learn from states with robust Tribal engagement and/or recent changes to their systems. Interviews with state staff provided deeper information about how reporting and screening are implemented within each state, as well as opinions about benefits, challenges, and costs. The state research interview questions are included in Appendix B. The Improve Group conducted six interviews with 18 state representatives.[1]

Figure 5 below illustrates the states selected for research. The light teal indicates basic research, and the dark teal indicates comprehensive research.

[1] There were multiple representatives from each state for most interviews. The Improve Group conducted two separate interviews for Oregon.

Figure 5. Map of states selected for basic and comprehensive research.



Limitations

This research has limitations that should be considered when interpreting results, doing additional research, and making decisions.

Timeline and resources

The legislative and DCYF timelines allowed for a study timeline of five months, from October 2024 to February 2025, which included about six weeks to gather input from people. This gave time for The Improve Group to engage the following groups in different ways:

- A survey of people who have reported or may report suspected cases of child abuse or neglect.
- Listening sessions with people who work or are involved in the child welfare system.
- Interviews with other states to learn about their child abuse and neglect reporting systems.

Unfortunately, time and resources were insufficient to fully engage all groups with an important perspective to share. Therefore, The Improve Group could not sufficiently include perspectives from the following groups in this report:

- Tribal Nations. From the beginning of the study, it was known that meaningful and respectful engagement with Tribal Nations was not feasible in the required timeframe. As a result, many Tribes' voices are not included (seven of 11).
- Families who have lived experience with the child welfare system.
- Tribes or local agencies in other states.

Focused outreach

Due to the short timeline and available resources, the study focused on outreach to potential participants through existing channels to connect with people, like email contact lists and listservs. This outreach mostly reached people who engage with the child protection system as part of their job, rather than those with lived experience.

No system to react to

In this study, participants answered questions about a centralized child abuse and neglect reporting system that does not exist, and participants' responses were based on what they envisioned. Because of this, some participant responses may have been limited to comparisons to the state's system for adult abuse reporting (the Minnesota Adult Abuse Reporting Center, MAARC) and their experiences with centralized systems in other states. In addition, past experiences with the State and bureaucratic systems seemed to influence some responses.

FINDINGS: CURRENT SYSTEM LANDSCAPE

Before considering the potential benefits and challenges of a centralized system, it is important to understand the context of child abuse and neglect reporting and screening systems nationally and in Minnesota. This section shares the study's findings related to how child maltreatment reporting and screening systems work in other states. It also shares results from the reporter survey about experiences with Minnesota's system.

Other states

Across the country, states use many strategies to operate their child welfare systems, though most are either state-administered or county-administered. As of 2018, most states used a centralized approach (i.e., state-administered), and Minnesota was one of nine county-administered states.[2] Two states are considered "hybrid," in that some areas of the state are state-administered and others are county-administered.

Within the broad administrative categories, The Improve Group found through basic research that states vary in their exact systems and processes for taking and screening reports. While state-administered states generally use centralized systems (i.e., a statewide hotline) for taking reports, this is not the case for all. Conversely, most county-administered states use localized reporting (i.e., reports are made directly to local agencies), though a few also use a centralized hotline.

Regardless of where the report is made, states also vary in the roles of the individuals who take reports. In some states, social workers take reports; in others, intake workers have specific training or skillsets ("trained professionals"); and some states do not publicly share roles of those who take reports.

Finally, responsibility for screening reports also lies at different levels (centralized vs. localized) across states. While screening responsibility generally aligns with administration (i.e., screening is centralized in centralized systems), there is again variation across states.

See Table 3 below for a summary, based on interpretation of publicly available information, of child protection reporting and screening systems in the 20 states selected for basic research.

[2] Child Welfare Information Gateway. (2018). State vs. county administration of child welfare services. Washington, DC: U.S. Department of Health and Human Services, Children's Bureau.

Table 3. Summary of child welfare reporting and screening systems in 20 selected states.

State	Administrator	Statewide hotline?	Report-taker role	Responsible for report screening
Alabama	State	No	Unknown	Unknown
Arizona	State	Yes	Social worker	Centralized
Arkansas	State	Yes	Unknown	Centralized
California	County or region	No	Social worker	Localized
Colorado	County or region	Yes[3]	Trained professional	Localized
Georgia	State	Yes	Trained professional	Unknown
Illinois	State	Yes	Unknown	Centralized
Kentucky	State	Yes	Unknown	Unknown
Missouri	State	Yes	Social worker	Centralized
Nevada	Hybrid	No[4]	Social worker	Localized
New York	County or region	Yes	Unknown	Centralized
North Carolina	County or region	No	Social worker	Localized
North Dakota	County or region	Yes[5]	Trained professional	Centralized[6]
Ohio	State	Yes	Unknown	Localized
Oklahoma	State	Yes	Unknown	Centralized
Oregon	State	Yes	Trained professional	Centralized
Pennsylvania	County or region	Yes	Trained professional	Localized
Utah	State	Yes	Unknown	Centralized
Virginia	State	Yes	Trained professional	Centralized
Wisconsin	Hybrid	No	Trained professional	Localized

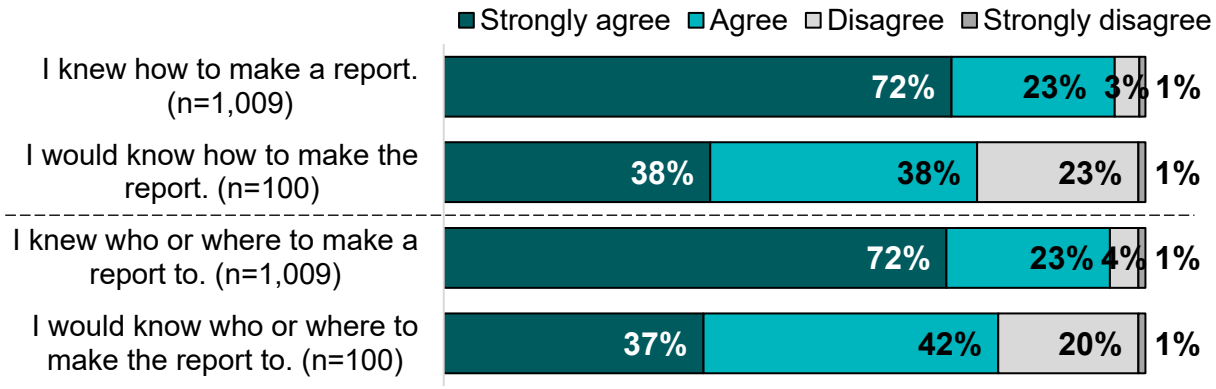
[3] Colorado implemented a centralized hotline in 2015 that routes callers to the county where the child resides.
[4] Nevada uses a hybrid system in which two counties are county-administered while the remaining counties are state-administered. The two county-administered systems each use their own hotline. There is also a single reporting number for the remaining state-administered counties, and a number for after-hours, weekend, and holiday reporting.
[5] North Dakota launched a centralized hotline and intake unit in 2021.
[6] Due to requirements in state law, North Dakota does not “screen out” any reports of suspected child abuse or neglect at intake. Reports that are determined not appropriate for a full assessment are processed as an administrative assessment or administrative referral.

Minnesota's system

In the reporter survey, respondents had the opportunity to provide feedback on the reporting experience within the current system. Most respondents (91 percent) had previously made a report, and these respondents answered questions based on their past reporting experiences. However, about 9 percent of respondents had not previously made a report; therefore, these respondents answered questions based on what it would be like if they made a report in the future. In the figures below, similar items are grouped but separated based on whether the respondent had made a report in the past. In many cases, response patterns between those who had and had not made a report in the past were somewhat different; this may suggest that the experience of reporting provides valuable knowledge about the reporting process.

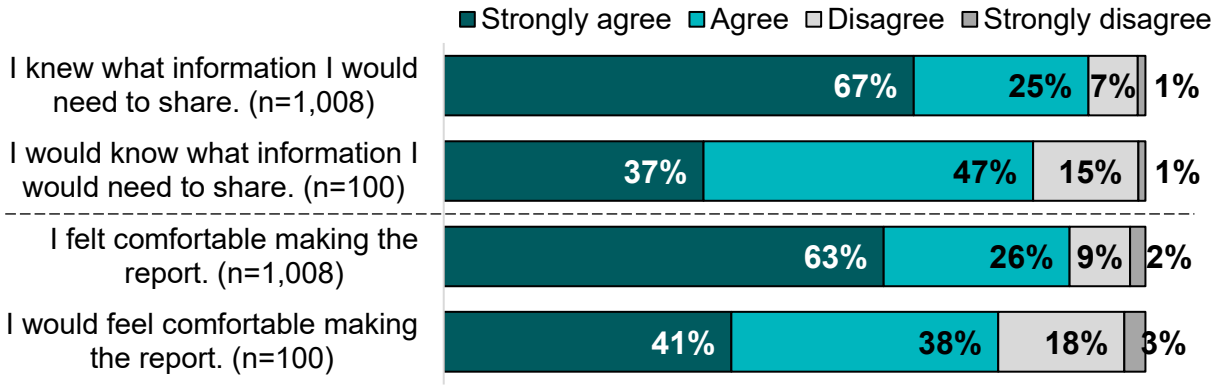
Generally, respondents understood how and to whom or where to make a report, as shown in Figure 6 below, though there are different patterns based on past experiences of reporting. Of respondents who had made reports in the past, 95 percent strongly agreed or agreed that they knew how to make a report. Similarly, 95 percent strongly agreed or agreed that they knew to whom or where to make a report. For both these statements, almost three-quarters of respondents strongly agreed. However, this knowledge was less strong for those who had not made a report. While about three-quarters of respondents who had not made a report indicated that they would know how to do so, only 38 percent strongly agreed with the statement. Similarly, 79 percent indicated that they would know who or where to report to, though only 37 percent strongly agreed.

