CONNECTICUT DEPARTMENT OF CHILDREN AND FAMILIES' FAMILY ASSESSMENT RESPONSE

ANNUAL STATUS REPORT TO THE COMMITTEE ON CHILDREN OF THE CONNECTICUT GENERAL ASSEMBLY

Prepared by: Performance Improvement Center, UConn School of Social Work July 1, 2022



DATA DEFINITIONS AND NOTES

Family Assessment Response (FAR) data:

- LINK/PIE data extract through 12/31/2021
- Including only FAR/CSF families, their prior and subsequent reports
- Multi-level data structure:
 - Allegations/victims/perpetrators within reports; reports within protocol; protocol identification Number (DRSID) within family.
 - A report could have several allegations, victims, and perpetrators.
 - A protocol could have several reports.
 - A family could have several protocols.

FAR case counts:

- Total FAR Reports¹ accepted in CY 2021: 15,571
 - After data quality validation process, accepted FAR reports in CY 2021 used in analyses: N=14,332²
 - FAR Protocols (i.e., combined reports under a single identification number (DRSID)) accepted in CY 2021: N=13,807³
- Families with FAR reports accepted in 2021: 12,499

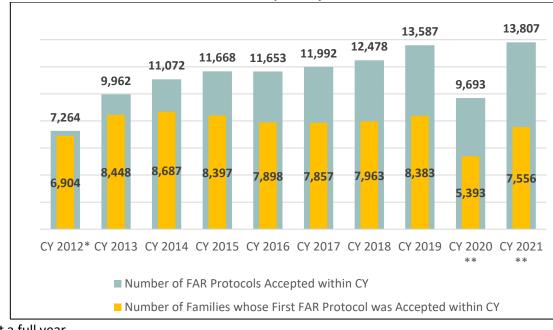
Community Supports for Families (CSF) case counts:

- Families received CSF services (i.e., were active) during CY 2021: 2,334
- CSF episodes discharged in CY 2021: 1,519

¹ Reports accepted Pre-Attrition

² Reports accepted Post-Attrition (Track Change FAR records, linked to wrong family, no DRSID)

³ Aggregated to DRSID level.



First FAR Protocols and Total FAR Protocols Accepted by Calendar Year 2021

* Not a full year

**Covid19 pandemic

The following analyses are included in this report as required by Subst. Senate Bill No. 183 "An Act Concerning the Program of Family Assessment Response."

- A. The number of accepted reports of child abuse or neglect, and the percentage of reports assigned a Family Assessment Response
- B. The disposition of families assigned a Family Assessment Response
- C. Reporter type for cases assigned a Family Assessment Response
- D. The number and percentage of Family Assessment Response reports that changed track to investigations
- E. An analysis of the Department's prior/subsequent involvement with a family that has been assigned a Family Assessment Response
 - 1) Prior child protective services history for FAR cases accepted in the calendar year of this report
 - 2) Analysis of subsequent reports for FAR families
 - 3) Analysis of substantiated subsequent reports for FAR families
 - 4) Summary of findings: Prior and subsequent reports for CSF families
- F. An analysis of the Department's prior/subsequent involvement with a family that has been assigned to a Community Partner Agency (i.e., Community Supports for Families (CSF)).
 - 1) Prior child protective services history for CSF cases accepted in the calendar year of this report
 - 2) Analysis of subsequent reports for CSF families
 - 3) Analysis of substantiated subsequent reports for CSF Families
 - 4) Summary of findings: Prior and subsequent reports for CSF families
- G. A description of services that are commonly provided to families referred to the Community Support for Families program
- H. A description of the Department's staff development and training practices relating to intake
- I. The number and percentage of referred families who were ultimately enrolled in the Community Support for Families program
- J. The number and percentage of families receiving a Family Assessment Response by race and ethnicity
- K. The reason for discharge from the Community Support for Families program by race and ethnicity
- L. A comparison of the needs identified and the needs addressed for families referred to the Community Support for Families program

