

Differential Response in Child Protection: Selecting a Pathway

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Each local jurisdiction in the United States with responsibility for responding to community concerns regarding the safety and well-being of children is provided statutory authority to guide the initial agency response decision. Of crucial importance is the question about whether the report of possible child maltreatment includes sufficient information to activate an investigative response by public child protection and/or local law enforcement. On a daily basis, social workers and law enforcement officers screen community concerns and decide which situations warrant an investigative response. Historically, the critical agency decision was whether to intervene. A decision to intercede in family life results in a child protection investigation guided by statute and driven by a formal forensic procedure. A differential response offers agencies other options for intervention and assessment when concerns regarding children come to their attention via the community.

A county-wide differential response in child protection practice was initiated in Olmsted County Minnesota in 1999. This initiative authorized the agency to provide a

family assessment process for some accepted reports of child maltreatment. In this process, the agency is required to make a finding regarding the need for service and to set aside the requirement to make a finding of whether child maltreatment has occurred. A family assessment process replaces a traditional forensic approach for families with reports that present as low or moderate risk of child maltreatment.

Olmsted County Child & Family Services has used a formal group process to facilitate the differential response pathway selection since its inception in 1999. This article describes this promising practice approach.

Organizational context

The implementation of a differential response approach both challenges and charges the child protection agency with choices for responding to community concerns about children's safety and well-being. Agencies undertaking such changes are likely to discover inadequacies in current organizational designs when attempting to incorporate the changing practice patterns described in this article. In particular, we found that crucial decisions to accept and direct the outcome of reports of concern from the community could no longer be the sole responsibility of individuals making independent decisions. Olmsted County moved to a group decision-making process to decide whether a family assessment or an investigative response is warranted.

Specifically, we found that the statutory authority to intervene in family life when there



were accepted reports of child maltreatment was being carried out in a linear design that was unnecessarily limiting the options early in the process, beginning with intake screening through investigation and assignment for ongoing services. Despite the fact that intake and assessment activities were generally monitored and reviewed by a supervisor for compliance with statute and supported by social work practice, access to ongoing services was typically limited to families with a finding of child maltreatment. The level of risk or concern regarding possible future child maltreatment may further restrict the offer of public agency services.

The “Critical Pathways for Child Protection Services” is the organizational design in operation in Olmsted County since 1999 that provides a choice in response to community concern about a child’s safety or well-being. Olmsted County uses a team approach to review, evaluate, and direct (RED) cases accepted through intake screening for consideration as a valid report of child maltreatment requiring an agency response. (see page 62, “Integrating Domestic Violence Intervention into Child Welfare Practice”, for a description of this design.)

Screening community reports of concern

All reports detailing community concern about children are screened by experienced social workers. An initial decision is made by intake social workers regarding whether the presenting information meets the statutory threshold for public intervention into private family life. Reports alleging child maltreatment are brought to the RED Team for disposition. Reports of serious harm or imminent danger to a child require immediate response by agency intake or assessment social workers and are then brought to the RED Team for review.

Community concerns that are not accepted for child protection assessment may

be referred to community-based services. There are public and private services available within the community that may be appropriate resources for a family interested in receiving services. Children’s mental health services, teen parent program, crisis nursery, public health services, public assistance, and a variety of adult educational and counseling options represent more formal resources available to families on a voluntary basis. The intake social worker may explore informal extended family or community resources a family can access to meet needs.

Critical pathways in child protection

“Critical pathways” is an umbrella term that refers to three agency response options for intervention with families when it is determined that a report of alleged child maltreatment meets the requirements for agency intervention. These include a traditional child protection response, a domestic violence-specific response and an alternative response, all of which are available under the umbrella of differential response to accepted reports of child maltreatment. A brief elaboration of each follows.