Figure 6. Survey respondents' level of agreement/disagreement with statements about knowing how and to whom/where to report child abuse and neglect.



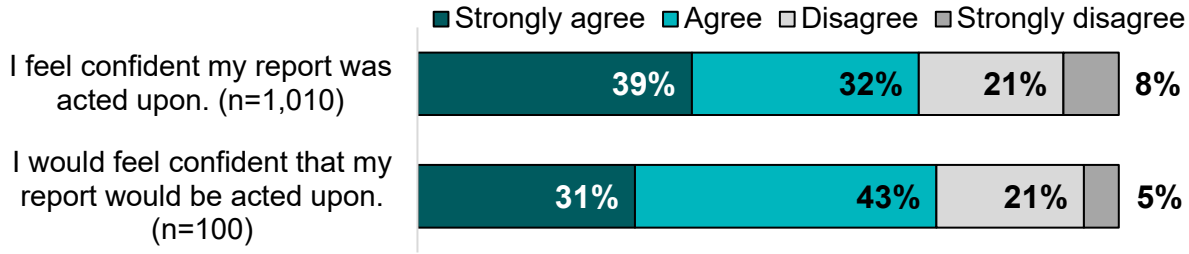
Similar patterns based on past reporting emerged in responses about knowing what information to share when making a report and feeling comfortable making a report. Most respondents who had made a report strongly agreed or agreed they knew what information to share and they felt comfortable making the report (92 percent and 89 percent, respectively), with about two-thirds strongly agreeing to both statements, as shown in Figure 7 below. For non-reporters, 84 percent strongly agreed or agreed that they would know what information they would need to share when making a report, but only 37 percent strongly agreed. Similarly, 79 percent of non-reporters expressed agreement overall that they would feel comfortable making a report, but only 41 percent strongly agreed.

Figure 7. Survey respondents' level of agreement/disagreement with statements about making a report of child abuse and neglect.



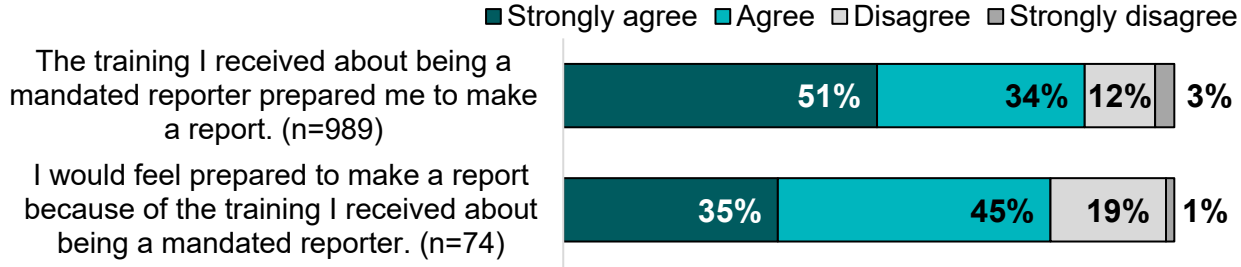
When asked about their confidence that a report was or would be acted upon, responses from those who had and had not reported in the past were similar. Of those who had reported in the past, 29 percent disagreed or strongly disagreed that they felt confident their report was acted upon, and 26% of non-reporters expressed the same about their level of confidence that a potential report would be acted upon, as shown in Figure 8.

Figure 8. Survey respondents' level of agreement/disagreement with a statement about confidence that a report was acted upon.



Those who indicated that they were mandated reporters had the option to provide feedback about how well mandated reporter training prepared them to make a report. Of those who had made a report, 85 percent strongly agreed or agreed that mandated reporter training prepared them to do so, as did 80 percent of non-reporters, as shown in Figure 9. However, strong agreement was, again, more common among reporters (51 percent strongly agreed) than non-reporters (35 percent strongly agreed).

Figure 9. Survey respondents' level of agreement/disagreement with a statement about preparedness for reporting because of training for mandated reporters.



FINDINGS: KEY CONSIDERATIONS RELATED TO A CENTRALIZED SYSTEM

This section shares the study's findings related to the perceived benefits and challenges of moving to a centralized child abuse and neglect reporting and/or screening system in Minnesota. The benefits demonstrate what participants hope a centralized system would do, and the challenges show what they worry might happen. Integrated throughout this section are participants' thoughts about how a centralized system would impact disparities and inequities within child welfare and the resources needed to implement a centralized system.

These findings do not make any conclusions about whether the State should implement a centralized system. Instead, the findings show what study participants think is important to consider or address when designing and implementing a centralized system. At times, findings contradict each other; this is because the study included people with different views and experiences. As noted in the limitations section above, what participants shared was based on their experiences with Minnesota's current locally administered child welfare system, Minnesota's centralized adult abuse reporting system, systems in other states, and what they imagined a centralized system would look like.

Reporter experience

This section discusses how a centralized system might impact the experience of child maltreatment reporters.

Hopes and potential benefits

Participants said a centralized hotline could make the reporting process easier.

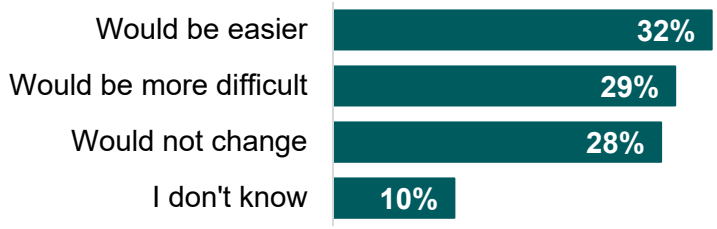
A centralized system with a single, 24/7 hotline could simplify the reporting process for reporters.

Survey respondents and county and non-county listening session participants identified having one phone number and one place to store all reporting information as a key benefit to centralizing Minnesota's system. Survey respondents and county and non-county listening session participants suggested that a centralized system would make it easier for reporters to know exactly where and how to file a report of child maltreatment. State research interviewees echoed this. One state with a centralized system noted that having one phone number for reporters to call was a benefit for their reporting and intake system. Another state with a centralized hotline similarly expressed that moving to a centralized hotline made it easier for families to report.

> *"I think the main benefit would be that everyone in the state can use the same system to report. Having a central place for reports to be made would probably ensure that the reports are actually made instead of it being overwhelming for people to find the correct place to make the report."*
> *– Survey respondent*

As shown in Figure 10 below, almost one-third of survey respondents believed that knowing how to make a report would be easier if reporters made reports to a centralized system. However, a little less than one-third of survey respondents believed that knowing how to make a report would be more difficult under a centralized reporting system, and a similar proportion felt it would not change. In addition, many survey respondents saw the opportunity to implement a hotline for reporting as the only potential benefit to centralizing child maltreatment reporting and screening.

Figure 10. Survey responses to "If there was a statewide reporting and/or screening system, knowing how to make a report…" (n=1,059).



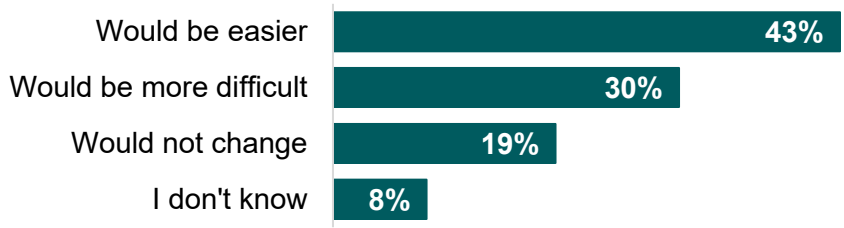
In non-county listening sessions, participants highlighted that a centralized intake system and a 24-hour intake center would make it easier for reporters to report incidents of maltreatment outside of typical daytime work hours (e.g., during evenings and weekends).

Survey respondents also highlighted a common issue that they face as reporters of child maltreatment or abuse: Some children live in more than one county or attend school in one county while residing in another, which can cause confusion for reporters when they make a report of suspected abuse or neglect. Having a centralized hotline and a centralized information system for child maltreatment could benefit reporters who have dealt with this confusion.

"As an educator, I have worked in several different districts and most of those districts had students that reside in more than 1 county that is different from the county the school is located in. A statewide system would make it easier to know where to locate the information and make it easier to complete the paperwork if moving schools as an educator." – Survey respondent

As shown in Figure 11 below, 43 percent of survey respondents believed that knowing who or where to report to would be easier under a centralized reporting system. Conversely, almost one-third of survey respondents thought that knowing to whom or where to make a report would be more difficult with a centralized system.

Figure 11. Survey responses to "If there was a statewide reporting and/or screening system, knowing who or where to report to…" (n=1,060).



Fears and potential challenges

Participants expressed concerns around how distrust of the State and challenges like long wait times and removal of in-person reporting would impact the number of reports in a centralized system.

Distrust of the State, especially in comparison to existing trusting relationships between reporters and counties, may deter people from reporting.
Survey respondents said reporters may have more distrust of the State than they do of counties, which could result in people not reporting incidents of child maltreatment. County listening session participants also shared that county child welfare staff have built trusting relationships with mandated reporters in their counties—and that mandated reporters would not trust the State as much as they do counties when making reports.

> *"Counties train local schools and law enforcement on mandated reporting. We have relationships with these folks. They are comfortable reporting to us and talking through difficult issues with us." – County listening session participant*

Survey respondents and county and non-county listening session participants also shared that they believed a centralized system would feel impersonal since it will be run by State staff with no connection to or knowledge of the community. Participants noted this could also lead to hesitancy to report incidents of child maltreatment.

> *"Small communities are built on trust and relationships, having 'outsiders' involved will decrease that trust and rapport that has been built with reporters and clients. Who knows the county and communities within the best? The ones that work and live there." – Survey respondent*

Challenges like long wait times, preferences for reporting locally, and lack of opportunity for in-person reporting could impact the number of reports made.
Survey respondents and county listening session participants shared a fear that a centralized reporting and screening system would result in long wait times to make a report, which would discourage people from reporting child maltreatment. Some county listening session participants shared that they experienced long wait times when reporting to states with centralized systems.