A. The number of accepted protocols of child abuse or neglect, and the percentage of reports assigned to the Family Assessment Response Track

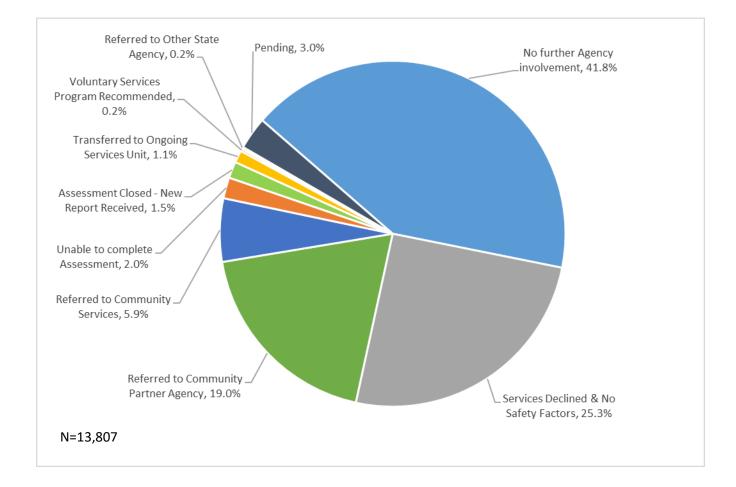
There were a total of

27,112

accepted reports of child abuse and neglect by DCF Of the total number of accepted reports 57.4% (15,571) were assigned to the FAR track

Updated 5/12/2020 – Source: FAR Legislative Report CY2020.spv

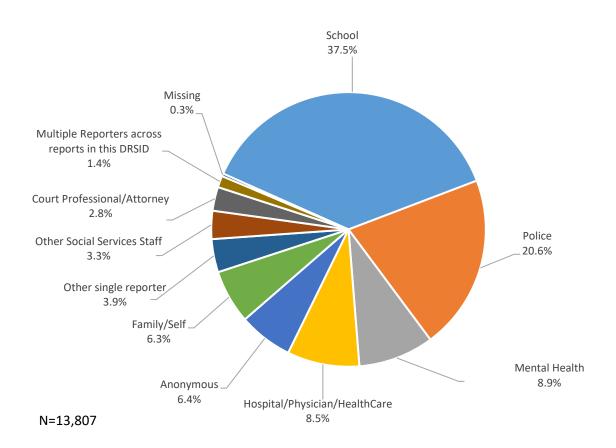
B. The Disposition of Reports Assigned a Family Assessment Response: FAR Reports for Cases Accepted in CY 2021



The top three dispositions of FAR protocols accepted in CY 2020 were:

- 1. No further agency involvement (41.8%).
- 2. Services declined and no safety factors present (25.3%).
- 3. Referred to a Community Partner Agency (i.e., Community Support for Families Program) (19.0%).