The **traditional child protection** response is required by legislation for all reports of child sexual abuse, licensed facility reports, and egregious and serious harm to a child. Each year approximately 38% of reports in Olmsted County receive this type of forensic child protection investigation. Reports that may result in criminal charges require that investigations be done in cooperation and coordination with law enforcement. Currently, after a traditional child protection assessment process, the agency must make a formal finding both as to whether maltreatment occurred, and whether child protective services are needed.

The **domestic violence-specific** response is a differential option for families when there is



a presenting report of child exposure to domestic violence. This particular response design is aligned with research on the overlap between domestic violence and child maltreatment and is explored further on page 62. This is a differential response option that provides an assessment that may result in the need for, and provision of, social services without a formal finding of child maltreatment. Approximately 90% of domestic violence-related reports accepted between 1999 and 2004 for assessment in Olmsted County were referred to the domestic violence service area for intervention. This percentage represents 21% of all child protection reports accepted for assessment or investigation in Olmsted County.

The **alternative** response is a differential option for families that offers a family assessment process instead of a traditional forensic investigation. A finding of maltreatment is not sought by the agency. When the family assessment identifies a need affecting the safety, stability, or well-being of the children, the family is offered assistance. Approximately 41% of all reports received regarding child maltreatment in Olmsted County are referred to the alternative response pathway each year. Alternative response and domestic violence-specific numbers combined in Olmsted County accounted for approximately 62% of families receiving child protection assessment services via a differential response between 1999 and 2004.

When a report is made concerning the well-being of a child under age five, an agency contact is initiated regardless of whether the report meets the threshold for formal

acceptance. Without assignment to either traditional assessment or alternative response, the child welfare response pathway represents another option that provides the family with a social work contact to further query any desired assistance with presenting concerns/needs, and directs attention to early intervention efforts. This new response became available in 2005, and we expect to offer assistance to as many as 200 families each year.

It was the creation of choices in child protection intervention that led to the need for the development and implementation of the RED Team. It became clear that the child protective service system required a reasonably predictable and consistent way to decide which pathway to employ with which set of circumstances.

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RED Team

The RED Team was established in Olmsted County in 1999 to provide both structure and process in review of alleged reports of child maltreatment, evaluation of the available information, and direction regarding the agency response. Figure 1 describes the distribution of accepted reports in 2004.

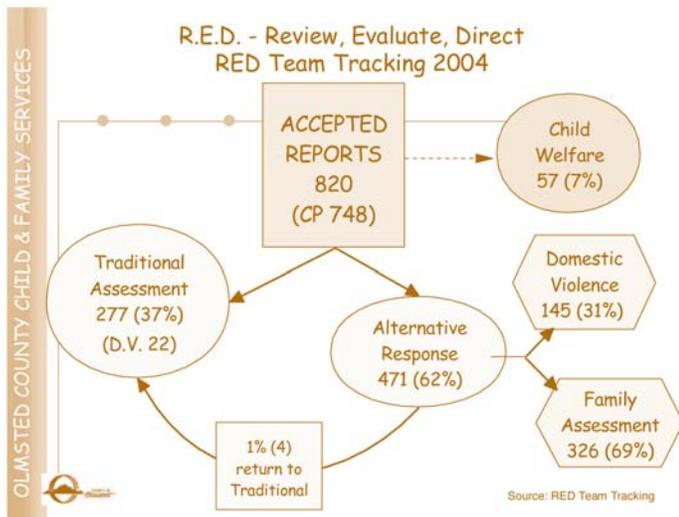
RED team responsibilities and selection guidance

The RED Team is charged with reviewing available information and answering the following questions:

1. Does the report of child maltreatment meet the statutory threshold for intervention?
2. If the report does not meet the threshold for child protection intervention, should it be



Figure 1. RED Team Tracking



family assessment response to a traditional child protection investigation. Since 1999, in Olmsted County, the number of annual reports returned for an initial traditional child protection investigation has remained at or below 2%. We believe the low rate of change from family assessment to traditional investigation means the RED Team is efficient in sorting reports and selecting the appropriate response.

