

## Quality Assurance Reviews

Legislative Task Force on Child Protection - January 19, 2016

The following charts provide information on the volume and “screen-out” rate for child maltreatment reports in Minnesota from 2012 through 2015.

- Chart 1: Increase of over 10,000 reports received annually during a four year period of time
- Chart 2: The rate of screened out reports remained relatively stable between 2012 and 2014, with a slight decline in 2015. This is not unexpected given that statutory changes to definitions of maltreatment became effective mid-2015, and revisions to child maltreatment screening guidelines were not effective until 1/1/16.

Chart 1

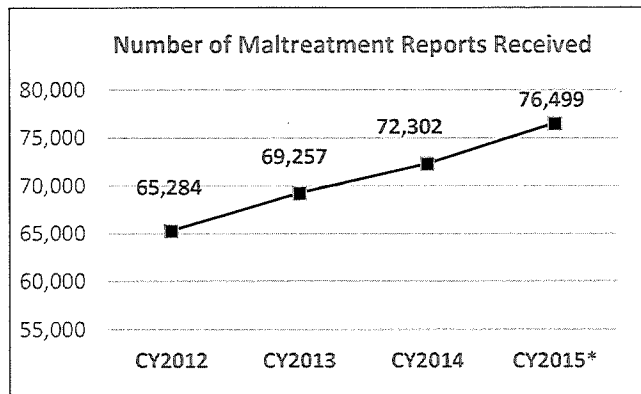
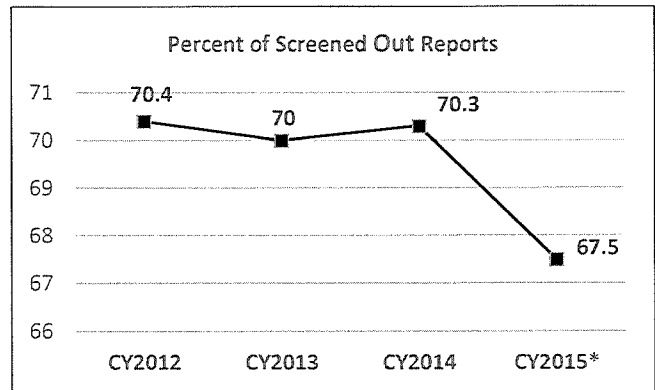


Chart 2

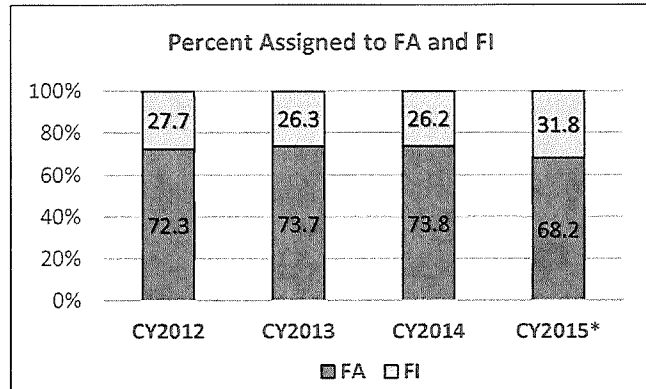


\*Note that 2015 data provided in all charts is preliminary data.

Rates of assignment to the Family Investigation and Family Assessment tracks.

- Chart 3 provides the percentage of screened-in reports assigned for Family Investigation, and those assigned to Family Assessment. Prior to July 1 2015, Family Assessment was the statutorily preferred response to reports of maltreatment.

Chart 3



**Screening review process:**

From October 2014 through September 2015, approximately five percent of screened out maltreatment reports from across Minnesota were randomly selected for review. Each report selected was assigned to a two member team that included DHS employees with county child protection experience. The teams used a tool that standardized the review process and identified whether any of the allegations contained in the referral appeared to meet the statutory threshold for maltreatment. When the review teams identified a referral in which they believed the information met criteria for a child protection response (assessment or investigation), the referral received a secondary review by the manager of the Child Safety and Prevention and/or Training, Quality Assurance and Research and Evaluation units. If, after the managerial review, there remained questions or concerns with the local agency screening decision, contact was made with the responsible agency to discuss the report.

**Results of reviews (October 2014 through September 2015):**

A total of 1,725 screened out reports were reviewed; approximately five percent of all screened out reports statewide. Contact was made with 30 different local agencies related to 53 screened out maltreatment reports (approximately 3 percent of the total reviewed). Results of DHS consultation with local agencies were as follows:

- In 41 percent (22 reports), the consultation resulted in the agency taking further action to assess or investigate the allegations included in the reports, or provided additional information that the allegations had already been assessed/investigated.
- For 34 percent (18 reports) of the reports, additional information was provided by the local agency that resulted in agreement that the decision to screen out the referral was consistent with Minnesota statute and the Minnesota Child Maltreatment Screening Guidelines.
- In 25 percent (13 reports), consultation between the county and DHS did not result in agreement on whether the information in the report met criteria for a child protection response, and counties upheld their original screening decision. Effective January 1, 2016, local child welfare agencies are required to follow the Department Guidelines.

**Themes identified:**

The following themes have emerged through the screening review process and consultation with local child welfare agencies:

- Lack of thorough documentation on intake reports.
  - Through consultation, agencies provided information that was not documented on the intake report in the Social Services Information System (SSIS) that informed the screening decision.
  - In some instances, the documentation on intake reports was not sufficient for review.
  - Changes in SSIS will help to improve the quality and standardization of documentation.
- Inconsistent interpretation of screening guidelines, specifically in regard to allegations of threatened abuse when there are reports of physical abuse but no visible marks or bruises.
- Referring new child maltreatment reports that meet criteria for a new assessment or investigation to an already open case management case.
- Inconsistencies in decision-making when the following circumstances are reported:
  - Alleged maltreatment by an unknown offender(s).
  - Reports of alleged maltreatment that occurred outside of the recent past, or reports in which no timeframe was given for the alleged maltreatment.
- Interpretation of the Child Maltreatment Screening Guidelines as guidelines and not requirements and differences in community standards (including county attorneys, law enforcement and schools). (This

was identified primarily prior to 2015 statutory changes that require local agencies to follow the state guidelines.)

**Next steps/ongoing activities:**

- Develop additional Quality Assurance review processes. The department will be expanding on quality assurance processes to review practice in the up-front part of the child protection process, including track assignment decisions. New staff have been hired specifically for this purpose which will greatly impact the Department's capacity to do continuous quality improvement in the receiving, documenting, and screening of reports.
- Improved documentation. The Child Safety and Permanency division and local agencies have identified a number of needed/desired changes to SSIS. MN.IT has assigned a project manager to guide the necessary system enhancements within SSIS. It is projected that the enhancements will occur in 2016.
- Training. The department is developing training curricula specific to intake and screening practices. Information obtained through the screening reviews will aid in the development of the training.
- Internal consultation. Results of screening reviews will be shared and discussed regularly by staff within the Child Safety and Permanency Division to ensure consistency in interpretation and application of statute and the Child Maltreatment Screening Guidelines, and inform future revisions to the Child Maltreatment Screening Guidelines.