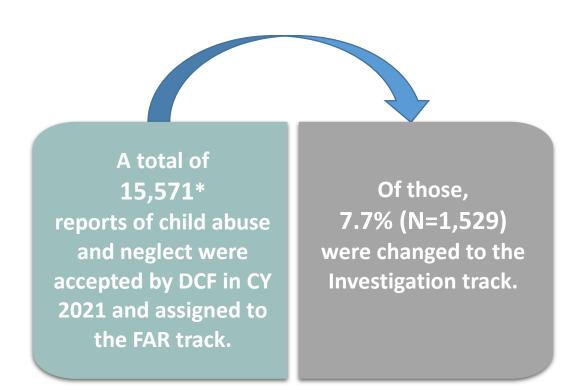




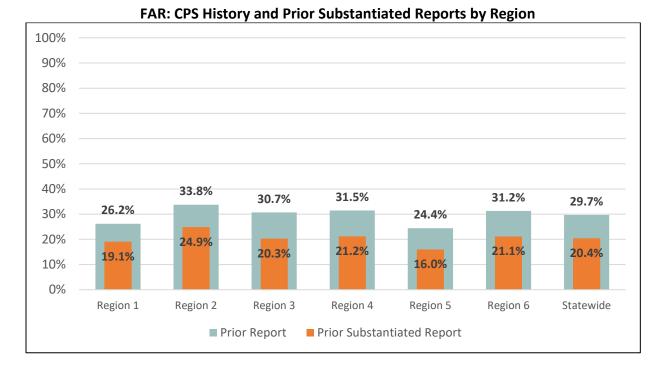
The top five reporters of FAR protocols accepted in CY 2019 were:

- 1. Schools (37.5%)
- 2. Police (20.6%)
- 3. Mental health provider (8.9%)
- 4. Hospital/Physician/Health Care worker (8.5%)
- 5. Anonymous (6.4%)

D. Family Assessment Response Reports That Changed Track to Investigations



* Total FAR protocols accepted in CY 2021: 15,571. After data quality validation process, FAR protocols accepted in CY 2020 used in analyses: N=12,499.

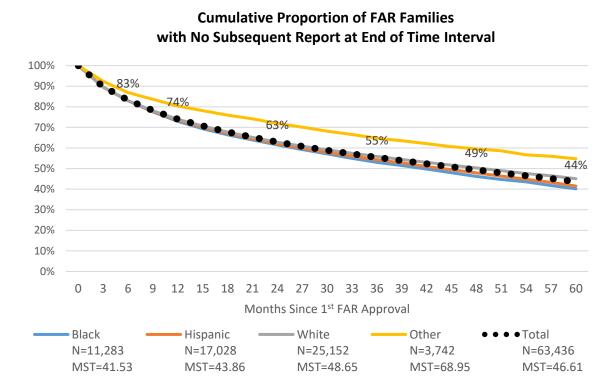


E. (1) Prior Child Protective Services History for FAR Families Accepted in 2021

N=12,421 (12,499 families with FAR reports accepted in 2021 - 78 families with missing Region information)

Of the FAR families with an accepted FAR report in CY 2021:

- 29.7% had at least one prior CPS report.
- 20.4% had at least one substantiated report prior to their first FAR report.
- 22.1% received a prior report more than 12 months before their first FAR report.



E. (2) Analysis of subsequent reports for FAR families

A statistical technique, Survival Analysis, was conducted using only records assessed using the updated SDM II Risk to determine what proportion of FAR and CSF families has not received any subsequent report in a given time period.

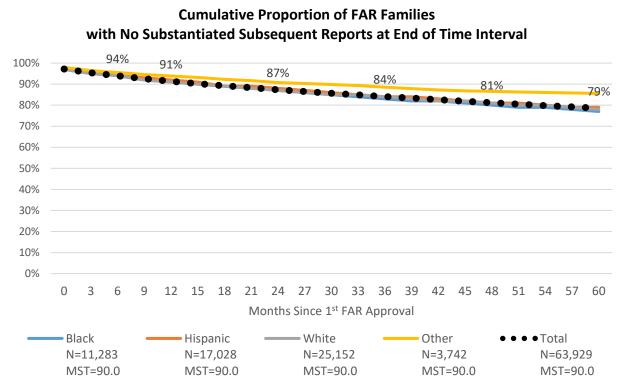
Of FAR families:

- 83% have <u>not</u> received a subsequent report within <u>6 months</u> of their first FAR approval date.
- 74% have <u>not</u> received a subsequent report within <u>**12 months**</u> of their first FAR approval date.
- 63% have <u>not</u> received a subsequent report within <u>two years</u> of their first FAR approval date.
- 55% have not received a subsequent report within three years of their first FAR approval date.
- 49% have <u>not</u> received a subsequent report within <u>four years</u> of their first FAR approval date.
- 44% have not received a subsequent report within five years of their first FAR approval date.

