

## Welcome to SDM News

**W**elcome to the first Structured Decision Making (SDM) Newsletter. At a November 1998 gathering of current SDM jurisdictions in Madison, the Children's Research Center (CRC), a division of the National Council on Crime and Delinquency (NCCD), committed to organizing the means for regular dissemination of ideas to jurisdictions who have implemented SDM.

One method will be to hold similar meetings in the future. The first will be this summer in Detroit, Michigan on July 15, 1999 (see below for more details). Another way to share issues will be through this newsletter which will be published quarterly and sent to all states currently implementing or using SDM.

In the newsletter, you will find information on successes and problems in the implementation of the SDM case management system in various jurisdictions, summaries of recent research, and other practical issues. This first issue was prepared by CRC staff but future editions can also include pieces written by state staff. To make this a successful and useful venture, we are asking you, the reader, to send suggestions and comments on things you would like in a newsletter on SDM. 🍷

## Georgia CPS Workload Study

**I**n February 1999, CRC Staff completed a CPS workload study in Georgia that showed a considerable discrepancy between the current staffing level and that which would be required to serve families and children in accordance with the agency's best practice standards. DFACS administrators are planning to use study results to support a request to the legislature for additional

staffing and to help determine how staff should be allocated across individual counties.

The impetus for conducting the workload study was Georgia's 1997 implementation of the CRC Structured Decision Making model. Particularly crucial was the fact that SDM placed new workload demands on CPS staff. Previously, the minimum service standards for *all* cases required one face-to-face contact per month. The new SDM standards doubled these requirements for moderate risk cases and tripled them for high risk cases. As a result, Georgia administrators needed to determine whether the available staff resources were sufficient to fully implement the model and to provide intended levels of service for all families.

The study was conducted during a two-month period in the Fall of 1998. During this period, 275 CPS staff recorded all the time they spent working on a random sample of intakes, investigations and ongoing cases. Approximately 2,300 cases were studied. A key objective was to determine the amount of *time required per month to meet or exceed the DFACS-specified service standards for each type of case*. These monthly "workload values" for selected case types are shown in Figure 1.

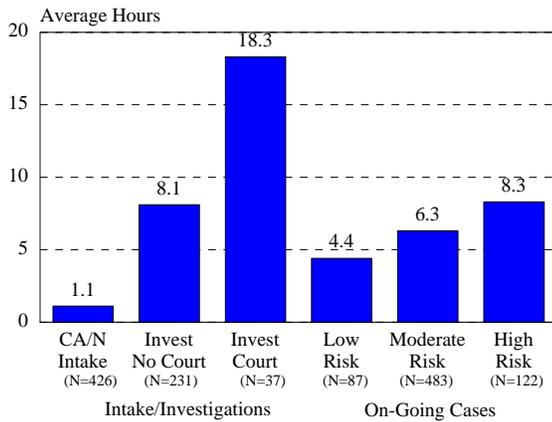
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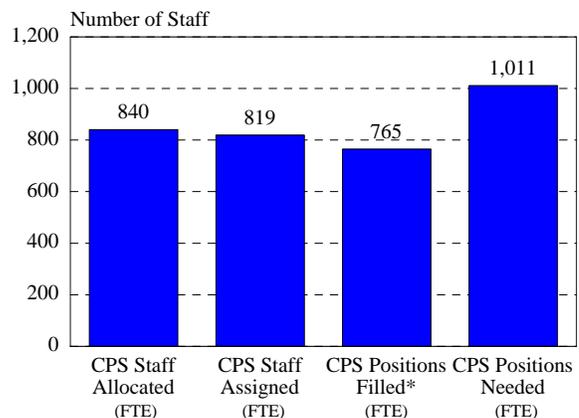
**Figure 1**  
**Georgia CPS Workload Study**  
**Workload Values for Key Case Types**  
 (Cases Meeting Standards)



Once the workload values for various case types were determined, it was possible to estimate the agency’s total monthly workload demand. In Georgia, the monthly demand (i.e., the time required to meet relevant standards for *all* cases) was shown to be just less than 134,000 hours per month.<sup>1</sup> Since each staff person has approximately 129 hours available each month<sup>2</sup> to help meet this demand, total staffing needs were estimated at 1,033 FTEs (133,816 workload hours divided by 129.2 hours available per staff person). This figure is 193 FTEs more than the 840 CPS positions *allocated* by the Legislature, 214 FTEs more than the 819 staff currently *assigned* by the counties to CPS functions, and 268 FTEs more than the 765 CPS positions actually *filled*. The Georgia workload and staffing summary is shown graphically in Figure 2.

If the Division is able to obtain the additional staff needed, it will be much better positioned to provide effective protection for Georgia’s children. It will be critical for funders to recognize that **there is a direct link between service standards, workload and the safety of children**. Requiring adherence to best practice service standards as specified by Georgia’s SDM model clearly will have an impact on DFACS workload. However, as demonstrated in recent evaluations of SDM systems in Michigan and Wisconsin (Baird et. al, 1995; Wagner, 1998), this *increased staff attention is also likely to result in fewer subsequent abuse/neglect referrals, fewer subsequent substantiations and fewer subsequent child injuries*.

