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**Early Learning & Human Services  
Committee**

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**HB 2289**

**Brief Description:** Establishing a flexible approach to child protective services.

**Sponsors:** Representatives Kagi, Walsh, Roberts, Carlyle, Jinkins, Ormsby and Dickerson.

**Brief Summary of Bill**

- Authorizes the Department of Social and Health Services (DSHS) to establish at least two sites to begin implementing Family Assessment Response (FAR) within Child Protective Services.
- Requires the DSHS to develop an implementation plan in collaboration with stakeholders.
- Provides guidelines to operate the FAR in implementation sites.
- Requires the Washington State Institute for Public Policy to evaluate implementation sites and report results to the Legislature.

**Hearing Date:** 1/17/12

**Staff:** Megan Palchak (786-7120).

**Background:**

Recent Child Abuse and Neglect Statistics.

Washington's Department of Social and Health Services (DSHS), Children's Administration (CA) estimates that in 2011, Child Protective Services (CPS) received 77,139 reports of child maltreatment, investigated 27,199 of those reports, and determined that 4,878 reports contained founded allegations of maltreatment. Approximately 66 percent of founded reports were regarding neglect, 25 percent were regarding physical abuse, and 9 percent were regarding sexual abuse. According to the DSHS/CA, in 2011, approximately 82 percent of CPS investigations resulted in no finding of child abuse or neglect.

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*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.*

### Child Abuse Prevention and Treatment Act Reauthorization Act of 2010.

The Child Abuse Prevention and Treatment Act (CAPTA) is the sole federal child welfare program focusing only on preventing and responding to allegations of child abuse and neglect; the CAPTA was reauthorized in 2010 through 2015 (Public Law 111-320). Public Law 111-320 encourages states to review their laws, policies, practices and procedures regarding neglect to ensure children are protected. It also encourages, but does not require, state and local CPS agencies to utilize "differential response" which is described as "a state or community-determined formal response that assesses the needs of the child or family without requiring a determination of risk or occurrence of maltreatment. Such response occurs in addition to the traditional investigatory response." There are no federal regulations regarding the practice of differential response.

### Defining Differential Response.

According to the U.S. Department of Health and Human Services, definitions and approaches to differential response vary. Differential response systems may be referred to as "alternative response," "multiple track," or another term. The National Quality Improvement Center on Differential Response in Child Protective Services describes the core elements of differential response as follows:

- two or more discrete responses to screened in and accepted reports of maltreatment;
- assignment to response pathway is determined by an array of factors;
- original response assignments can be changed;
- families assigned to non-investigation pathways are able to accept or refuse to participate in the non-investigation pathway or choose the traditional investigation pathway;
- after assessment in the non-investigation pathway, services are voluntary as long as child safety is not compromised;
- discrete responses are established by codification in statute, policy, or protocols;
- no substantiation of alleged maltreatment (services are offered without a formal determination that maltreatment has occurred); and
- use of the central registry depends on the type of response.

### Child Protective Services in Washington.

Child protective services are services provided by the DSHS designed to protect children from child abuse and neglect and safeguard such children from future abuse and neglect, and conduct investigations of child abuse and neglect reports. Investigations may be conducted regardless of the location of the alleged abuse or neglect. Child protective services includes referral to services to ameliorate conditions that endanger the welfare of children, the coordination of necessary programs and services relevant to the prevention, intervention, and treatment of child abuse and neglect, and services to children to ensure that each child has a permanent home.

### Duty to Investigate.

The DSHS is required to investigate complaints of any recent act or failure to act on the part of a parent or caretaker that results in death, serious physical or emotional harm, or sexual abuse or exploitation, or that present an imminent risk of serious harm, and on the basis of the findings of such investigation, offer child welfare services in relation to the problem to such parents, legal custodian or persons serving in loco parentis, and/or bring the situation to the attention of an appropriate court, or another community agency. An investigation is not required of non-accidental injuries that are clearly not the result of a lack of care or supervision by the child's

parents, legal custodian, or persons serving in loco parentis. If the investigation reveals that a crime against a child may have been committed, the DSHS must notify the appropriate law enforcement agency.

#### Alternative Response System in Washington.

In 1997 the Legislature authorized an alternative response system (ARS). Chapter 386, Laws of 1997 described an ARS as "voluntary family-centered services provided by a contracted entity with the intention to increase the strength and cohesiveness of families that the DSHS determined to present a low risk of child abuse or neglect." From 1998-2005, Chapter 386, Laws of 1997 provided that:

The DSHS was required to:

- contract for the delivery of services for at least two, but not more than three, models of alternative response;
- provide for the delivery of services in the least intrusive manner reasonably likely to achieve improved family cohesiveness, prevention of referrals of the family for alleged abuse or neglect, and improvement in the health and safety of children;
- identify and prioritize risk and protective factors associated with the type of abuse or neglect referrals that are appropriate for services delivered by alternative response system; and
- identify appropriate data to determine and evaluate outcomes of the services delivered by ARS providers. Contracts were to include provisions and funding for data collection.