Unadjusted survival rates to the first subsequent report indicate that there are statistical differences among race/ethnicity groups. FAR families whose race/identity is identified as "Other" had the best subsequent report rate when compared to all other groups (Median Survival Time (MST)=68.9 months). FAR families identified as "Black" (MST=41.5 months) or Any Hispanic (MST=43.9 months) had the worst subsequent report rate when compared to all groups. Survival rates for Black, Hispanic, and Other differed significantly from White.

(N=62,436; 5,231 records missing race/ethnicity information)

E. (3) Analysis of Substantiated Subsequent Reports for FAR Families



Of FAR Families:

- 94% have not received substantiated subsequent reports within <u>6 months</u> after their first FAR approval date.
- 91% have not received substantiated subsequent reports within <u>12 months</u> after their first FAR approval date.
- 87% have not received substantiated subsequent reports within <u>two years</u> after their first FAR approval date.
- 84% have not received substantiated subsequent reports within <u>three years</u> after their first FAR approval date.
- 81% have not received substantiated subsequent reports within <u>four years</u> after their first FAR approval date.
- 79% have not received substantiated subsequent reports within <u>five years</u> after their first FAR approval date.

Unadjusted survival rates to the first <u>substantiated</u> subsequent report indicate that are statistical differences among race/ethnicity groups: FAR families identified as 'Other' had a better <u>substantiated</u> subsequent report rate than those identified as White.

(N=62,436; 5,231 missing race/ethnicity)

E. (4) Summary of Findings: Subsequent and <u>Substantiated</u> Subsequent Reports for FAR Families

Using only records assessed using the updated SDM II Risk (N=21,033), there were no statistically significant differences by race after adjusting for significant predictors.

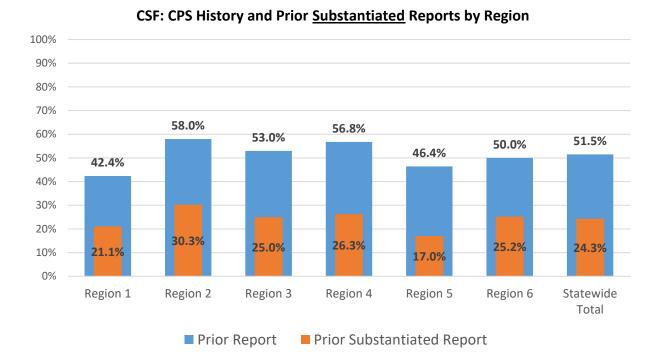
- Risk factors from this analysis that play a substantive role in predicting the outcome of subsequent reports within 12 months include:
 - Higher risk category level
 - Multiple reporters (police, health care and other social services are protective vs. School)
 - Not being in a two-parent family
 - Age of youngest victim is 0-5 years
- An additional analysis controlling for individual risk assessment items found increased risk of subsequent report for:
 - o Prior neglect reports
 - o Multiple Reporters, Family/self-report, Anonymous report (vs. school)
 - \circ $\ \ 2$ + domestic violence incidents in household in past year
 - o Child in family has mental/behavioral health problems
 - Youngest child in family is under age 2
 - Any prior abuse investigations
 - o Primary caregiver has mental health problems
 - Primary caregiver has own child abuse and neglect (CAN) history
 - $\circ -$ 4 or more children involved in CAN incident
 - Not being in a two-parent family
 - Either caregiver has a criminal history

Most FAR families did not have a *substantiated* subsequent report. Using only records assessed using the updated SDM II Risk (N=21,033), there were no statistically significant differences by race after adjusting for significant predictors.