"I worry with a state system reporters would spend a lot of time waiting to make a report and in that process we would lose some reporters as they would hang up. Personally I have waited hours to make a report to other states with statewide systems, on multiple occasions." – County listening session participant

Additionally, survey respondents and county listening session participants were concerned that a centralized system would create confusion among reporters as to where they should report. Survey respondents and county listening session participants noted that people would still report to the county even if there were a centralized reporting hotline, as counties still receive reports of adult maltreatment even with the centralized MAARC system. Participants expressed concerns that changing to a centralized reporting system may result in reporters not making reports if they first go to the county and are redirected to the State. Participants suggested that education and training for reporters would be needed to mitigate this.

"I have ran into the issue specifically with MAARC where someone is referred to the MAARC line to make a report and they don't want to because they'd prefer to talk to someone at the agency, or they're already in the office and don't want to do "the extra work". I can only imagine how many reports we are not going to get simply because people don't want to take that extra step to call or report to a centralized line versus the county they live in." - County listening session participant

Similarly, concerns arose about the absence of in-person reporting options. Both county and non-county listening session participants believed that people who report in person will continue to come to the county to file reports, and those reporters will be hesitant or unable to report in other ways (e.g., by phone or online). Participants expressed concern that reports made in person, especially from non-mandated reporters, would fall through the cracks in a centralized system.

The concerns identified above were largely related to a potential decrease in reports; however, survey respondents and some county listening session participants also shared concerns that the system may result in increased inappropriate reports. These participants feared that report numbers would increase due to:

- Reporters making malicious reports if their reports could be made anonymously (survey respondents).
- Making it easier to make biased reports around diverse cultural or community practices (non-county listening session participants).
- Lack of prevention or consultation practices that provide other preventative support resources (survey respondents and county listening session participants).

During state research interviews, one state with a centralized hotline shared that they experience people calling the hotline for reasons beyond child maltreatment reporting (e.g., general wellbeing and resource needs), increasing call volume.

As described above, there was no agreement about whether a centralized system would increase or decrease the number of reports in Minnesota.

> *"A centralized system might also lead to an increase in reporting volume since it's less localized. This could result in individuals making reports without fully considering other options, overwhelming the system and causing delays that might lead to critical cases being missed. Conversely, some may hesitate to report, fearing that a statewide program would take too long or that their report might be overlooked due to high volume, potentially leading to increased calls to local 911 lines as a quicker alternative." – Survey respondent*

As shown in Figures 12 and 13 below, a little over one-third of survey respondents felt that it would be more difficult to address both over and under-reporting within a centralized reporting system, exemplifying the concern about increasing and decreasing numbers of reports.

Figure 12. Survey responses to "If there was a statewide reporting and/or screening system, addressing over-reporting (reporting when child abuse and neglect has not occurred) …" (n=1,056).

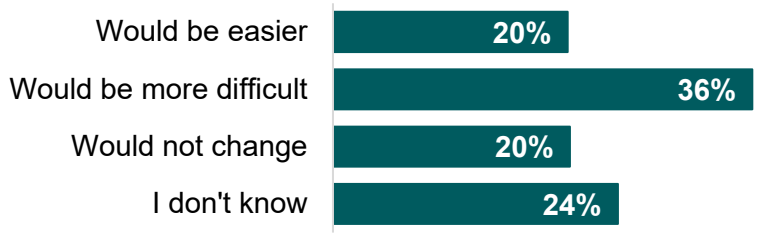
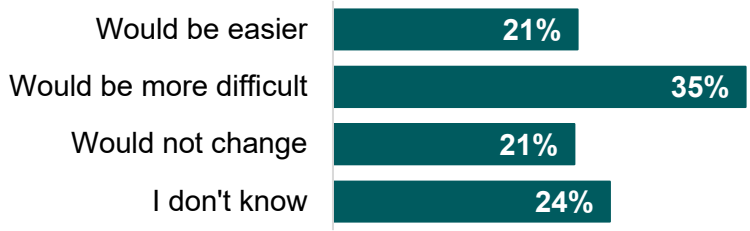


Figure 13. Survey responses to "If there was a statewide reporting and/or screening system, addressing under reporting (not reporting when child abuse and neglect has occurred) …" (n=1,056).



Quality of report-takers and reports

This section discusses how a centralized child maltreatment reporting and screening system might impact the qualifications of intake staff and the quality of information recorded in reports.

Hopes and potential benefits

Participants hoped that a centralized system would use highly trained and specialized intake staff.

A centralized system could leverage highly trained and supported staff who specialize in intake.

Participants from non-county listening sessions highlighted that the introduction of a centralized system could present an opportunity for intake and screening to become a specialized role. They felt that a centralized system could ensure that all intake workers receive standardized and robust training to appropriately and efficiently record and screen reports.

Two states with centralized systems echoed this sentiment, sharing that having specialized intake staff is a benefit of using a centralized system. Specialized intake staff in these states have consistent and ongoing training and access to a supportive network of supervisors, which they believe results in high quality, comprehensive information-gathering that local agencies use to prepare their response.

Fears and potential challenges

Participants were concerned that a centralized system would use unqualified staff, causing a decrease in report quality. They also feared that staff solely focused on intake would have a higher risk of experiencing secondary trauma and burnout.

If staff in a centralized system were not appropriately qualified and trained, quality of reports would be diminished.

Survey respondents and county listening session participants expressed fears that intake staff in a centralized system would not be adequately trained to manage the intricate task of taking and screening reports. These participants felt that intake staff without direct field experience or a background in social work would lack the perspective and knowledge needed to identify critical and useful information when taking reports. Some county listening session participants emphasized this by describing past experiences with intake workers from states with centralized systems where conversations seemed scripted, or the intake worker was not knowledgeable of the child welfare process.

> *"It takes a certain level of skill to guide conversation and understand what information is needed and/or would be helpful downstream and statewide call centers/reporting centers just don't have the skill level or understanding of the work needed to do so. This lack of skill leads to misinformation in reports and increased inappropriate screening with negative consequences (either out or in - depending on what information was misleading or lacking)." – Survey respondent*

Survey respondents and county listening session participants emphasized that comprehensive training in child maltreatment intake, screening, and response guidelines for intake workers is the best way to ensure report quality.

> *"Whether intake workers are centralized or local, they require robust training, clear protocols, and ongoing system evaluations to ensure reports are handled effectively and vulnerable children are protected." – County listening session participant*

County listening session participants expressed concerns that challenges with the MAARC system—incorrect data, misspellings, and incomplete data—would occur more frequently in a centralized system and result in poor quality reports. Survey respondents and county listening session participants stressed that local agencies use report information when preparing to engage with families. They feared that incorrect data could both affect the quality of support being given to families and jeopardize child protection workers' safety.

Staff who focus solely on intake could experience secondary trauma, which impacts staff turnover.

County listening session participants and survey respondents highlighted the risk of secondary trauma for workers solely focused on intake and screening. They explained that intake staff often face difficult situations that can have lasting impacts on their mental health; this has been managed at the local level by existing relationships with and access to supervisors outside of the intake room. These participants feared that this type of support would be lost in a centralized system and result in high burnout rates and worker shortages in an already challenged workforce.

> *"State workers who receive child abuse and neglect calls as 100% of their jobs suffered from A LOT of secondary trauma and there was significant turnover. I noticed county workers doing this work have more longevity in the job. […] I do believe you will increase worker burnout and turnover if you transition to [a] statewide system." – Survey respondent*

Screening practices and decision-making

This section discusses the potential benefits and challenges of a centralized system on screening practices and decision-making.

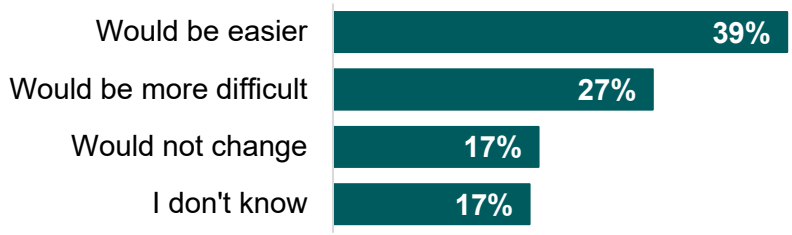
Hopes and potential benefits

Participants raised that a centralized system could improve consistency and reduce personal bias during intake and screening.

The use of a centralized system for taking reports and making screening decisions could improve consistency.

Survey respondents and non-county listening session participants shared hopes that a centralized system could take and screen reports more consistently. In addition, a few county listening session participants noted that a centralized system might result in more consistent screening practices across the state. As shown in Figure 14 below, 39 percent of survey respondents felt that being fair or consistent when screening reports would be easier in a statewide system.

Figure 14. Survey responses to "If there was a statewide reporting and/or screening system, being fair or consistent when screening reports…" (n=1,058).



Two states with centralized systems shared their experience with improved consistency across the state, including using the same perspective, tools, and processes to make decisions about all cases. For example, one state implemented interrater reliability testing to ensure consistency across screening staff. However, these states also noted that local child welfare agencies sometimes disagree with their decisions, which can cause conflict and delays.

> *"It makes it really difficult to do statewide work when everybody gets to have a different perspective on their role of building safety around families and the tools they're using. Because we're a statewide system, we get to make decisions about how people do screening with consistency." – Interviewee from state with centralized system*

Survey respondents explained how more consistency in intake and screening could affect the child welfare system. They mentioned hopes for consistent intake practices and personnel, as well as consistent screening tools and guidelines to improve system efficiency.

> *"It would be a benefit to have a state system that would ensure more consistency on which reports are screened in and out, which county it would belong to, it being entered with the right participants, [and it] would save social workers time as we screen reports daily and most days we are screening for 2-3 hours." – Survey respondent*

Non-county listening session participants also expressed that a statewide system could lessen racial disparities by using standardized guidelines and criteria, leading to more consistency from county to county in how reports are screened in or out.