**Figure 2**  
**Georgia CPS Workload Study**  
**Current vs. Workload-Indicated Staffing Levels**



\*Includes all staff in pre-service training.

For more information contact Dennis Wagner, CRC Director of Research, at 608-831-8882.

<sup>1</sup> Determining monthly workload demand requires multiplying the workload value for each case type by the average number of cases of that type on the statewide caseload. For example, Georgia staff conduct an average of 3,549 investigations (non court-involved) each month. Since each requires an average of 8.1 hours, this case type generates 28,747 workload hours per month. The sum across all case types gives the total workload demand.

<sup>2</sup> Time available is based on 173.3 salaried hours per month, minus vacation, sick and personal leave, holidays, break time, training and purely administrative activity.

# Actuarial Systems Reliable, Accurate

The Children's Research Center has recently completed a three-year Child Protective Services risk assessment comparison project funded by the national Office on Child Abuse and Neglect (OCAN). The primary objectives of this study were to determine the relative reliability and validity of three different approaches to risk assessment. Two of the risk systems included in the study were consensus based, the Washington Risk Assessment Matrix and the California Family Assessment Factor Analysis, while the third was an actuarial instrument constructed by CRC in 1995 for use in the state of Michigan.

This study is the first to directly compare, on a national level, the efficacy of actuarial-based systems with consensus-based models currently utilized in CPS, and adds to the cadre of research comparing actuarial assessment systems with clinical decision making (see Meehl, 1954; Dawes et.al., 1989; Grove and Meehl, 1996). Like prior studies, this one demonstrates the superiority of the actuarial approach. A summary of findings is presented below.

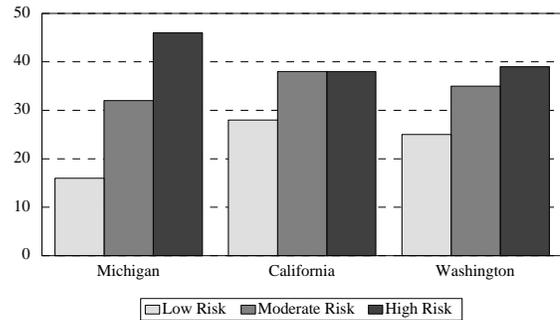
Valid risk instruments classify families into groups with significantly different maltreatment reoccurrence rates. Several measures of system validity were applied to each of the three risk assessment systems and Michigan consistently outperformed the other two risk assessment systems. Two measures used in this study are described below.

The first measure used to assess validity was the degree to which each system was able to classify families into risk groups which had different rates of maltreatment reoccurrence in the 18-month follow-up. When the outcome measure was a subsequent investigation of maltreatment, the Michigan system effectively identified base rates of 16% for low risk families to 46% for families at high risk of harming their children. The California system rates ranged from 28% to 38% with no distinction between moderate and high risk families while the Washington system base rates were spread from 25%, low, to 39% of families with a follow up investigation. Similar results were achieved when the outcome measure was substantiation or placement (the rate at which children were removed from their homes during the

follow up period.) Follow up base rates by classification for each system are presented below.

Another measure used to assess validity was the

Follow-Up Reoccurrence Rates by Risk Classification



Dispersion Index for Risk (DIFR), a statistic that considers different base rates between groups as well as the actual number of cases within each group, to arrive at a measure of a classification system's utility. The more effective the risk assessment system, the higher the DIFR. DIFR values reached when the outcome measure is a new substantiated incident of maltreatment were: California, .117; Washington, .156; and Michigan, .522.

The implications of this study should be viewed in the context of the current state of child protective services. CPS in the United States has been the subject of considerable criticism and increased scrutiny, as evidenced by lawsuits in more than 30 states that primarily stem from children in out of home care versus family preservation efforts. Debate within the system coupled by headline grabbing child tragedies has eclipsed the real issue facing CPS: **decision making**. Debate over which programs or strategies work and which do not will be fruitless until valid, reliable decision support systems are fully utilized. Clearly, the actuarial-based system employed by the state of Michigan is a step toward achieving this goal. (A comprehensive description of the study and study results are presented in a report to OCAN titled *Reliability and Validity of Risk Assessment in Child Protective Services: A Comparison of Three Systems*. Please contact CRC to request a copy.)

## Michigan and CRC Co-Sponsor Workshop

**M**ichigan's Family Independence Agency (FIA) and the Children's Research Center (CRC), a division of the National Council on Crime and Delinquency (NCCD), are cosponsoring a July 13-14, 1999, workshop entitled "Innovative Directions in Child Protection." This workshop, to be hosted at the Atheneum Hotel in Detroit, will feature Michigan's new five category child protective services (CPS) legislation, as well as CRC's research-based Structured Decision Making (SDM) case management system.