- Risk factors that play a substantive role in predicting the outcome of substantiated subsequent reports include:
 - Higher risk category level (See above note)
 - Not being in a two-parent family
 - Police reporter (vs. School)
 - Region*
 - An additional analysis controlling for individual risk assessment items found increased risk of subsequent report for:
 - Prior neglect reports
 - o 2+ domestic violence incidents in household in past year
 - Youngest child in family is under age 2
 - o Secondary caregiver was maltreated as a child
 - Primary caregiver has mental health problems
 - o 4 or more children involved in CAN incident
 - o Either caregiver has an alcohol problem
 - o Primary caregiver has own CAN history
 - Either caregiver has a criminal history

- Region (6,4,3 < 1 in ascending order)
- Not being in a two-parent family
- **Protective**: Current complaint is for abuse (Exp(B)=0.692)
- **Protective**: Secondary caregiver has any mental health concerns

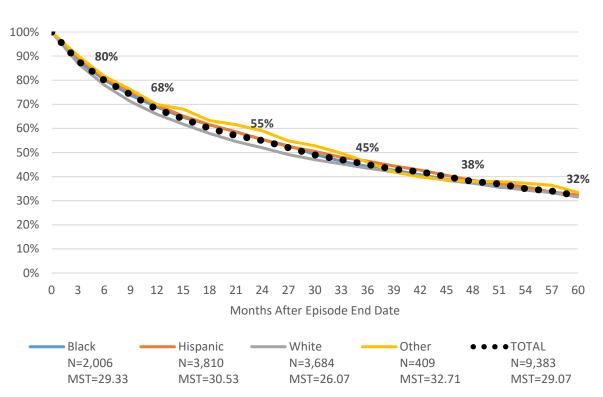
*Additional research is planned to understand regional differences. Given the vast differences in populations and community profiles, region is likely a proxy for factors inherent in the population.



F. (1) Prior Child Protective Services History for CSF Families Active in CY 2021

- Of 1,892 CSF families matched in LINK, 51.5% have had at least one prior CPS report.
- Of the families that had a prior CPS report, the highest proportion occurred more than 12 months before their CSF episode start date.





Cumulative Proportion of CSF Families with No Subsequent Reports at End of Time Interval by Race

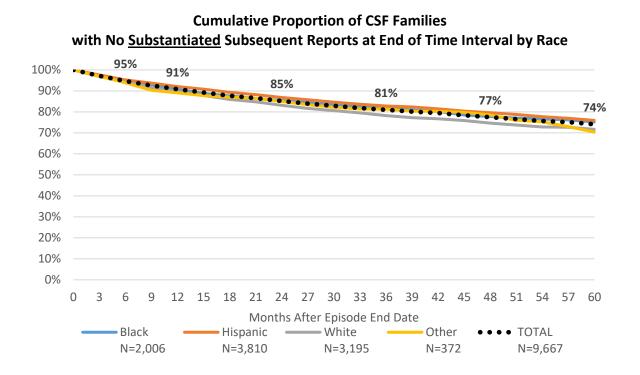
Survival Analyses indicated:

- 80% of CSF families have <u>not</u> received a subsequent report within <u>6 months</u> of their CSF episode end date.
- 68% of CSF families have <u>not</u> received a subsequent report within <u>12 months</u> of their CSF episode end date.
- 55% of CSF families have <u>not</u> received a subsequent report within <u>two years</u> of their CSF episode end date.
- 45% of CSF have <u>not</u> received a subsequent report within <u>three years</u> of their CSF episode end date.
- 38% of CSF have <u>not</u> received a subsequent report within <u>four years</u> of their CSF episode end date.
- 32% of CSF have <u>not</u> received a subsequent report within <u>five years</u> of their CSF episode end date.

There were <u>*no*</u> statistically significant differences in subsequent report rates between races.