> *"A standardized system could help reduce disparities in reporting and response to child maltreatment across different counties and regions. Clear guidelines and protocols could minimize subjective decision-making and ensure that all children receive equal protection." – Non-county listening session participant*

A centralized system could reduce personal bias because decision-makers would not have pre-existing knowledge or ideas about families.

Survey respondents and non-county listening session participants highlighted that a centralized system could reduce bias during intake if reports are screened by state workers instead of local child welfare agency staff who may have pre-existing knowledge of families.

> *"One benefit to having a statewide child abuse and neglect reporting system [is] that [it] is less likely to have biased opinions from the screeners on certain people that may have been within the system before or [are] well known to a certain county.[…] I do feel that if someone is well known for behaviors or well known to the system itself, counties tend to look at the reports differently and may have some judgement and/or thoughts against a report based on previous experience." – Survey respondent*

Two states with centralized screening systems also mentioned bias during screening. They felt that their statewide systems allow for more consistent and objective decision-making. In these states, screeners make decisions based solely on the report made instead of on existing knowledge about families' context or prior cases, which states perceived as a benefit.

Finally, non-county listening session participants expressed hope that reduced bias in intake and screening could create more consistency in how families are treated. They said this consistency could enhance child safety by streamlining responses to maltreatment and minimizing bias.

Fears and potential challenges

Participants expressed concerns that a one-size-fits-all approach and a lack of multidisciplinary decision-making teams in a centralized system could negatively impact families. They also raised concerns around decision-making without awareness of local culture and context.

Standardized approaches in a centralized system could be harmful for diverse groups who have varying cultures and beliefs.

County and non-county listening session participants expressed fear that a one-size-fits-all approach would exclude the needs of specific racial, ethnic, religious, and other groups with whom they have already built local relationships. Some survey respondents also mentioned that

maintaining “cultural competency” under a centralized system may be challenging as centralized staff would not be familiar with all cultures and groups in the state.

> *“State screening turns into a one size fits all system, even when it's planned so as not to. The nuances of families or specific cultural needs are not always known or screened for at a State level, whereas counties know their local communities. In addition, many counties have (are) working hard to screen in ways that are very attentive to race/culture/etc. and [are] seeing progress that would be lost moving to a more proceduralized system.” – County listening session participant*

Decision-making without community context and awareness of local culture could lead to poorer decisions.

Survey respondents and county and non-county listening session participants emphasized that intake workers in a centralized system would not have enough understanding of local context to adequately support communities. Participants, especially those from rural or smaller counties, explained that county staff have unique insight into their community’s culture (e.g., rural culture), norms, and expectations. Three states with fully or partially localized systems also felt that a centralized system would take away the autonomy of counties to implement the system in a way that honors the unique aspects of each jurisdiction.

> *“It is difficult because there are different cultural norms, financial norms, child-rearing norms, family dynamic norms, and other norms that may be specific to a certain demographic area in Minnesota that may not reflect what's normal in all areas.” – Survey respondent*

County and non-county listening session participants also shared concerns that the State will be unfamiliar with community resources and therefore will screen in (i.e., initiate a child protection response with) families that the county would have been able to screen out and assist through resource referrals. This could also impact communities on state borders, as a county intake worker may have specific knowledge or a relationship with across-the-border resources for a family. Listening session participants also had apprehension around potential impacts on disparities and inequities, as counties may have knowledge of community- or culturally specific practices that could be overlooked or misunderstood in a standardized system.

Survey respondents and county listening session participants also raised concerns about how a lack of community context could negatively impact response time, as decision-makers would be unfamiliar with what community resources are available and the processes to use them.

> *“Communities know themselves best. Not having the ability to quickly make decisions based on information you have, specifically related to your own community and resources and trusted partners, will hamper not only response*

time, but having the flexibility needed to make the best decisions for each unique need of a situation and family." – Survey respondent

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A centralized system would not have the historical knowledge of family history and context that counties use to support decision-making.

Survey respondents and county and non-county listening session participants indicated that state intake and screening staff would not have an understanding of specific families' situations. They felt that not having this information could negatively impact families. Participants highlighted that the following information, which is often helpful in determining whether to screen in or out, would be unknown or not considered:

- Previous engagement/history with the family (e.g., previous cases).
- The family's dynamics/functioning.
- With whom in the county the family is already working, especially if they have an established relationship.
- What community resources the family has accessed.
- An understanding of what has worked and not worked well with the family in the past.

County and non-county listening session participants expressed a fear that families may experience loss of trust, overwhelm, or frustration toward a system that is not aware of the information above. County listening session participants shared concerns that families who connect with county workers informally (e.g., when they have a question or are seeking a resource) may be apprehensive about seeking help under a centralized system.

"We know our families. This is critical when we take into account the importance of considering history in screening. We get reports where callers are targeting families and the knowledge we have helps to make sure this is taken into consideration. There are times when a report may seem minor, but local knowledge and awareness of the family helps staff to know that the concern needs to be considered more urgently. […] We have families who we've worked with and they may have had difficult experiences, but they know us and will call later with concerns citing they know they can trust us and share/ask questions." – County listening session participant

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A centralized system may not use multidisciplinary screening teams, which some counties currently use with success.

Some survey respondents and county listening session participants noted their use of multidisciplinary teams (e.g., members of law enforcement, county staff, probation officers, county attorney, etc.) for screening. Survey respondents mentioned that they use these teams to reduce bias through a de-identified screening process and the use of multiple perspectives. Survey respondents and county listening session participants emphasized the importance of multidisciplinary teams and expressed concern that a centralized system would not use them.

"My fear with this statewide system is that the counties that are successful with a multidisciplinary response to abuse—ones that include law enforcement, prosecution and other professionals in on the screening process—will lose that additional insight and knowledge that plays a huge role in making screening determinations. […] We need to improve and encourage the MDT [multidisciplinary team] response to abuse, not break it down into people working in single silos again." – Survey respondent

Information-sharing and access to information

This section discusses the potential benefits and challenges of a centralized system regarding how the system shares information and how counties access it.

Hopes and potential benefits

Participants hoped that a centralized system could reduce jurisdiction issues and improve information management and access. They also saw the potential for better monitoring and quality improvement practices and procedures.

A centralized system could reduce jurisdictional errors, confusion, and disputes.
Survey respondents, non-county listening session participants, and county listening session participants felt that a centralized system may help reduce and mitigate county-to-county jurisdictional disputes. With a centralized system responsible for determining jurisdiction during intake, participants hoped that there would be more clarity about jurisdictional responsibilities for responses and a reduction in the number of reports sent to the wrong jurisdiction. One state with a centralized reporting and screening system provided an example of this benefit, sharing that they have worked to address jurisdictional issues by developing tools and leveraging local knowledge to navigate jurisdiction when sending reports to local agencies.

A centralized system could improve information management, especially across counties.
Non-county listening session participants and survey respondents saw an opportunity for improved cross-county information-sharing and access in a centralized system. They noted that some families, especially those stuck in cycles of abuse or neglect, move frequently and may have multiple child prevention cases in different counties. Although the current information system used by counties, Social Services Information System (SSIS), provides access to information from all counties, some study participants felt that a centralized system could better consolidate cross-county data, reducing duplication and increasing accuracy. They felt that this could improve understanding of families' needs and allow for earlier provision of services.

"If done well, it could coordinate children/families reported in different counties so that county personnel have a more comprehensive picture of their concerns when they move to a new county. Paperwork does not seem to

follow families very well now and then patterns of neglect and abuse just repeat in a different county." – Survey respondent

A centralized system could allow for better monitoring and quality improvement processes.
Two states that moved to a centralized reporting system noted that a centralized system offers more opportunities for continuous quality improvement. Both these states shared that they use data collected through the centralized system to develop and implement quality assurance processes and to ensure timeliness of intake.

Fears and potential challenges

Participants expressed concern that the current information-sharing system (SSIS) is not capable of meeting the needs of a centralized system.

Current technology and information-sharing systems may not be equipped to meet information-sharing needs in a centralized system.
County listening session participants, non-county listening session participants, and survey respondents stated that efficient and updated technology would be needed to successfully implement a centralized system. This would include technology to implement a centralized hotline and a unified database for quick and easy sharing of information. County listening session participants and survey respondents emphasized that the current system for sharing information, SSIS, is out of date and would need an overhaul to successfully meet the demands of a centralized system. To emphasize this, county listening session participants provided multiple examples of how SSIS already impedes their work, and expressed fears that this would increase exponentially if not updated in a centralized system.

County and non-county listening session participants feared that the transition to a new technological system would result in a loss of data, lead to significant changes to current processes and procedures for documenting and locating information, and require new data-sharing agreements to partner with different agencies. They expressed fears that this would impede local agencies' ability to retrieve relevant data and cause delays in responses. One state with a centralized hotline shared that having a quick and efficient process to transfer reports to local agencies and a clear communication system could help to mitigate these issues.

Timeliness and responsiveness

This section discusses the potential benefits and challenges of a centralized system related to timeliness of intake, processing, decision-making, and responsiveness.

Hopes and potential benefits

Participants raised that a centralized system could improve access to reporting, especially for county agencies that defer after-hours reports to law enforcement.

Around-the-clock availability in a centralized system could speed up report processing and decision-making, especially for counties who currently use supplementary sources to take reports outside of regular working hours.

While all counties are required to take reports 24 hours a day, seven days a week, there is variation in how this requirement is operationalized. For example, in some counties, law enforcement agencies answer calls outside of the county's working hours (e.g., during evenings and weekends) and route reporters to appropriate county staff. Non-county listening session participants expressed hope that a centralized system could benefit counties who use supplementary sources to take reports.

