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Report Highlights

Child Welfare: Intake, Alternative Response, and Child Protection Activities

Department of Children and Family Services

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Why We Conducted This Audit

The purpose of this audit was to determine whether the Department of Children and Family Services (DCFS) conducted its intake, alternative response (AR), and child protection investigation (CPI) activities in compliance with its policies. We also assessed the challenges DCFS faces in providing child welfare services and determined what additional tools DCFS management could use to better evaluate the effectiveness of its child welfare activities.

What We Found

From fiscal years 2009 to 2013, DCFS responded to a total of 130,186 cases of child abuse and neglect including 192 child fatalities. Therefore, it is important that DCFS ensures that caseworkers are referring cases appropriately, that cases are investigated timely, and that DCFS uses repeat maltreatment and repeat referrals as methods to measure the effectiveness of child welfare activities. We focused on intake, AR, and CPI activities because these are the first steps in identifying and assessing the risk of harm to children and subsequently preventing repeat cases of abuse and neglect.

Compliance with Policy and Other Requirements: We found that DCFS did not always conduct its child welfare activities in accordance with its policies regarding referrals to programs and timeliness of activities and assessments.

Centralized Intake, implemented in 2011, processes all reports of abuse or neglect statewide and determines whether and how DCFS parish office staff will respond. **Alternative Response (AR)** is a less adversarial response for low risk cases that focuses on family engagement to address weaknesses and mitigate risk of harm. **Child Protection Investigation (CPI)** is the traditional response for medium and high risk cases that involves investigating claims of abuse or neglect, determining validity, and recommending the family for services.

- DCFS intake staff improperly referred 2,602 (2.8%) of 95,178 victims and perpetrators to AR, which is intended for low risk individuals, instead of to CPI. As a result, these individuals may not have received interventions consistent with their risk level and needs.
- DCFS caseworkers also did not properly or timely refer 3,611 (56%) of 6,473 individuals in AR to CPI and 560 (31%) of 1,784 individuals in AR to Family Services. As a result, these cases may not have been investigated or received services as required.
- Although average response time for cases improved significantly from fiscal years 2009 to 2013, it took caseworkers over 60 days to respond to 1,195 (1.34%) of 88,956 cases. In addition, during fiscal year 2013, 4,167 (37%) of 11,134 safety assessments and 9,696 (51%) of 19,042 risk assessments were not conducted within required timeframes.
- DCFS caseworkers lowered the intake response priority for 544 (1.5%) of 36,356 cases, thereby lengthening the timeframe in which they were required to respond to cases. Such overrides by caseworkers are prohibited by DCFS policy.
- Overrides by intake staff, although authorized, have increased by 16% from 2011 to 2013, which indicates a need for additional monitoring to ensure the overrides are in compliance with policy.

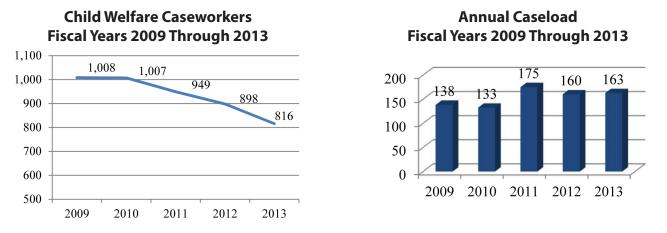
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What We Found (Cont.)

Challenges in Providing Child Welfare Services: Caseworkers and stakeholders cited caseload, turnover, and lack of services as significant challenges that affect DCFS's ability to conduct child welfare activities in accordance with policies and other requirements. For example,

- The number of caseworkers has decreased by 19% since fiscal year 2009.
- Annual caseloads have increased by 18.1% from 138 cases per caseworker in fiscal year 2009 to 163 cases in fiscal year 2013.
- External turnover (i.e., employees leaving the agency) has increased from 15.1% in fiscal year 2009 to 21.3% in fiscal year 2013. Internal turnover (i.e., employees changing positions within the agency) has increased from 17.5% in fiscal year 2009 to 33.8% in fiscal year 2013.



• Lack of available services was one of the most prevalent challenges cited by caseworkers, yet some stakeholders said that caseworkers may not be aware of existing services. According to DCFS, payments for all child welfare services have decreased by 26.7%, from \$86.6 million in fiscal year 2009 to \$63.5 million in fiscal year 2013.

Evaluating the Effectiveness of Child Welfare Activities: DCFS could improve how it evaluates the effectiveness of child welfare activities by using a variety of data analyses to supplement its current evaluation activities. Specifically, DCFS could do the following:

- Use repeat referrals to evaluate intake decisions. During fiscal years 2009 through 2013, 11.8% of cases not accepted for investigation by intake were later accepted, and 51.7% of these resulted in a valid finding.
- Calculate and evaluate repeat maltreatment and referrals over longer time periods and develop acceptable benchmarks. Over a five-year period, from fiscal years 2009 through 2013, Louisiana's rate of repeat maltreatment was 14.4%, and 24.8% had repeat referrals.
- Calculate repeat maltreatment by individual programs to determine the effectiveness of specific child welfare activities, such as AR and CPI, as well as any interventions that individuals may receive. The prevalence of repeat maltreatment ranged from 11.3% of victims in Foster Care to 20.6% of victims and perpetrators in Family Services from fiscal years 2009 through 2013.
- Use risk assessment data to evaluate risk factors that affect repeat maltreatment and repeat referrals. Perpetrators with repeat maltreatment had a higher incidence of risk factors in the areas of substance abuse and mental health.