(N=9,667, 284 missing race/ethnicity)

F. (3) Analysis of <u>Substantiated</u> Subsequent Reports for CSF Families



Survival Analyses indicated:

- 95% of CSF families have <u>not</u> received substantiated subsequent reports within <u>6 months</u> of their CSF episode end date.
- 91% of CSF families have <u>not</u> received substantiated subsequent reports within <u>12 months</u> of their CSF episode end date.
- 85% of CSF families have <u>not</u> received substantiated subsequent reports within <u>two years</u> of their CSF episode end date.
- 81% of CSF families have <u>not</u> received substantiated subsequent reports within <u>three years</u> of their CSF episode end date.
- 77% of CSF families have <u>not</u> received substantiated subsequent reports within <u>four years</u> of their CSF episode end date.
- 74% of CSF families have <u>not</u> received substantiated subsequent reports within <u>five years</u> of their CSF episode end date.

There were <u>no</u> statistically significant differences in <u>substantiated</u> subsequent report rates between races.

(N=9,667, 284 missing race/ethnicity)

F. (4) Summary of Findings: Subsequent and <u>Substantiated</u> Subsequent Reports (SSR) for CSF Families

CSF families tend to have a more extensive CPS history than FAR families as would be expected due to the nature of the program

Using only records for discharged families assessed using the updated SDM II Risk (N=1,568) and controlling for Region, Reporter, and two parent family, families headed by a Black caregiver were less likely to receive a substantiated report than White-headed families. Other Risk factors from this analysis that play a substantive role in predicting the outcome of subsequent reports within 12 months include:

- Higher risk category level
- Not being in a two-parent family

An additional analysis controlling for individual risk assessment items found that the risk factors that play a substantive role in predicting the outcome of subsequent reports include:

- Household has previously received CPS
- Unemployment at CSF discharge
- Child has positive toxicology screen at birth
- Either caregiver has an alcohol problem
- Child in family has mental/behavioral health problems
- Prior injury to child resulted in CAN

Similarly, most families do not receive a <u>substantiated</u> subsequent report within two years of the end of their CSF episode. Using only records for discharged families assessed using the updated SDM II Risk (N=1,568) and controlling for Region, Reporter, victim age, and two parent family, families headed by a Hispanic caregiver or by a Black caregiver were less likely to receive a SSR than White-headed families.

An additional analysis controlling for individual risk assessment items found that the risk factors that play a substantive role in predicting the outcome of substantiated subsequent reports include:

- Families headed by White vs. Black, Hispanic and Other race caregivers
- Child has positive toxicology screen at birth
- Either caregiver has an alcohol problem
- Either caregiver has a criminal history
- Child in family has a delinquency history
- Age of victim is less than two years old.

*Additional research is planned to understand regional differences. Given the vast differences in populations and community profiles, region is likely a proxy for factors inherent in the population.

G. Services Commonly Provided to Families Referred to CSF

Top 10 Services Received by CSF Families in CY 2020	
Housing	36.8%
Mental Health (child)	32.2%
Food Assistance	30.3%
Energy Assistance/Utilities	27.6%
Mental Health (parent)	27.1%
Advocacy	25.5%
Utilization of natural supports	24.1%
Educational training/services/support	21.4%
Recreation	18.4%
Parenting skills, education, and support	18.3%

H. DCF's Staff Development and Training Practices Relating to Intake

The Academy for Workforce Development is responsible for the provision of in-service training for Differential Response System staff that includes skill-building techniques to enhance their investigative and assessment skills. The Academy offers a ten-day certificate program for newly assigned DRS Unit staff, as well as those staff interested in pursuing positions in a DRS unit / workgroup. Best practice principles are discussed for both Intake and Family Assessment Response, along with strategies for assessing safety, safety planning, critical thinking, involving families in the assessment of their own needs, and numerous other areas. The DRS Training Series was offered and completed on three occasions to date this fiscal year, with 99 unique staff completing it. All classes are taught by academy staff and adjunct trainers who specialize in certain topic areas.