> *"Some counties contract out for maltreatment reports after hours/on weekends. A centralized approach would allow specifically trained staff to respond immediately to maltreatment reports." – Non-county listening session participant*

One state with a centralized reporting system said that by always having someone available to take reports, the statewide system reduced delays in receiving and processing calls. Another state with a centralized hotline shared how they implemented immediate transfer processes to ensure counties receive reports in a timely manner from the hotline.

Survey respondents also shared that having more state staff to focus on intake and screening may improve the efficiency of the decision-making process, which could result in children being removed from dangerous situations more quickly.

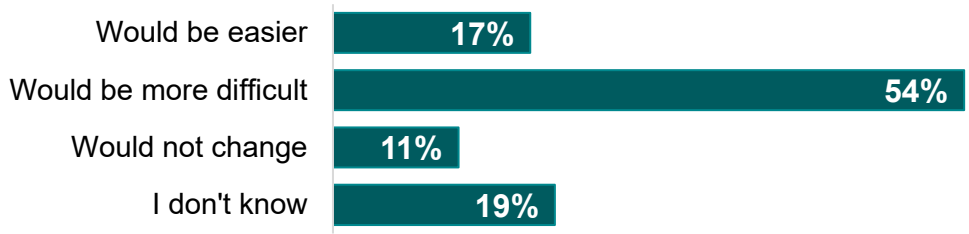
Fears and potential challenges

Participants raised concerns about a centralized system slowing report processing and decision-making.

A centralized system would be an intermediary that could slow down report processing and decision-making.

Survey respondents and county and non-county listening session participants had concerns about counties receiving reports from a centralized system in a timely manner. Respondents felt a statewide system would cause delays because the state would be the "middleman" between the reporter and county. As shown in Figure 15, just over half of survey respondents (54 percent) indicated that responding to reports in a timely manner would be more difficult in a statewide system. Survey respondents and county listening session participants also expressed a fear that screening reports in a timely manner may be difficult, as many reports would be coming into the system at the same time.

Figure 15. Survey responses to "If there was a statewide reporting and/or screening system, responding to reports in a timely manner…" (n=1,048).



County listening session participants also explained that they sometimes engage in "extended screening" at the county level, where they reach back out to reporters or others to get more information during the screening process. Participants expressed a fear that having the state as a "middleman" would cause this to take longer or not be possible.

Survey respondents and county listening session participants also raised concerns that a statewide system may not correctly determine jurisdiction, resulting in reports being sent to the wrong county. Participants noted that this delay could be harmful for urgent cases. County listening session participants also noted that it can be easiest for counties to communicate directly, without an intermediary (the State) involved.

> *"When there are county jurisdiction questions, often times the two counties may already be in communication if there is a situation going on and [they are] expecting [reports] to be coming in. With a statewide reporting system, this is just adding another 'middle person' to complicate things more." – County listening session participant*

A few county listening session participants expressed fear around less efficient work due to slowed report processing and decision-making under a centralized system. County staff explained that they modify their workplans based on what screening decisions are coming in; in a centralized system, they would not be aware of what might come in, negatively impacting their ability to modify or prioritize certain parts of their work.

> *"When counties screen, particularly in the mornings, agencies are able to see what is being screened in and prioritize their assignments and workload […] waiting on the State and not even seeing what might be coming […] could greatly impact workload/staffing issues." – County listening session participant*

The use of a centralized system could impede counties' abilities to respond to urgent situations.

Survey respondents and county listening session participants expressed fears around meeting the requirement of a 24-hour response time in a centralized system. Respondents noted that, in the current system, a county can respond before the report is typed up if needed, which would not be possible in a centralized system.

> *"If the report is screened at the state level, could the reports come in at the 23rd hour of the screening timeline, and need a 24 hour response from [the] time the state receives the report[?] How will this be handled to give time to a county to be able to respond and meet timelines?" – County listening session participant*

Survey respondents also questioned what would happen in urgent situations requiring a social worker immediately. One state with a centralized reporting system said they have experienced some challenges related to responding to families immediately when in crisis.

County and non-county listening session participants also stressed the importance of existing community partnerships (especially with law enforcement) during immediate response and placement situations. County listening session participants feared there would be a delay in service without these relationships, which could be harmful for families. One state with a centralized system acknowledged there may be emergency situations when law enforcement directly calls a local child welfare agency. This state said they work with the local agencies to document these instances in the centralized system.

> *"We need to continue to be flexible and nimble in this work, particularly when it comes to immediate situations. We often can anticipate a situation when partners like hospitals or law enforcement call us directly and [we] plan according[ly] and directly with them for a response. We do not have time for a middle entity to make the decisions for us that they will have no part in managing." – County listening session participant*

Non-county listening session participants also cautioned that a centralized system could increase disparities in immediate response situations in rural counties, as responders may have greater distances to travel and fewer first responder resources.

Local knowledge and expertise

This section discusses the potential benefits and challenges of a centralized child maltreatment reporting and screening system related to existing knowledge and expertise at the local level.

Hopes and potential benefits

Participants had hopes for increased resource availability and coordination with a centralized system.

A centralized system could improve resource coordination and availability statewide.

Non-county listening session participants highlighted that a centralized system could increase the number of statewide resources and programs available, which could especially benefit underserved families in rural areas. Participants also noted that a centralized system could create more clarity on where to refer families, thus streamlining access to support and resources. Additionally, participants thought a centralized system could enable better coordination among different agencies and community organizations and lead to a more efficient use of resources.

> *"I think that with a central reporting system new resources could become available. I am in a small county […] where there is lack of resources and things are often referred out either way and with a state system the resources*

available all over would be a better option." – Non-county listening session participant

Fears and potential challenges

Participants described possible harm to local relationships as well as challenges due to lack of knowledge of local resources in a centralized system.

Shifting to a centralized system for reporting could hinder relationships at the local level by limiting collaboration.

Survey respondents and county and non-county listening session participants expressed concerns that a centralized system would weaken local-level relationships among families, mandated reporters, and law enforcement. Survey respondents thought a centralized system would make it difficult for counties to build relationships with families by limiting their ability to provide additional prevention resources and services to families. Survey respondents also noted that maintaining relationships with mandated reporters supports positive outcomes and timely delivery of services; they shared concerns that this benefit would be lost if mandated reporters did not make reports to the county.

Survey respondents highlighted that law enforcement officers currently contact the county directly when they need a social worker on the scene. These respondents feared that this essential communication with law enforcement would be lost in a centralized intake and screening system. In addition, county and non-county listening sessions expressed concern that a centralized system would negatively impact relationships with other counties and with Tribes.

During state research interviews, one state with a centralized reporting and screening system said some local areas lost previously strong relationships with those who had been on local multidisciplinary screening teams because they are no longer performing that function.

"Community-specific resources or relationships could be overlooked in a more centralized model […] Local partnerships with nonprofits, schools, or healthcare providers might weaken if state systems don't maintain those connections effectively." – County listening session participant

A centralized system could lack awareness of local resources, limiting what families know about and can access.

County and non-county listening session participants expressed fear around the State's lack of awareness of local resources and how this would affect families with a centralized system. Participants voiced concerns around the State's ability to compile and maintain a list of local resources, especially for rural areas, where resources tend to be less 'published' for public knowledge. Survey respondents also discussed how a centralized system may make it difficult to provide resources to reporters, as counties often do, because a centralized system may not know all the local resources available.

During state research interviews, two states with centralized reporting systems expressed that lacking understanding of local community resources is a challenge. One state, however, said

their processes for collecting and compiling local resource information for their centralized intake staff are beneficial overall.

> *"I'm also worried that families will be missing out on important supportive services that can be provided to the reporter to help the family when they call the county directly. If [the] reporter has to call the state, the state won't know about unique and community-based services for the family and so I can see the reporter will only make the report, nothing else will be provided." – Survey respondent*

Survey respondents were also concerned about a centralized system lacking a way to refer families or those screened out to voluntary services or other resources. For example, they worried that intake workers may not be able to connect a screened-out family to the Parent Support Outreach Program. County and non-county listening session participants feared that insufficient or delayed referrals could affect counties' ability to do important prevention work that addresses concerns early and diverts families from the child protection system.

> *"I know there are great differences across the state [in] available resources and supports for family. In many communities there are known agencies that provide services, and then there are more informal support structures that people in the community and counties know about that are never on any statewide list of resources. I believe there would be an underutilization of community resources and a decrease in referrals under a statewide child maltreatment reporting and screening system." – Non-county listening session participant*

County and non-county listening session participants also noted concerns that families may lose trust in the State if the centralized system refers them to an outdated and/or incorrect list of resources. Participants also said that a centralized system could diminish a county's ability to adapt and update programs and resources based on local context.

Tribal sovereignty and collaboration

This section focuses on potential impacts of a centralized system on sovereignty of the 11 Tribal Nations that share geography with Minnesota and on collaboration with these Tribes. To honor the unique positionality of the Tribes as sovereign nations, the first sub-section is a summary of input from a listening session with representatives from the three Initiative Tribes. The next two sub-sections ("Hopes and potential benefits" and "Fears and potential challenges") are based on this listening session, an interview with a non-Initiative Tribe, and other data sources in the study.

Initiative Tribes listening session findings

While the rest of this report describes findings from those who participated in a variety of engagement methods (e.g., survey, listening sessions, state interviews), the following findings are based solely on the listening session held with representatives from the three Initiative Tribes—White Earth Nation, Leech Lake Band of Ojibwe, and Red Lake Nation. To honor the unique positionality of the Tribes as sovereign nations, a summary of themes in the session is included below.

Participants stressed that maintaining and strengthening Tribal sovereignty is one of the most important aspects to consider when discussing child welfare systems.
Participants shared that continuing to manage their own child welfare systems, including reporting and screening, is a vital part of Tribal sovereignty. Another aspect of Tribal sovereignty is data sovereignty, in which Tribal Nations own and manage information about their cases. Participants had concerns about expectations around data-sharing and data use that may violate Tribal sovereignty.

