

# **NATIONAL RESOURCE CENTER FOR CHILD PROTECTIVE SERVICES**

## **Technical Assistance Report**



Prepared for Hawaii Department of Human Services, Child Welfare Services

By: Theresa Costello, NRCCPS

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# Threatened harm case review summary of findings

December 2009

Read 124 cases, randomly selected and representative of all areas of state.

## Case Reviewer

		Frequency	Percent
Valid	Theresa Costello	11	8.9
	Diana English	13	10.5
	Heide Lilo	8	6.5
	Tonia Mahi	9	7.3
	Theresa Minami	3	2.4
	Kathy Swink	10	8.1
	Wendell Omura	13	10.5
	Kathie Reeber	20	16.1
	Cynthia Goss	5	4.0
	David Vukelich	12	9.7
	Florence Calderon	11	8.9
	Cherie Gnehm	9	7.3
	Total	124	100.0

## Section

		Frequency	Percent
Valid	Kauai	12	9.7
	E. Hawaii	15	12.1
	W. Hawaii	9	7.3
	Central	33	26.6
	Diamond Head	21	16.9
	Leeward	24	19.4
	Special Services	10	8.1
	Total	124	100.0

## INTAKE

All cases selected were either identified at intake as threatened abuse, threatened neglect or both. There were no other identified allegations at intake other than threatened harm.

### Harm at Intake v8

		Frequency	Percent
Valid	Threatened Abuse	28	22.6
	Threatened Neglect	23	18.5
	Both	73	58.9
	Total	124	100.0

Based upon the information known at intake, the reviewers agreed with the intake designation of threatened harm in 57% of the sample. Out of those where the reviewers did not agree, there were 29 cases or 55 percent in which the reviewer felt it should have been an allegation of abuse or neglect, not threatened abuse or neglect. 25 % of the cases the reviewers felt should have been screened out. This reflects a great deal of variation in how threatened harm is applied and the need for clear guidelines.

**If reviewer did not agree with the intake designation, what do you think it should have been? V11 N= 53**

		Frequency	Percent
Valid	Abandonment	0	0
	Failure to Thrive	6	11
	Lack of Supervision	6	11
	Medical Neglect	1	2
	Physical Abuse	5	9
	Physical Neglect	6	11
	Psychological Abuse	3	6
	Psychological Neglect	0	0
	Sexual Abuse	2	4
	Threatened Abuse	21	40
	Threatened Neglect	27	51
	Screened Out	13	25

**More than one choice was possible on this item. Percentages are based on 53.**

88 percent of the cases had safety factors identified at intake, which would suggest they are more serious cases. 13 % of the cases involved children placed at intake, all of these were police bookings. Of these placements, 69% were returned within 30 days which prompts the question of whether the placement was necessary. This is not unique to threatened harm cases.

**Safety factors identified at intake v13**

		Frequency	Percent
Valid	Yes	107	88
	No	15	12
	Total	122	100.0

NOTE: 2 cases identified as NA

**Was child placed at intake v18**

		Frequency	Percent
Valid	Yes	16	12.9
	No	108	87.1
	Total	124	100.0

**Was it a police booking v19**

		Frequency	Percent
Valid	Yes	16	12.9
	NA	108	87.1
	Total	124	100.0

### Was child returned within 30 days v20

		Frequency	Percent
Valid	Yes	11	69
	No	5	31
	Total	16	100.0

Excluded all NA = 108

### INVESTIGATION

At investigation, safety factors were identified in only 33% of the cases, which means that more than half of the cases which were identified at intake to have safety factors were not found to have safety factors at investigation.

### Any safety factors checked yes v24

		Frequency	Percent
Valid	Yes	39	33
	No	79	67
	Total	118	100.0

6 cases identified as N/A

There was one particularly concerning practice identified in 14 of the cases in which safety factors were checked yes. These cases had safety factors identified, in-home safety plans developed (either formally completed on the actual form or determined to be arranged by reading case notes), but the cases were closed. This is concerning because it suggests a lack of active safety management which is the responsibility of CWS.

When asked if the allegations of threatened harm met the threshold of safety threats, the reviewers felt they did in 42% of the sample, which suggests that there is a large difference in what intake is identifying as threatened harm (this entire sample) and what the investigation information reveals meets the threshold of threatened harm. The reviewers for the threatened harm review used all the information in the case to judge whether they felt that there were

safety threats, so this is more information than what was available to the intake worker when they assigned the designation of threatened harm.

There is a lot of variation in what gets labeled threatened harm....from serious allegations that constitute actual harm and allegations which constitute safety threats to minor allegations involving no actual harm and no safety threats. One of the most interesting observations made during the case review is that there seems to be a practice of labeling cases as threatened harm instead of labeling them as alleged neglect or alleged abuse. In other words, the presenting information is clearly an allegation of abuse or neglect, but because there is no confirmation that the abuse or neglect occurred (eg. Physical marks or bruises), it is labeled as threatened abuse or threatened neglect, instead of labeling it abuse or neglect and then letting the investigation process determine if that is confirmed or unconfirmed. This is likely contributing to the high use of threatened harm.