The Minnesota Department of Human Services and the state legislature have provided a set of requirements and guidelines to

- referred for child welfare and/or community services?
- Does an accepted report require a traditional forensic child protection investigation?
 - Does the report present as exposure to domestic violence, and should it be referred for domestic violence-specific intervention?
 - Does the report present as a child concern that can be addressed through an alternative response approach?

The use of a group process for decision making is a key principle underlying the practice; it supports the view that it is an **agency decision**, informed by the available information. An individual social worker is not expected to carry the weight of an intervention decision alone. While we acknowledge that individual social workers may make sound decisions regarding specific family situations, the group decision-making process, as described, builds agency capacity to make more consistent and reliable decisions over time. In 2004, four reports (1%), given additional information, were re-routed from a

influence local agency selection concerning responses to child maltreatment (MDHS Bulletin #03-68-02). Figures 2 and 3 provide examples of possible report/pathway distribution.

RED team membership, roles, and responsibilities

The RED Team membership includes wide representation from within the child protection services area. It is seen as essential for social workers involved in each of the available critical pathways of child protection intake, assessment, investigation, and ongoing intervention to be included. The social workers agree to participate on the team for at least six months. The time commitment and regular membership is seen as essential to the development and establishment of group norms and culture.

This is often one of the first opportunities the agency has to begin a process of making social work practice and the work of the agency internally transparent, which we believe supports positive internal working relationships. The decision making at each



Figure 2. Differential Response

Reports thought to be suitable for a differential response are characterized by family situations with low or moderate risk of child abuse or neglect, or when a lone concern suggests a serious threat of abuse or continued neglect unless decisive intervention is undertaken. These reports more often involve families for which law enforcement action or child removal are unlikely to be necessary to ensure child safety. Differential response reports typically include:

- Low or moderate risk of physical abuse
- Children who are without basic necessities such as food, shelter, or clothing
- Health and medical needs that, if left unattended, can result in harm
- Concerning or damaging adult-child relationships
- The absence of supervision or proper care
- Educational neglect

Figure 3. Traditional Child Protection

Traditional child protection investigations are conducted when confirmed acts of harm represent criminal violations and/or when the action or inaction of the parent may warrant criminal charges that, if confirmed, could lead to removal of the child or alleged perpetrator from the home. Traditional child protection investigations include reports of or concerning:

- Serious physical, medical, or emotional abuse and serious neglect where a referral for law enforcement involvement is indicated
- Child sexual abuse
- Children in licensed child care or foster care
- A serious violation of the criminal statutes
- Specific acts of the parent or caretaker that have a high probability of leading to court-ordered removal of the child or caregiver from the home, including chronic neglect

juncture in the child protection process is subject to review by others in the agency. If intake decisions are not understood by those responsible for the assessment or investigations, tensions can exist from second guessing the intentions of others. The inclusion of social workers with different roles and responsibilities in a group process allows for norms and values to be set by supervisors and reinforced through the ongoing work of the team.

Representatives from other organizational service areas (e.g. children’s mental health, adolescent behavioral health, child foster care) may be participants in the RED Team process at the request of their supervisor. The inclusion of social workers or supervisors from non-child protection service areas of the agency provides them a view of how decisions are reached. We expect that this reduces any tensions between units on how reports are received and reviewed and how decisions are

made. The group process is seen as an antidote to these tensions.

Membership also includes new social workers who regularly observe the RED Team as part of their orientation to child protective services and the decision-making process that has been developed. Listening to the variability of community reports reflecting concern about child safety, stability, and well-being provides a new social worker with a forum for hearing a discussion of a wide range of concerns and worries about children. As the team collects, organizes, and analyzes the available information to make a decision on each report, the new social worker gains an appreciation for the range of concerns and responses available. In addition, the social worker gains an understanding of the agency’s work and the options available through differential response. This experience is intended to illuminate the need for more than one way of approaching families and children.