Participants expressed concerns about a loss of relationships between Tribal child welfare and various community members.
Tribal child welfare workers have relationships with various community members (counties, families, mandated reporters, law enforcement, and others) that are often helpful during reporting, screening, and working directly with families. Tribal child welfare workers also provide education and training to community members and mandated reporters to help them better understand child welfare. State intake workers may not have these relationships, which could be harmful for families and mandated reporters.

Participants emphasized that they need more information to give informed feedback about a potential shift to a centralized system.
Participants suggested that the State provide them with more information before gathering feedback, including a proposal for what a centralized system may look like, information about how other state systems operate and work with Tribes, and a review of MAARC. They also raised that the State would need to clarify when inquiry of Native heritage would happen and who would be responsible for it in a centralized system.

Participants also suggested a review of current maltreatment data to determine what challenges and disparities exist in reporting and screening, especially related to Tribes. Participants explained that they would need to know how data from a centralized system would be used or shared, and how a centralized system might benefit Tribes, before they can provide additional feedback. Finally, participants shared that Tribal leaders, Tribal councils, legal counsel, and others must be consulted before sharing more feedback.

Participants suggested alterations to the current system, as opposed to a complete shift to a centralized system.
Participants explained that they have processes and relationships in place that work well, and the State should focus efforts on improving what does not work in the existing child welfare system instead of completely shifting to a centralized system. Some participants explained that they would choose to opt out of a statewide system and instead focus on improvements to existing systems or processes.

Hopes and potential benefits

Participants in county and non-county listening session and state research interviews identified possible benefits around streamlined collaboration with Tribes. The Improve Group has no knowledge of whether these participants were affiliated with Tribes.

A centralized system could make it easier to collaborate with Tribes through a single entity rather than dozens of counties.

During state research interviews, two states with centralized systems for taking reports noted that having a centralized system facilitates collaboration and relationships with Tribes, as there is only one entity (the State) for Tribes to engage with at the reporting phase. In addition, one state shared that intake workers are highly trained on the Indian Child Welfare Act (ICWA) and know exactly how to engage Tribes when needed. One state with a centralized reporting system said they received input from Tribes on their preferences and specifically built their intake and screening processes based on those preferences. Similarly, non-county listening session participants in Minnesota highlighted that a centralized system could consolidate intake and pass along all the information to Tribes to make the screening decision.

Fears and potential challenges

Participants discussed possible harm to Tribal sovereignty through exclusion from decision-making. The Improve Group has no knowledge of whether these participants were affiliated with Tribes, and Tribal affiliation and/or representation cannot be assumed for any data source unless explicitly named "Initiative Tribes listening session" or "Non-Initiative Tribes interview."

A centralized system could infringe upon Tribal sovereignty and exclude Tribes from decision-making.

Participants in the Initiative Tribes listening session, an interviewee from a non-Initiative Tribe, and both county and non-county listening session participants expressed concern that a centralized child maltreatment reporting and screening system may not adequately involve Tribes. These participants shared that Tribal families may experience harm if the State fails to adequately coordinate with Tribal Nations. This is especially salient given the harm the U.S. government and child welfare systems have caused to American Indian/Alaska Native children, families, and communities by removing children from their homes at alarming rates.[7] The Indian Child Welfare Act (ICWA) was enacted in 1978 to address this crisis,[7] and the Minnesota Indian Family Preservation Act (MIFPA) was established in 1985 to strengthen and expand ICWA in Minnesota.[8] Despite these efforts, as of 2021, Minnesota had the highest disproportionality rate of American Indian/Alaska Native children in foster care in the Nation.[9]

In addition, participants noted that centralization of the intake and screening process could damage collaboration and relationships between counties and Tribes. Also, a participant in an interview with a non-Initiative Tribe shared that it is helpful to know about reports even if they are screened out, which may not be possible in a centralized system.

Additionally, participants in the Initiative Tribe, county, and non-county listening sessions shared that a centralized reporting/screening system could infringe upon Tribal sovereignty. County and

[7] National Indian Child Welfare Association. (n.d.). *What is ICWA?*
[8] Minnesota Department of Human Services. (2022, August). *Indian Child Welfare Act/Minnesota Indian Family Preservation Act Manual.*
[9] National Indian Child Welfare Association. (2021). *Disproportionality in Child Welfare Fact Sheet*.

non-county listening session participants brought up how a centralized system would need to comply with ICWA provisions, which might require additional training (e.g., cultural responsiveness training) or other resources. Furthermore, county listening session participants expressed concerns that the State's data-sharing system might not respect Tribal sovereignty or support work between Tribes and the State. Participants noted that if it transitioned to a centralized system, the State would need to establish data-sharing protocols that respect Tribal sovereignty and confidentiality and use data systems that allow for efficient information exchange between the State and Tribal agencies.

> *"Tribal Nations have the inherent right to govern child welfare matters involving their members, both on and off reservations. […] A shift to state management must include mechanisms for collaboration with Tribal child welfare systems to respect Tribal jurisdiction and ensure seamless service delivery." – County listening session*

During state research interviews, two states with partially centralized systems indicated that Tribal nations in their states have their own independent systems for child maltreatment reporting and screening. Because of this, both states felt that moving to a fully centralized system would have little impact on the way the State interacts with Tribal nations.

Implementation and resources

This section discusses potential benefits and challenges related to the implementation of a centralized child maltreatment reporting and screening system and the resources necessary for doing so.

Hopes and potential benefits

Participants suggested that shifting intake workload from local agencies to the State could benefit local agencies.

Shifting to a centralized intake system could free up local-level intake staff to focus on other aspects of child protection work.

Survey respondents and county and non-county listening session participants identified the opportunity to open capacity at the local level by shifting work that currently happens locally to the State (assuming local agencies remain staffed at the current level). If the State, instead of local agencies, took reports and conducted screening, local workers who currently do that work could re-allocate their time and capacity to other child welfare and child protection work, such as investigation.

> *"A centralized system could allow some of those intake workers to transition to case work which could lower case load, increase response time, and minimize burnout." – Non-county listening session participant*

In state research interviews, one state that currently uses a centralized reporting and screening system shared that they experience this benefit. They said the centralized system frees up local child welfare staff to focus on other aspects of their jobs, such as making face-to-face visits and assessing safety. This state interviewee also noted that centralized intake prevents uneven workloads that could be experienced across local areas in intake (i.e., some local areas receiving many reports and some receiving few).

Fears and potential challenges

Participants raised potential challenges related to the financial cost of implementing a centralized system, as well as possible unintended consequences of a transition.

A centralized system would require a substantial financial investment.

In the survey and in county and non-county listening sessions, participants raised concerns about the cost of a centralized intake system. Participants expected a centralized system to cost a great deal, and some questioned whether the State would adequately fund the system.

Survey respondents specifically highlighted costs related to staffing. Respondents noted that finding, training, and retaining qualified staff to work in a centralized system would be very costly. This relates to the finding above about the importance of having highly trained and qualified staff.

Survey respondents also identified the need, and subsequent cost, for a robust data-sharing system for sharing information from the State to local agencies and vice versa. They noted that current issues with SSIS, such as delays and outages, mean that it would not be feasible to use SSIS for this purpose.

Changing the system would require a great deal of planning and resources and could cause disruptions or other unintended consequences.

Participants raised concerns about the process of transitioning to a centralized system, if it happened. Survey respondents and participants in non-county listening sessions identified several areas where planning and resources would be required for a successful transition, including:

- Marketing/communication around the transition.
- Education/training for those staffing a centralized system, local agencies, and the public.
- Change management processes.
- Developing a plan for evaluating the system, engaging stakeholders to gather feedback, and making improvements accordingly.

In addition, county listening session participants and survey respondents had concerns about disruptions or delays in services during a transition and other issues, such as a loss of existing data. As such, participants suggested the State provide additional support to counties during the transition period, if a centralized system were to be implemented. Similarly, a state that recently changed its system noted the need for ongoing information-sharing and dialogue with local child welfare agencies throughout a transition.

Other potential impacts

In addition to the findings described above, participants raised potential impacts on local agencies and on children and families.

Impacts on local agencies

Participants expressed concerns that a centralized system could negatively impact local child protection workers.

A centralized system could impact the local child protection workforce by diminishing autonomy and eliminating jobs.

Survey respondents shared a concern about loss of autonomy by local (i.e., county) workers in a centralized system. Respondents expressed that a centralized system would remove the county worker, including their knowledge and expertise, from the decision-making process. These respondents feared that this loss of autonomy could lead to resentment toward the system, less job satisfaction, and local issues in retaining workers and quality work.

In addition, some survey respondents and county listening session participants feared a centralized system would eliminate staff/positions and further reduce capacity in a field with an already overburdened workforce. While this conflicts with the hope of freeing up staff time, as described above, these differences are likely related to the different assumptions participants made about how a centralized system would affect local staffing.

> *"Counties have trained people in intake positions. It is likely these positions would be cut and they do a lot more than just intake, like support [child protection] workers and help with documentation, and other duties. More burden will be placed on [child protection] workers, in an already burdened system, because they will be picking up other tasks because their case aides will no longer be employed." – County listening session participant*

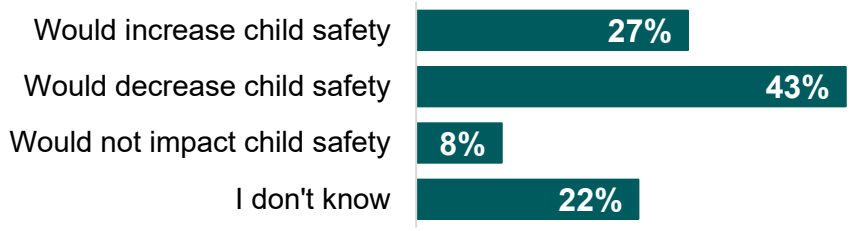
Impacts on children and families

Participants feared that a centralized system could decrease child safety overall.

Shifting to a centralized reporting and screening system could negatively impact children and families.