Components of the Series include a strong emphasis on the following:

- DRS Best Practices
- Investigation of child sexual abuse allegations
- Legal Issues
- Health & Wellness
- Drug Endangered Children (DEC) Program & Substance Use
- Human Trafficking
- Intimate Partner Violence

I. Referred Families Who Were Enrolled in the Community Support for Families Program:

2,104 family referrals to CSF in CY 2021

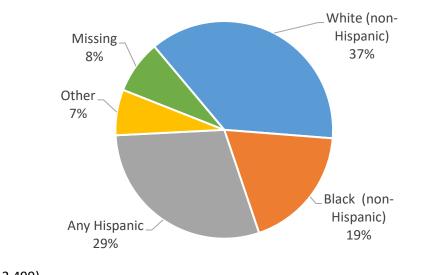
152 (7.2%) were "referral only" (i.e., family opts to not participate – no contact is made with a Community Partner Agency).

158 (7.5%) were open or pending as of 12/31/21

1,794 (85.3%) of the referrals resulted in an episode in 2021

345 (17.2%) of the CSF episodes from the PIE Caregiver file were classified as "evaluation only" (i.e., episode open fewer than 45 days and there was no Family Team Meeting or Plan of Care established with the CSF.)

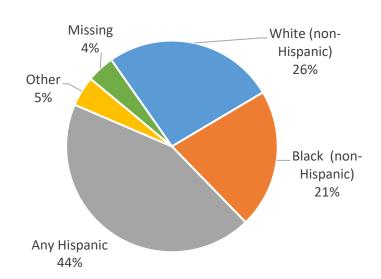
J. Referred Families Who Were Enrolled in the 1) FAR or 2) Community Support for Families Program:



1) FAR: Race/Ethnicity

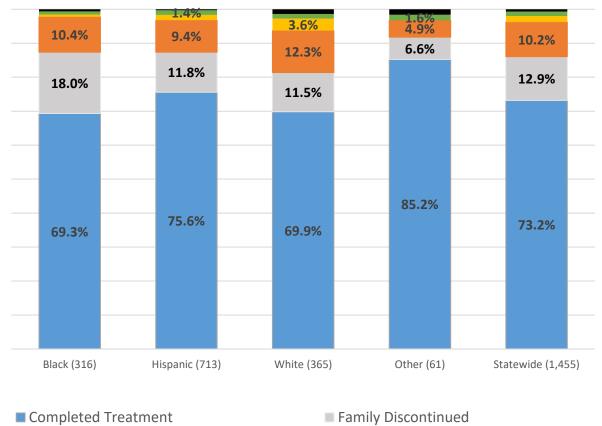
(N=12,499)

2) <u>CSF: Race/Ethnicity</u>



(N=1,981)

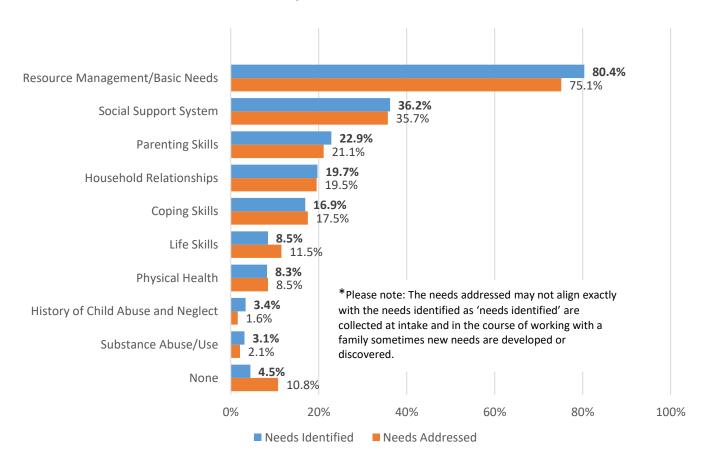




- Agency Discontinued: Administrative
- Client/Family Moved

- New DCF Report Received
- Other

L. Comparison of the Needs Identified and the Needs Addressed for Families Referred to the Community Support for Families Program



CSF: Family Needs Identified and Addressed*