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Child Abuse Investigation Report Team Summary and Recommendations

April 2011

Team Overview

The Child Abuse Investigation Report Team has interviewed staff, studied detailed process maps, and conducted focus groups with key customer groups in order to redesign the reporting system. The current system, starting with the report at the call center, takes between 178 and 203 days to complete. The recommendations from this effort will shorten that time to just over 40 days.

The root cause of the current time delays is primarily due to our inability to deal with the demand. An average of 34,000 reports enter the process per year with a work time of around 22 hours each. At that volume, investigators receive 2-5 new reports per week and can only close one. Their need to see and interview the family to make a safety assessment has taken priority over documentation. Each week they receive a new workload, they fall further behind in their ability to close the report properly.

The ideas contained within this summary include reducing the amount of work time per report, changing the way reports are closed for the 80% that are traditionally open/closed, and working on simplifying several of the processes that help families with services and dependency conditions.

The team understands these recommendations are a radical departure from the current system, and stresses that the most value added work is still being done with the investigation and clinical decisions being the keys to helping families.

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Increasing Capacity

The act of simply adding more staff to deal with the work volume was dismissed by the team not only for budgetary reasons, but due to the increasingly difficult task of finding qualified applicants for current openings. The key to dealing with the capacity was going to have to come from revamping the process itself.

The two steps that consume the most time are the family interview/information gathering step and entering the findings into the Child Safety Assessment (CSA) system. These account for well over half the overall work time and while 80% of our reports are open/closed and offer a high degree of confidence that a child is safe, these reports require the same amount of processing time as 15% of cases that will remain open with services and the 5% that will include dependency and court involvement. In other words, all reports, regardless of the risks and outcomes, are treated the same.

Because such a large majority of the reports historically will be closed with no further action needed, the team determined that a separate process for the open/closed would both speed the entire process along, and would offer investigators the opportunity to spend more quality time on the reports that required further investigations, services, home visitations, court documentation, etc.

The investigation and information gathering step was left largely untouched, since in both the investigator interviews and in team meetings there was unanimous agreement that failure to visit with, and look into the background of, the family would be detrimental to the integrity of the work. That left only the documentation step as a prime candidate for change.

IDEA 1: Reports that are clearly open/closed should require only the case notes as adequate documentation of risk.

IDEA 2: A thorough and consistent clinical decision making process should be put in place to assure that both the supervisor and the investigator agree that the report is a clear open/closed.

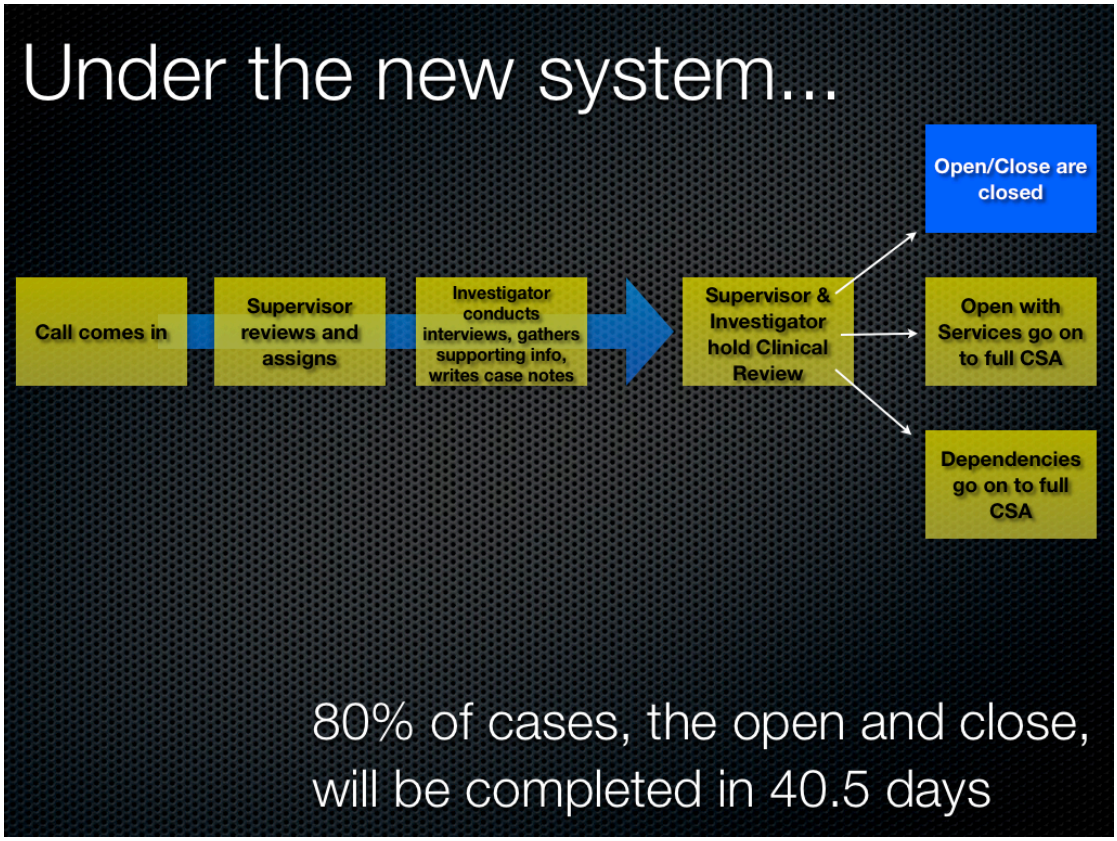
Total time savings: 122,400 work hours per year