Extending from every finding in this report is a potential impact on the safety and wellbeing of children and families, and it is vital to consider how the possible benefits and challenges named here might impact them. While these impacts are generally integrated throughout the report, one additional data point from the survey speaks directly to this concept. When asked how they thought a statewide reporting and/or screening system would impact overall child safety, 43 percent of respondents said it would decrease child safety, as shown in Figure 16. However, 27 percent said it would increase child safety, and about 30 percent either did not know or felt it would have no impact. Again, these differences may be related to how respondents imagined a centralized system would be designed and implemented.

Figure 16. Survey responses to “A statewide reporting and/or screening system…” (n=1,061).



FINDINGS: IMPACTS ON DISPARITIES AND INEQUITIES

One research question asked how a centralized child maltreatment reporting and/or screening system might impact disparities and inequities in Minnesota's child welfare system. Answers to this question have been integrated throughout the findings above, in addition to the findings below.

Disparities and inequities

This section summarizes previous information about impacts on disparities and inequities and presents one new overarching finding.

Summary

The previous findings have included several ideas from study participants about how a centralized system might impact disparities and inequities in the child welfare system, with no clear agreement. In addition, participants raised concerns that due to systemic forces, a centralized system may perpetuate or worsen existing disparities.

There was no clear agreement on how a centralized reporting and/or screening system could or would impact disparities and inequities in Minnesota.
Throughout the report, participants shared differing opinions about whether a centralized system would positively or negatively impact disparities and inequities. A primary area of tension was about the value of standardization and contextual knowledge. Some participants hoped that a centralized system for reporting and screening would *reduce* disparities and inequities by increasing consistency through standardizing practices and eliminating personal bias based on knowledge of or past experiences with families. Conversely, some participants feared that a centralized system would *increase* disparities and inequities by forcing a one-size-fits-all approach. They expressed fears of workers making screening decisions without the insight of context, history, and knowledge of families, communities, and cultures.

Participants also had differing thoughts about the potential impacts of a centralized reporting and/or screening system on Tribes and Tribal sovereignty. Some participants hoped that a centralized system could improve collaboration with Tribes as it could streamline engagement around reporting and screening to a single entity (the State). However, some participants, including representatives of Initiative Tribes, had concerns that a centralized system would interfere with Tribal sovereignty by pushing them out of decision-making processes.

In addition to these broader topics, some participants feared a centralized system would *increase* disparities by:

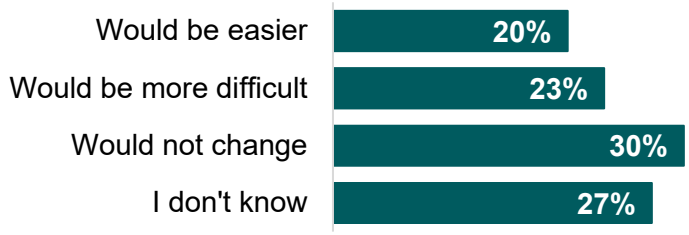
- Worsening over-reporting of families of color by making it easier to make unnecessary reports.
- Eliminating multidisciplinary screening teams, which some counties use to reduce bias in decision-making.
- Straining resources in rural areas by increasing the number of reports to which they must respond.

Alternatively, some participants hoped a centralized system would *reduce* disparities by:

- Increasing the number of resources available statewide, filling gaps in rural or underserved areas.
- Allowing for identification of and response to patterns of inequity through better, more complete data.

This divergence is particularly demonstrated in survey data, as respondents were fairly split over the impact of a statewide reporting and/or screening system on addressing over-representation of children who are Black, American Indian/Alaska Native, or children of two or more races in the child welfare system. While 20 percent of respondents felt it would be easier to address this over-representation in a centralized system, 23 percent indicated that it would be more difficult, as shown in Figure 17. A larger share, 27 percent, indicated that they did not know how over-representation would be impacted.

Figure 17. Survey responses to "If there was a statewide reporting and/or screening system, addressing over-representation of children who are Black, American Indian/Alaskan Native, or children of two or more races in the child welfare system…" (n=1,061).



Because of systemic racism and socioeconomic inequity, a shift to a centralized system may not reduce disparities and could perpetuate or exacerbate them.
In addition to the findings described above, some participants raised that, due to systemic racism and structural inequities, a centralized system alone would not reduce bias. Some survey respondents noted that bias is pervasive and would still exist in a statewide system. This is represented in Figure 17 above, in which 30 percent (the largest share) of survey respondents indicated that, in a statewide reporting and/or screening system, addressing over-representation of children who are Black, American Indian/Alaska Native, or children of two or more races in the child welfare system would not change.

> *"The reality [is] that a statewide system will not likely impact the overrepresentation of children and families of color and/or of lower socioeconomic status who are engaged in the child welfare system (i.e., I believe this is largely a function of the confluence of systemic racism in education/social services/the legal system/the medical system, personal biases and 'blind spots' among mandated reporters, [and] the vast and predictable socioeconomic inequities that tend to exist between racial and ethnic groups in MN, as well as between urban and suburban Minnesotans and our exurban and rural neighbors)." – Survey respondent*

Relatedly, non-county listening session participants highlighted that a centralized system could increase disparities if the standardized screening process was inequitable, causing all cases statewide to be processed through a biased system.

FINDINGS: RESOURCES NEEDED TO IMPLEMENT A CENTRALIZED SYSTEM

A primary legislative requirement underpinning this study was the identification of costs related to a transition to a centralized child maltreatment reporting system. This study did not aim to identify specific financial costs of such a system; rather, it focused on identifying resources (of all kinds) necessary to successfully implement an effective system.

Necessary resources

This section summarizes previous information about resources needed to implement a centralized system.

Summary

The previous findings have included many references to the resources needed to implement a centralized child maltreatment reporting and/or screening system. Overall, participants felt that a shift to a centralized system would require significant investments in a wide range of areas.

To successfully transition to a centralized child maltreatment reporting and/or screening system, the State would need to make a significant resource investment.

Study participants raised concerns about the high cost of implementing a centralized child maltreatment system due to the many resources required for a successful system. Participants identified resource needs related to:

- Recruitment, training, and retention of qualified intake and screening staff to work in a centralized system, including the formation of multidisciplinary screening teams and resources to prevent and address secondary trauma. In particular, participants emphasized that training for intake staff would be vital.
- Education and marketing for mandated reporters and the public to understand the new system and how to use it.
- Robust technology and IT support both for taking reports (i.e., a hotline) and for storing and sharing information. Participants stressed that SSIS, as it was at the time of data collection (December 2024 to January 2025), would not be a successful platform in a centralized system.
- Communication pathways, processes, and protocols to ensure successful collaboration between the State and counties.
- Development of statewide resources for children and families to ensure that centralized intake staff could appropriately refer families across the state to resources.
- Monitoring and improvement mechanisms to evaluate the effectiveness of the centralized system, with a special focus on equity.
- Resources for local systems that may not be equipped to respond to the increase in reports a centralized system might cause.
- Legal expertise, including for data-sharing agreements with counties, Tribes, and other entities.
- Translation services and other accommodations to ensure accessibility for all reporters.

Participants also noted the importance of considering how these resources might be funded, as different funding streams have various restrictions and limitations. In addition, participants worried that a centralized system would not be adequately funded, jeopardizing its success.

While there was limited information about costs in other states, a few states shared budgetary information related to centralized systems. One state with a centralized reporting and screening system identified a cost of almost $31 million for the full system. This state noted that staffing for the hotline is fully funded by their state legislature, as these staff do not carry cases and thus are not eligible for Title IV-E funding. Another state with a centralized hotline that routes callers to local agencies for reporting and screening identified costs for the hotline (through a contracted vendor) at approximately $1.15 million annually, which includes both technology and personnel costs. In addition, this state shared that its child welfare training system annual budget is nearly $4.3 million.

RECOMMENDATIONS FOR FURTHER EXPLORATION

The following recommendations are intended to help guide the State's future work exploring the option of implementing a centralized child abuse and neglect reporting system in Minnesota. These recommendations came from the study process, its limitations, and the collected data.

Clarify the problem that needs to be addressed.

It is not clear what problem a centralized system is trying to fix, and several participants raised this question throughout the study. This made it hard for people to give input on how or if a centralized system could help or be better than the current system. Being clear about the problem will help people give more focused and detailed input. It will also help identify the root causes the State must address to solve the problem.

Dedicate more time and financial resources for meaningful engagement.

The timeline for this study was too short to fully engage with all groups of people with important roles and perspectives on this topic. As a result, important voices are missing from this study's findings, and more engagement is needed; this will require additional time and financial resources. These missing voices include:

- Tribal perspectives. Due to the compressed timing of this study, many Tribes' voices are not included in the findings. The State should complete a process for meaningful engagement with Tribes that respects their status as sovereign nations.
- Families with lived experience. Families who have experience with the child welfare system have valuable input to share on implementing a centralized system based on their experiences and outcomes. As such, the State should gather input from these families. In addition, it would be beneficial to hear from families representing different backgrounds and experiences, like families with children with disabilities and families who identify as Black, Indigenous, and people of color.
- Tribes or local agencies in other states. In learning about child abuse and neglect reporting systems in other states, The Improve Group only interviewed state staff about the system used in their state. To get a fuller picture of the benefits and challenges experienced in other states, the State could talk to other stakeholders, such as Tribes and local agencies.
- Voluntary reporters. Reaching voluntary reporters, those not mandated to report abuse and neglect due to their job, is difficult as they are often not engaged with the child welfare system. In addition, it can be hard for people to initially see what perspective they may be able to share on implementing a statewide system. The State could make additional efforts to gather their input to learn more.

Learn more from local agencies about successful intake and screening practices.

Participants noted variation in the quality of child abuse and neglect intake and screening within the current locally administered system. A concern was that moving to a centralized system may lose the good things that are happening around intake and screening. Learning more about these successful systems, processes, and practices may be beneficial. To do so, the State could ask for input from stakeholders on where they see success and do case studies to understand what is going well and why. The State can use what it learns to retain or reinforce

these processes and practices within the design of a centralized system if the State moves in this direction.