Contracted providers were required to:

- use risk and protective factors to determine which services to deliver;
- recognize the due process rights of families that receive ARS services; and
- recognize that services were not intended to be investigative.

The court was authorized to order the delivery of services through any appropriate public or private provider.

According to the DSHS, "historically, the contracted alternate intervention program in Washington...[had] not achieved ideal outcomes and ...had some program design weaknesses. There...[had] been a lack of adequate program and service definition, and engagement rates of families in services...[had] been an issue. The percentage of families engaged in services by contracted providers...[had been] low." In 2006 the DSHS initiated a redesign of the ARS, and renamed it "Early Family Support Services" (EFSS). The stated goals of the redesign included: implementation of a standardized assessment tool, development of service delivery standards, and integration of promising or evidence-based programs.

#### Consideration of Differential Response in Washington.

In 2008 the DSHS issued a legislative report regarding its consideration of a differential response system. The report described pros and cons associated with implementing differential response, which are summarized below.

Pros:

- Social workers could concentrate on family assessment and case planning rather than the outcome of an investigation.

- Investigative findings may become more consistent, due to a narrower focus.
- Families that are chronically reported to CPS may receive more therapeutic interventions that are motivational in nature.

Cons:

- In order for change to succeed the total agenda must be staged and doable, organizational capacity must be addressed given the number of change initiatives underway.
- Funding, service levels, and ability to meet the basic needs of families would limit the outcomes of a differential response system.
- The CA would likely not have the ability to respond to families in an assessment track with immediate services to meet their basic living needs and if Washington prioritized services for the most at-risk children, then lower risk families in the assessment track would receive fewer services paid by the DSHS/CA.
- All social work staff must be trained in engaging families and assessing safety and risk factors.
- Implementation of non-contracted differential response system would require further specialization of staff and additional categorization of families.
- Agencies serving vulnerable adults and children would not learn about some potential CPS concerns regarding persons applying to be employed or licensed since CPS investigative findings on some cases involving maltreatment would no longer occur for families diverted to the "assessment track."
- Research did not clearly indicate that referring moderate risk families to differential response will improve outcomes (some states limit an alternate response to low risk cases).

Cost Effectiveness of Family Assessment Response.

A 2011 cost-benefit analysis performed by the Washington State Institute for Public Policy (WSIPP) concluded that Minnesota's approach to differential response, called "Family Assessment Response," both reduced out-of-home placements and saved taxpayer dollars.

**Summary of Bill:**

The DSHS is authorized to establish at least two sites to begin implementing "Family Assessment Response" (FAR) within CPS. Site implementation is contingent on the provision of philanthropic funding.

"Family Assessment Response" is defined as a way of responding to certain reports of child abuse and neglect, using a differential response approach to CPS, which does not include a determination of whether child abuse or neglect occurred, but does determine the need for services. No one is named as a perpetrator and no investigative finding is entered into the record as a result of FAR. ("Family assessment" and other terms are defined.)

The DSHS is required to develop a plan to implement FAR sites in collaboration with stakeholders including Tribes, and specifies items to be included in the plan. A summary report of the implementation plan is due to the Legislature by September 2012. The report must include, but is not limited to: a description of the FAR practice model, a statement of FAR site implementation timeframes, identification of potential additional non-investigative pathways, identification of methods to involve local community partners in the development of community-based resources to meet families' needs, training, and other items.

Sites selected to implement FAR must operate within the following guidelines:

- respond to reports of child abuse and neglect that are screened in and accepted for departmental response with an investigation or a family assessment;
- utilize a method to assign cases to investigation or family assessment based on an array of factors;
- allow for response assignment to change based on new information;
- provide a full investigation if a family refuses the initial family assessment;
- provide voluntary services to families based on the initial family assessment;
- conduct an investigation and not a family assessment in response to specific allegations;
- establish a 45-day time limit for FAR cases with the provision of exceptions based on the safety of the child;
- maintain confidentiality of families involved in FAR; and
- provide families engaged in FAR with information about the process and instructions about how to contact the Office of the Family and Children's Ombudsman.

The WSIPP must conduct a rigorous evaluation of each implementation site in consultation with the DSHS and members of the child welfare research community. The evaluations must address, at minimum, child safety measures, out-of-home placement rates, re-referral rates, and caseloads. The WSIPP must deliver a progress report to the Legislature after the demonstration sites have been operating for the 1.5 years; the final evaluation reports must be delivered after sites have been operating for 3 years.

The Legislature must consider the final evaluation results and decide whether to authorize statewide implementation of FAR.

**Appropriation:** None.

**Fiscal Note:** Requested on January 11, 2012.

**Effective Date:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.