The social workers assigned to intake are regular members of the team and are responsible for gathering and presenting the known information on the reports of alleged maltreatment. In addition to the information contained in the initial report, along with further inquiry when possible, the intake social worker checks an agency information system to determine whether the family has current or past involvement with the agency. The intake social worker is also able to obtain additional information from other sources such as law enforcement to gain as much information as possible in a short period of time to best inform the decision-making process. If the report concerns a family currently open for services, the ongoing social worker is contacted and asked to attend the RED Team meeting. In addition to the specifics of a child maltreatment report, the intake social worker asks the reporter for any information that identifies exceptions to the report. An understanding of known family assets or resources promotes a more balanced approach to the family. Just as we seek information regarding danger and harm, we also begin seeking signs of safety. This begins the process of assessment or investigation and sets the stage for the assessment social worker to seek the family view as part of a comprehensive assessment or investigation. Therefore, the intake social worker has the responsibility to begin the collection of information and build relationships necessary to initiate a balanced assessment of the risks to the child or children.

The RED Team is chaired by a child protection supervisor or a senior child protection social worker if a supervisor is not available. The chair is responsible for

facilitating the presentation of information and for ensuring a decision is reached on the disposition of the report.

The chair retains responsibility for managing the process during the work phase and for ensuring that the disposition meets legal guidelines. The chair is additionally responsible for engaging the team in a balanced presentation of information and for holding to a line of inquiry that includes family strengths and unearths exceptions, if any, to the reported maltreatment. Reports of child maltreatment typically exact a toll on those who listen to the detailed accounts of what parents or caregivers may or may not

have done. Reports are often graphic, one-sided, and fraught with speculation. In addition, personal values can cloud the perspective of the listener, who often receives imbalanced information and may have heard various accounts presented with great passion. Add to that the possibility that the worker

may have an as yet undeveloped individual ability to suspend judgment in certain kinds of situations or under pressure, and the case for making these critical decisions in teams is clear.

In the selection of a pathway or response to an accepted report of child maltreatment, it is critical that the agency suspend final judgment and remain open to a range of possibilities until a more comprehensive assessment can be completed with child and parent or caregiver participation. The RED Team typically has presenting information from one source and rarely has the family perspective. This requires considerable support for workers to assist them in managing great uncertainty while allowing for diverse points of view. In her work reviewing

An understanding of known family assets or resources promotes a more balanced approach to the family.



child mortality findings, Munro (2002) made the following comment:

“The single most important factor in minimizing error is to admit that you may be wrong.” (p. 141).

The supervisor and the social workers must forge a set of group norms that establishes a working culture in the RED Team and that is based on making critical decisions with the most comprehensive information available. This requires the team members to be determined to seek information at moments when it may seem unavailable or when parts of the information may seem at odds with other parts. “Storytelling,” speculation, and rescue fantasies are common deterrents to a constructive process. When we are faced with important decisions in a context of uncertainty, we must guard against speculation about meaning, or cause and effect, pretending we can ascribe meaning to the unknown. When we are worried about the safety of children, we guard against any tendency to move into a child-saving mode fueled by rescue fantasies based on little factual information. Until there is actual contact with the children and families, we do not know what actual safety concerns require intervention. Gathering available facts regarding the alleged child abuse or neglect concerns, reaching for exceptions to those reported concerns, seeking family strengths, and suspending personal judgment are a few of the essential tasks that underwrite sound initial decision making.

RED Team process

The RED Team meets each workday from 8:15 a.m. until all the day’s reports have been reviewed and disposition selected for each. Typically the team’s work is completed by 9 a.m. A set meeting space is identified and

available, which is an indication of the agency’s support for this activity.

The number and nature of reports to be presented and reviewed determine the RED Team meeting agenda. As in any child protection agency, the amount of known information and its reliability is highly variable at this point in the process. If the report involves a family currently receiving services, the assigned social worker or supervisor is notified so they can participate in the decision-making process.