If the State chooses to take on an effort like this, including a diverse set of local agencies would be important to understand what works well in different contexts. For example, there is potential to learn from some larger counties that already function as a mini centralized system. The State could use these as models to scale to the state level. In addition, the State should include rural counties, as many participants noted differences in their locally administered system compared to that of more urban counties. Ultimately, the State would need to design a centralized system that meets the diverse set of needs around the state.

Learn more from Minnesota's adult protection system.

Throughout data collection, many participants referenced MAARC. They often highlighted the challenges or benefits of the system, which they translated into their hopes or fears for a centralized system for reporting and screening child abuse and neglect. Since the State made a similar transition on the adult side, there are many things the State can learn from this system to support decision-making and the potential implementation of a centralized system for child abuse and neglect.

Continue to engage all groups who would interact with a centralized system throughout its design.

As described in the limitations section above, participants answered questions about a system that does not exist. As a result, participant answers were limited to their hopes and fears for a centralized system. If the State decides to move to a centralized system, it should continue to engage those interacting with the system. As the design takes shape, people will be able to give more specific feedback on the different features to support a system that works well for all.

CONCLUSION

The range and diversity of hopes and fears related to the implementation of a centralized reporting and screening system in Minnesota stresses the need for further engagement and research on this topic. While there were many areas in which participants identified differing potential benefits and challenges, they shared a desire for a strong child welfare system in Minnesota.

Generally, participants wanted a reporting system that is easy for people who make reports, and for this to result in high-quality reports created by trained and supported staff. Though there were differing ideas on how to achieve it, participants desired fair and productive decision-making around screening as well as quick responses and follow-up to reports, especially in emergencies. In addition, participants wanted simple and efficient ways to store and share information.

In addition, participants expressed the value of strong local-level relationships, including among counties, Tribes, law enforcement, mandated reporters, and community members, and emphasized the importance of respecting Tribal sovereignty. Participants also wanted adequate resources to support children and families across the state and to find ways to reduce disparities and inequities throughout the system.

All these hopes demonstrate an underlying desire for the safety and wellbeing of children and families statewide through a fully funded and resourced child welfare system. Further engagement and research will be needed to determine whether and how a centralized system could best achieve these goals.

APPENDIX A: SURVEY PROTOCOL

Child Abuse and Neglect Reporting System Survey

Thank you for sharing your experiences and ideas about Minnesota's system for child abuse and neglect reporting! The Department of Children, Youth, and Families (DCYF) is currently looking into different systems for taking and/or screening reports of suspected child abuse or neglect. As part of this process, they would like to get input from people who have made or may make reports.

DCYF is working with The Improve Group, a research and evaluation company, to help them gather input. This survey focuses on your experiences with reporting child abuse and neglect and what you think the effects of using a different type of system would be. **The survey should take about 5 minutes to complete.**

This survey is anonymous, and The Improve Group will keep your answers private. The Improve Group will share with DCYF results from *groups* of people who took the survey. The Improve Group might share quotes from the survey but will not include anything that could identify you.

To protect privacy, please do not share anything in the survey regarding reports you have made or specific children or families. To report suspected abuse or learn more, visit the Report Abuse website from the Minnesota Department of Health and Human Services.

If you have any questions about the reporter survey or this study, please contact Karissa Propson at karissap@theimprovegroup.com or call 651-424-0703.

About you

1. In which county or Tribal reservation/community do you live? [dropdown of all 87 counties, seven Anishinaabe reservations, and four Dakota communities]
2. How familiar are you with the child welfare system generally?
    - ○ Not at all familiar
    - ○ Slightly familiar
    - ○ Somewhat familiar
    - ○ Very familiar
3. Are you a mandated reporter of child abuse and neglect? Mandated reporters are professionals identified by law who must make a report if suspected or known child abuse and neglect has occurred. For a more detailed list of professions that include mandated reporters, see page 6 of this mandated reporter brochure.
    - ○ Yes
    - ○ No
    - ○ I don't know

4. [If a mandated reporter] In what sector do you primarily work?

    - ○ Childcare
    - ○ Child welfare
    - ○ Clergy
    - ○ Education
    - ○ Healthcare
    - ○ Law enforcement
    - ○ Mental health
    - ○ Social services
    - ○ Youth programming
    - ○ Prefer to not say
    - ○ Another sector, please specify: _____

5. [If selected "child welfare" above] Do you currently work in a county or Tribal child welfare agency?

    - ○ Yes
    - ○ No

6. Have you ever made a suspected child abuse and neglect report?

    - ○ Yes
    - ○ No [skip next question]

7. [If made a report in the past] **How much do you agree or disagree with the following statements about reporting child abuse and neglect?** If you have made more than one report, think about your experiences together.

Statement	**Strongly agree**	**Agree**	**Disagree**	**Strongly Disagree**
I knew how to make a report.				
I knew who or where to make a report to.				
I knew what information I would need to share.				
I felt comfortable making the report.				
I am confident my report was acted upon.				
The training I received about being a mandated reporter prepared me to make a report. [for mandated reporters only]				

8. [If have not made a report in the past] **The following questions are about how prepared you would feel to make a report if you needed to.** How much do you agree or disagree with the following statements?

If I needed to make a report…	Strongly agree	Agree	Disagree	Strongly Disagree
I would know how to make the report.				
I would know who or where to make the report to.				
I would know what information I would need to share.				
I would feel comfortable making the report.				
I would feel confident that my report would be acted upon.				
I would feel prepared to make a report because of the training I received about being a mandated reporter. [for mandated reporters only]				

Child abuse and neglect reporting systems

In Minnesota, child abuse and neglect reports are made to the local child welfare agency where the child lives. Local welfare agencies, law enforcement, and 911 can take reports 24 hours a day, 7 days a week. When a report is received by the local child welfare agency, the report is screened (i.e., decide whether the report meets the definition of child abuse and neglect), and the agency follows up as needed.

In some other states, child abuse and neglect reports are made directly to the state (instead of individual counties or Tribes), and the state is responsible for taking reports and screening them. Some states have hotlines, websites, or other systems for 24-hour reporting.

The following questions focus on what you think would be the benefits and challenges of different systems for reporting and/or screening child abuse and neglect.

9. DCYF is exploring the potential effects of having a statewide reporting and/or screening system. This means that instead of contacting the local child welfare agency to report suspected child abuse or neglect, people would report directly to the State. The State could also screen reports.

Please indicate whether the following items would be easier or more difficult if there was a statewide reporting and/or screening system, or if it would not change.

If there was a statewide reporting and/or screening system…	Would be **easier**	Would be **more difficult**	**Would not change**	I don't know
Knowing how to make a report				
Knowing who or where to report to				
Responding to reports in a timely manner				
Addressing **over** reporting (reporting when child abuse and neglect has <u>not</u> occurred)				

If there was a statewide reporting and/or screening system…	Would be **easier**	Would be **more difficult**	**Would not change**	I don't know
Addressing **under** reporting (<u>not</u> reporting when child abuse and neglect has occurred)				
Addressing over-representation of children who are Black, American Indian/Alaskan Native, or children of two or more races in the child welfare system				
Being fair or consistent when screening reports				

10. How do you think moving to a statewide child abuse and neglect reporting and/or screening system would impact overall child safety?

    - ○ A statewide reporting and/or screening system would **increase** child safety.
    - ○ A statewide reporting and/or screening system would **decrease** child safety.
    - ○ A statewide reporting and/or screening system would **not impact** child safety.
    - ○ I don't know.

11. Briefly describe what you think would be the main **benefits** of using a statewide child abuse and neglect reporting and/or screening system. To protect privacy, please do not share any information about reports you have made or about specific children or families.

12. Briefly describe what you think would be the main **challenges** of using a statewide child abuse and neglect reporting and/or screening system. To protect privacy, please do not share any information about reports you have made or about specific children or families.

APPENDIX B: STATE RESEARCH INTERVIEW QUESTIONS

Current system

First, I want to talk about your system and how well it works generally.

1. What works well about your state's reporting and screening system and processes?
2. What are the challenges with your state's system?
3. How are Tribal nations involved in reporting and screening in your current approach and how does your system support or inhibit Tribal involvement?
4. What are the impacts of your reporting and screening system or process on children and families?
5. What kinds of reporting and screening disparities exist in your state and how do you think your state's system impacts them, if at all?
6. What are the most important resources for your state's system (e.g., staff time, technology, training, oversight mechanisms)?
    a. What are the costs for your state's systems? Or, where could we find more information about costs?
7. What other materials can you direct us to or share to help us better understand your state's system?

Potential different system

Now, I'd like to ask your thoughts about doing things the opposite way—using a [county-administered / state-administered] intake system instead of a [county-administered / state-administered].

8. First, has the state ever considered changing their system or aspects of the system?
9. What do you think would be a benefit of using a [county-administered / state-administered system [opposite of current system] for reporting and screening?
10. What do you think would be a challenge of using a [county-administered / state-administered system [opposite of current system] for reporting and screening?
11. How do you think the *costs* of operating a [county-administered / state-administered system [opposite of current system] would compare to your current system?
12. How do you think using a [county-administered / state-administered system [opposite of current system] would affect engagement with Tribal nations?

Gaps from basic research

With the rest of our time, I wanted to ask you a few questions about your system that we weren't able to glean from public information.

13. [Insert any questions from state research protocol that were unable to be answered through document review]
14. What other materials can you direct us to or share to help us answer these questions?

Referrals to other state staff [if needed]

Finally, we'd love to talk with anyone else at your state who might have insight into this topic.

15. Who else might be good for us to talk to?

Those are all of my questions! Is there anything else you want to share or add?

Thank you so much for your time and input—your expertise is extremely valuable to the State of Minnesota. Thanks again and have a great day!