The diagram below demonstrates how the new process would work. After receiving a report, the supervisor would assign it to the appropriate investigator who would conduct the interview and gather information exactly how it is being done today. When they return from the interview they would enter their case notes and schedule a clinical review with their supervisor. At the clinical review, the supervisor would assure that all risk and safety areas have been addressed in the case notes.

If all areas are adequately covered, and the report is clearly an open/closed, the case notes can be entered in the system for future use and the report can be closed. If the case is not a clearly open/closed, or is open with services or a dependency, the report will not be closed at this time and the investigator will continue working the report using the full CSA model as it is done today.

This change to when the clinical is done, and limiting the documentation from eight hours needed now to three hours for thorough case notes not only allows for a clear open/closed to be closed within 40 days, but also frees up time for the investigators to work on the more time intensive cases.

It is important to note that the value added work of conducting the interview, having a supervisor-led clinical decision, and documenting the findings all still take place.



Simplifying the Process and Process Support

For reports that will require the full CSA process, there were some simplification and support recommendations that would streamline certain tasks and make the documents generated more customer friendly. When asked about documents such as the Case Plan and the CSA, the customer focus groups routinely focused on the need to make the information easier to read, more usable, more timely, and focused on safety.

The CSA has four recommendations that will help streamline the 20% of reports which will continue to use the full documentation.

IDEA 3: Eliminate the Strength & Risk Assessment (SRA) as a separate document.

IDEA 4: Allow workers to save as they go within CHILDS, and the CSA system.

IDEA 5: Revamp the way the 5 Safety Threshold questions are answered in CHILDS for families with multiple children and family members.

IDEA 6: When completing a reassessment, automatically shade out #1 and #2.

The Case Plan has two additional ideas that will make the document more user friendly as well as save time for investigators.

IDEA 7: Shorten the Case Plan from 7 to 3 pages by focusing on family goals, behavior changes required, and target dates for completion of services and goals.

IDEA 8: Elimination of the Modification of Services and Supports (MOSS).

The final three ideas in this area are more process support in nature and include:

IDEA 9: Increasing system access of Grade 19 and above staff in several areas.

IDEA 10: Additional support staff could be hired to assist investigators and supervisors by collecting support materials, build cases, pulling background checks, etc.

IDEA 11: Use an external partner to link families who have an identified need for services, but do not require any further CPS intervention in open/closed cases to services, thus allowing investigators to close the report.

Total time savings: 65,000 work hours per year by eliminating both the SRA as a separate document and the MOSS

The CSA recommendations stem from both duplication and cutting back on the eight hour time block needed to complete the full documentation. Particularly, the SRA is extremely time consuming and requires entry of various domains that are already covered in other areas. Eliminating this form does not keep investigators from assessing the risks, but rather prevents the wasted time of rekeying factors they have already addressed. Below is a chart showing the SRA domains and where each is already adequately covered.

Reduce Duplication

SRA Domain	CSA Equivalent
Child Vulnerability/Special Needs/Behaviors	6 Questions
Parenting Skills and Expectations	6 Questions
Empathy, Nurturance & Bonding	6 Questions
Parental Substance Abuse	6 Questions and 17 Safety Factors
Mental, Emotional, Intellectual, Physical Limitations	6 Questions and 17 Safety Factors
General History of Violence	6 Questions, 17 Safety Factors, Background
Domestic Violence	6 Questions and 17 Safety Factors
Protection by Non-Abusive Caregiver	6 Questions and 17 Safety Factors
Economic Resources	17 Safety Factors
Parental History of Child Abuse, Neglect	Adult Functioning
Recognition of Problem/Motivation to Change	Adult Functioning
Social Supports	Adult Functioning
Family Stress	Adult Functioning

One of the major obstacles to completing the CSA in a timely manner is the requirement to work through the system in a single effort. The eight hours required makes it nearly impossible to block adequate time to navigate the various screens. The ability to save information and return to the system at a later date would allow investigators to close reports faster by using smaller blocks of free time to work on open reports as their schedule allows and to enter information as it comes in verses waiting until the end.

Changing two major areas would also assist them in closing reports in a timely manner, including the ability to ‘click’ on the 5 Safety Thresholds that must be completed for each child. When families have multiple kids they often share the same factors, yet the information must be re-keyed multiple times. The ability to check all that apply would speed up the process. Also during reassessment questions one and two do not need to be answered and should be “grayed out” to remind investigators not to spend time in these areas.