Reports of imminent harm to children receive an immediate response by social workers and are later reviewed by the RED Team. The RED Team process does not delay or interfere with the immediate delivery of social work interventions in high-risk child maltreatment.

The consultation framework

A specified consultation framework (Figure 4) provides a method for organizing and analyzing incoming information regarding a report of child abuse or neglect. The chair facilitates the process of gathering and sorting the available information, reaching a clear statement of the concern(s) regarding the children. The intake social worker presents the most objective current report possible and indicates any known history of agency involvement and/or pattern of abuse. Given that the best predictor of future child maltreatment is past child maltreatment, this information is meaningful in deciding the disposition (CRC, 2004).

The information is presented on a whiteboard and sorted into categories. A preliminary **genogram** (diagram using symbols) is drawn on the board to identify known family members and their connection to the child(ren) of concern. The categories are structured as follows:

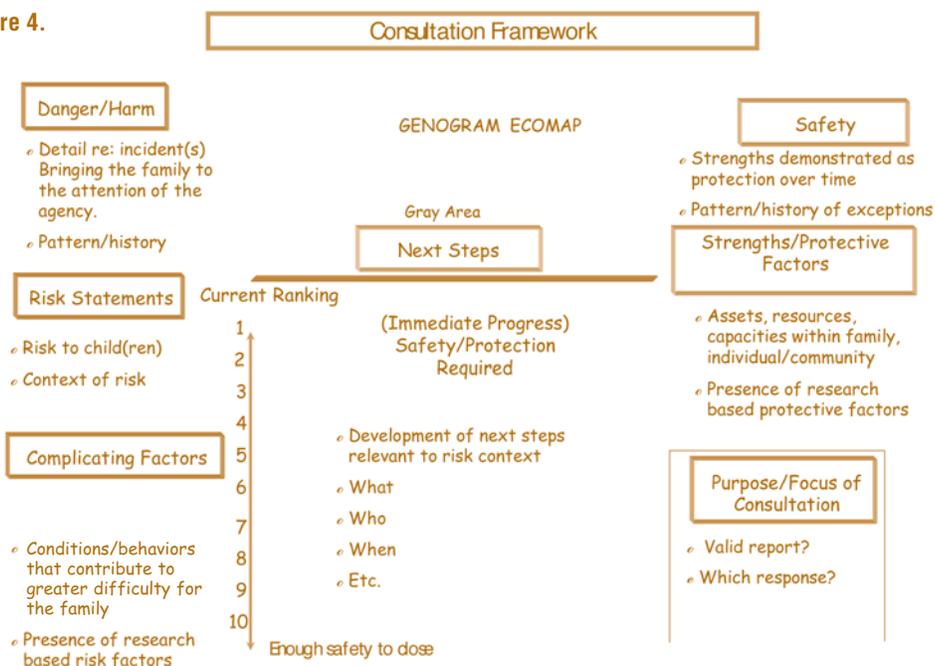


Protecting Children

- **Danger/harm:** The detail of the incident(s) bringing the family to the agency’s attention and any known pattern and history of past social service involvement/child harm.
- **Complicating factors:** Conditions/behaviors that contribute to greater difficulty for the family.
- **Strengths/protective factors:** The assets, resources, and capacities within the family, individuals, and community.
- **Safety:** Any existing strengths demonstrated as protection over time and any pattern/history of exceptions to the abuse/neglect.
- **Risk statement(s):** The preliminary articulation of the perceived risk to the child(ren) and the context in which the risk is most concerning, reflecting any statutory basis/focus on which the report is accepted for further assessment.
- **Gray area:** This space is reserved for incoming information that requires further query to understand its meaning.
- **Next steps:** Immediate actions regarding disposition.

Initial decision making is enhanced when the agency has information about family assets, resources, and capacities. It is expected that when a family is known to the agency, more of this information is likely to be available. With a new report of maltreatment, an intake social worker is challenged to ask additional questions to elicit expanded information from the reporter. The quality of information obtained from the reporter is variable. Reporters are usually prepared to provide information specific to their concern or worry about the child. Once the concern is understood, the social worker asks the reporter for any family strengths and/or

Figure 4.