**Do allegations of threatened harm constitute safety threats v28**

		Frequency	Percent
Valid	Yes	46	42
	No	63	58
	Total	109	100.0

**OUTCOME OF INVESTIGATION**

Looking at threatened abuse and threatened neglect separately, twice as many of the cases were unconfirmed as were confirmed in the threatened harm case review. Combining the data, 64% of the cases neither perpetrator was confirmed for threatened harm, 36% at least one perpetrator was confirmed for threatened harm.

17% of the cases were opened for ongoing CPS, 61% were closed, 12% referred to VCM, 5% referred to FSS and 5% closed with other referral. 15% resulted in a placement as a result of the investigation. Again, this is evidence of tremendous difference in cases that are categorized as threatened harm.

### Case finding related to threatened abuse for any perpetrator

		Frequency	Percent
Valid	Unconfirmed (N)	100	81
	Confirmed (C)	51	41
	Unsubstantiated (U)	3	2
	Total	154	124

More than one perpetrator in some cases, so percentages higher than 100.

### Case finding related to threatened neglect for any perpetrator

		Frequency	Percent
Valid	Unconfirmed (N)	98	79
	Confirmed (C)	45	36
	Total	143	115

More than one perpetrator in some cases, so percentages higher than 100.

### Outcome of investigation v33

		Frequency	Percent
Valid	Ongoing CPS	22	17.7
	Closed	75	60.5
	Referred to VCM	15	12.1
	Referred to FSS	6	4.8
	Close with other referral	6	4.8

		Frequency	Percent
Valid	Ongoing CPS	22	17.7
	Closed	75	60.5
	Referred to VCM	15	12.1
	Referred to FSS	6	4.8
	Close with other referral	6	4.8
	Total	124	100.0

### Child placement resulted from investigation v34

		Frequency	Percent
Valid	Yes	18	14.5
	No	106	85.5
	Total	124	100.0

### Length of placement v37

		Frequency	Percent
Valid	1-30 days	3	16.6
	31-90 days	3	16.6
	91-180 days	6	33.3
	181 days-12 months	6	33.3
	Total	18	100.0

## DISCUSSION AND RECOMMENDATIONS

The current use of threatened harm throughout the case process reflects tremendous variation. It is used in cases in which actual harm has occurred; in cases in which there is no actual harm, but the parent behaviors or family conditions are such that the children would be considered unsafe; in cases in which there is no harm and no behaviors or conditions which rise to the threshold of making children unsafe. This variation leads to inconsistency in what gets confirmed as threatened abuse or threatened neglect.

A threatened harm definition is needed which clearly distinguishes imminent harm from threatened harm and anchors the determination of what cases rise to the threshold of threatened harm with existing decision making guidelines. The following definitions are recommended:

**“Imminent harm”** means that without intervention, there is a substantial present danger that a child will be harmed or will not be safe.

**“Threatened harm”** means that without intervention, there is an impending substantial risk of harm to a child.

These definitions use the term safe and risk which are already defined, and there are criteria currently in use to guide the determination of safe/unsafe and risk (Safety assessment and Comprehensive Strengths and Risk Assessment).

Unsafe is defined as: threats of danger exist within the family and children are vulnerable to such threats and parents have insufficient protective capacities to manage or control threats.

The terms present danger and impending danger would also need to be defined as follows:

***Present Danger*** : An immediate, significant and clearly observable family condition occurring in the present tense, endangering or threatening to endanger a child and therefore requiring prompt CPS response.

***Impending Danger***: A family circumstance where a child is living in a state of danger or a position of continual danger. Danger may not exist at a particular moment or be an immediate concern (like present danger), but a danger exists.

### Proposed Practice Supports:

A set of guidelines will be developed based on the above definitions and reviewing the existing safety factors to identify and understand which represent present dangers, which impending dangers and which represent both. These

guidelines will be presented to staff in a training environment with case examples to illustrate the points.

The safety assessment tool has not been revised for a number of years and needs to be updated to include an assessment of protective capacities and to add to the list of times safety assessments are completed in order to reflect life-of-the case safety management responsibilities (intake, first contact, conclusion of investigation, removal, unsupervised visitation, reunification, closure).

The revisions to the safety assessment tool will be accompanied by a set of decision making guides for workers which provide direction on information to be collected to make quality safety decisions; definitions of all concepts; descriptions and examples of all safety factors; and descriptions of all life-of-the case safety management responsibilities.

Quality assurance methods will also be developed and put in place to assure that consistent use of the threatened harm definition is being applied at intake and investigation as well as to assure that the revised safety assessment practice tools are being applied throughout the life of the case.