The Case Plan ideas come mainly from the focus groups with investigators and the various users of the plan (minus the family). All agreed an easier, more usable form was needed. This form should include “pop up” examples of behavior changes that would help guide investigators in their efforts to put together a more usable plan. It should omit visitation plans, children’s needs, safety threats, and out of home characteristics that are not useful to the family, but include clear goals and target dates so that everyone seeing the document can easily read and comprehend.

When it is time to reassess the Case Plan, it should not require the entire plan to be recreated, rather allow workers to enter progress reports, any identified barriers, and new recommendations in the case notes. These reassessments should also be driven by the changes in the family condition, parental contact, and clinical supervision meetings and not by MOSS as it is done today. The MOSS forces the total recreation of the plan and CSA-SRA every 90 days and puts a burden on staff to comply on a self imposed complex process that adds no value to the overall plan itself.

Limitations imposed on staff to manage access have hindered the ability to close reports in timely fashion. While the proper checks and balances must be maintained, the team felt that staff who are Grade 19 and above should have the following authorities:

- All supervisors having the ability to close cases
  - Allowing them to assist overburdened unit and making it easier to cover other Supervisors when they are absent or separate from the department
- Service authorization approvals
- Determination of case status
- Adoption/safe family approval
- Report routing
- Case transfer
- Changes to CHILDS

This improved authority has the additional benefit of removing nearly 3,000 requests to the CHILDS/IT help desk a year.

One of the themes of the team was the inconsistent staffing between the rural and urban offices. Both staffing levels and duties seemed to vary a great deal. Instead of trying to set a standard staff level, the team is recommending each office review their work load in the new way of doing reports and assess their staffing needs. All support staff changes should be accompanied by time saving predictions and therefore will be office specific after the roll out of their new process.

One of the activities proven to reduce repeat reports and assist families is the ability to link parents with community services. For those reports that are open/ closed, it is often determined that the family would benefit from such services, but time constraints have limited the investigators ability to spend significant time facilitating that linkage, other than simply recommending services.

In such cases, the team recommends an outside partner take on the role of reaching out to the family and facilitating the linkage. This allows for the time needed to educate and encourage involvement in these services, and the investigator to close the report with confidence that the services have been explained and offered.

This idea is the only idea that could require additional funding if the current contract could not be revised to meet these needs. While a single contact focused on linking families with services and <u>not doing any further assessment</u> will not be as costly as previous contracts, the team recognizes that budget restrictions may make this idea difficult. However, there is a defined need that the team feels is underserved in the current process.

All of these support recommendations should have an impact on processing times, but due to the amount of speculation needed to calculate such savings, the team refrained from adding them to the saving totals and only reported the amount of time that would be saved eliminating the MOSS and SRA portions of the process.

External Support

There are several key functions that surround the investigation process that could potentially assist in cutting the process time significantly. When a call comes to the Hotline there is an option to use an Alternative Investigation (AI) process that would bypass the long investigation process. While the AI process may be designed to be completed by an investigator, the Hotline was determined to be an ideal place, because they have the Source on the phone to address the questions needed to complete the AI. These AI's, while only predicted to be 1% of the total reports would reduce the number of reports by approximately 340.

The Quality Assurance (QA) process hears a small percentage of reports that are requested to be reclassified, or not completed by the assigned unit and investigator for various reasons. The customer focus groups and interviews revealed that there is a waining confidence in this step, and supervisors reported rarely using it since the time it takes and the results achieved rarely make it worth the effort. If this process could regain the confidence of the supervisors, they feel an average of 90 reports a month would be reviewed. If the same one-third of those were reclassified or re-assigned from the investigators (the average percentage of those reviewed today), it would remove an additional 360 reports.

Together these ideas would remove an estimated 700 reports, or 12,250 hours of work. Of all the estimated savings, this area has been the most debated. While the team feels both of these areas could yield results, they admit they are outside of their scope and it will take additional time and effort to truly understand the processes and the options to improve them.

IDEA 12: Invigorate the AI process by identifying eligible reports and develop new training for the Hotline.

IDEA 13: Remove the QA process from the Hotline to an independent oversight unit and look at ways of improving the reputation of QA in the field.

The final external support idea is to allow the PSRT unit to make small corrections to the reporting process. Currently, the PSRT unit sends change requests to supervisors and investigators, but they often are considered low priority and are overlooked for long periods of time. When the changes are minor in nature, such as a misspelling, authority to change it at PSRT would reduce some of the back and forth and delay in a final decision.

IDEA 14: Allow the PSRT unit to have the authority to make minor changes

Total potential time savings: 12,250 hours

Long Term Recommendations

The team would like to suggest the department begin to look at a major overhaul of the technology systems used in the process including CHILDS, bandwidth needs, and the backlog of current needs. More information on this long term idea is available upon request.

Conclusion

The ideas contained in this summary add up a total savings of 199,650 hours of work time and reduce the time to close 80% of reports from 178-203 days to just 40 days.

More importantly the time savings returns 14 weeks of time to the estimated 350 staff who conduct investigations across the state. That time can be used to more thoroughly review cases that are not open/close, or may require more attention to make a safety determination.

These ideas are submitted for your review and the team is available to discuss any of the recommendations at your convenience.