(Lohrbach, 2000)

Partnering: Action w/ family in their position: willingness, confidence, capacity



exceptions to the concerns. The initial intake effort is focused on gaining information about the alleged danger and harm, as well as any beginning appreciation of protective factors or signs of safety.

The “**Next steps**” represents the category that captures the decisions regarding acceptance of the report for assessment and determined pathway.

In the event that the RED Team is unable to reach a decision regarding the acceptance of a report, the supervisor may ask the intake social worker to gather more specific information and return to a subsequent RED Team meeting. This may include an intake social worker making a home visit and/or calling a family if there is a presenting concern that may be reasonably addressed through referral to a community service. If the team decision-making process falters or remains conflicted, the decision is deferred to the facilitating supervisor for initial judgment regarding acceptance and selection of a pathway.

A RED Team member copies the framework information from the whiteboard, and this summary becomes part of the agency record documenting the acceptance and pathway decisions. Further discussion of the consultation framework can be found in Lohrbach and Sawyer, 2004.

RED Team data and information

The RED Team was established by Olmsted County Child and Family Services to provide a validating and sorting function for the child protection system in implementing a differential response to reports of concern about the safety and well-being of children. It is the gate through which community reports are organized and responded to within the legal framework set by state and federal law. The purpose of the RED Team is to impose a group decision-making process into the

crucial initial decisions that involve allegations of abuse or neglect and bring discipline and method to the work of the agency.

The RED Team has been in operation since 1999. Each year the agency receives 1,800 to 2,400 calls or contacts regarding concerns about children. The team annually reviews approximately 750 to 900 reports and accepts more than 90% of these for an agency child protection response. Less than 2% of these reports move from a differential response to traditional child protection due to an inability to engage the family. This low return rate affirms that the team’s decisions are sound.

Over six years, 33% to 41% of reports in Olmsted County have received a traditional child protection investigation. Approximately 50% of the 241 to 320 accepted reports each year result in a finding of child maltreatment, and as many as 120 to 160 families are opened for ongoing child protection services (Olmsted County Report, 2004). The children and families receiving services in the child protection area represent the highest risk or concern for child safety, well-being, and permanency.

Over six years, 59% to 67% of reports have received a differential response assessment that does not require a finding of child maltreatment. A finding of a need for services results in approximately 50% of the 418 to 521 families accepting services over the six-year period.

In our experience, the number of children in placement outside the family home is very low in the family assessment response. The presenting concern for placement is usually related to a child in need of special care and treatment due to a serious emotional disturbance rather than a child safety concern due to maltreatment.

Summary

The RED Team is an effective strategy for



reviewing initial child protection reports, evaluating their validity, and directing these reports to an appropriate child protection assessment or investigative pathway.

The RED Team offers a structured group process that launches the beginning of a balanced assessment of a child maltreatment report by a parent or other caregiver. The process signals the agency belief that this decision is important and requires the consistent allocation of resources to facilitate the best decision possible. The process further establishes that the decision to intervene in family life is an agency decision, informed by the work of the social workers who are the agents of the organization. The RED Team reflects a well-developed group decision approach that can be expected to yield better decisions than an individual, and that a structured group process that requires greater inclusion of strengths/capacities alongside risk/harm produces a more informed decision.

Acknowledgments

The RED Team has developed and constructively evolved over time due to the commitment and experience of numerous social workers and child protection supervisors at Olmsted County Child and Family Services. Julie Saugen and Pat Scott, child protection supervisors, were instrumental in the implementation of the RED Team. The authors further acknowledge the review and contributions specific to the writing of this article. Thank you to Linda Billman, Mary Fay, Tom Olson, Kory Schmitt, Julie Saugen, and Robyn Wood. A special thank you to Dr. Gale Burford, University of Vermont, for his insights, observations, and support.

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