Michigan's FIA Director Douglas Howard will make opening remarks recognizing recent changes in the Michigan CPS law that aim to strengthen community partnerships in child protection. These changes utilize CRC's risk-based case management system to focus CPS efforts on cases with highest risk of future child maltreatment, while enlisting greater involvement from community-based services to focus on cases with lower risk.

Special features of this multi day workshop will include highlighting innovative CPS developments in Michigan with concurrent workshops on:

- a. Kent County's Perspective 21 Program which represents an innovative implementation of many of the features in Michigan's new law;
- b. Community partnership strategies to strengthen child protection; and
- c. A review of Michigan's new five category law and its impact on Michigan's CPS program.

CRC's research-based SDM case management model will also be highlighted and several jurisdictions from around the country will outline and discuss their SDM implementation experiences and outcomes. Specific information and activities will be featured for jurisdictions that have implemented or are considering implementing SDM.

Individuals interested in strengthening child protection programming are invited to come, learn and enjoy this "Innovative Directions in Child Welfare" workshop. Call CRC at 608-831-1180 for more information. 🐾

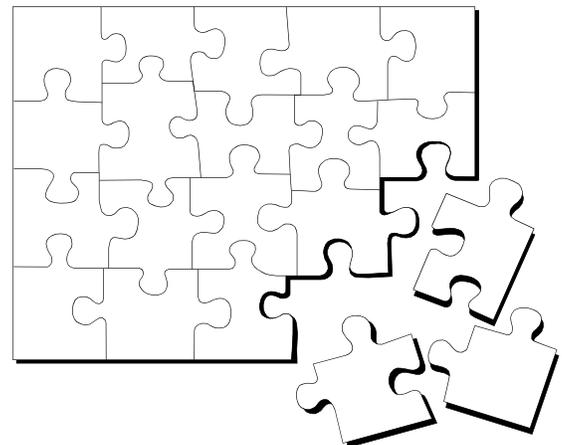
## First in Ohio to Implement SDM

**I**n May 1999, CRC/NCCD began working with Cuyahoga County (Cleveland), Ohio, to implement SDM for CPS in the Department of Children and Family Services. Cuyahoga is the largest county in Ohio and DCFS will be the first child welfare agency in that state to implement SDM.

CRC will be working with a steering committee of administrators, supervisors, and line staff to customize SDM for the agency. Decision tools will be developed for intake screening, safety assessment, risk and needs assessment, and reassessment. Differential service levels and service standards will also be established.

Once the system is designed, CRC will train approximately 1,000 staff in the model. The target date for implementation is November 1, 1999. Cuyahoga County has decided to adopt the Michigan risk assessment tool for the first year of implementation. CRC will validate the scale on the Cuyahoga County client population in the second year. A formal process evaluation will also be conducted as part of year two activities.

Marsha Rose Wickliffe, Deputy Director, is coordinating the design and implementation for DCFS. Please contact Rick Wiebush, CRC Project Manager, at 410-788-1241 for more information. 🐾



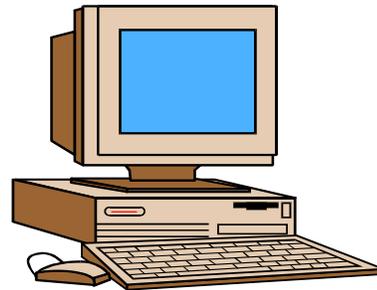
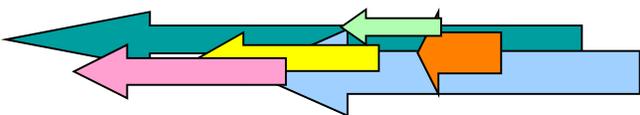
## Dane County, Wisconsin, Implements SDM

**D**ane County (Madison), Wisconsin, implemented structured decision making policies and protocols in March 1999 to aid child protective service workers in making decisions at critical points in serving families in need of CPS intervention. The Dane County SDM system includes four components:

1. A priority response decision tree to aid workers in establishing the time within which a CPS investigation must be initiated;
2. Risk assessment, to assess future risk of maltreatment;
3. Family strengths and needs assessment to evaluate presenting family strengths and identify primary need areas;
4. Reunification assessment to efficiently and effectively achieve permanency for children removed from their homes; and
5. Reassessment tools to monitor case activity and family progress toward meeting treatment goals.

In addition, Dane County's Department of Human Services will be routinely supplying data describing use of SDM to CRC. These data will be used to monitor implementation, describe CPS operations, and recommend policy and/or procedural changes to continue to improve service delivery to families in Dane County.

The planning efforts that lead to this implementation were initiated in September 1998 and was headed by a group of DCDHS managers, supervisors, and line staff who worked collaboratively with CRC to establish a system that would meet the unique needs of the county. For additional information please contact Bob Lee, DCDHS CPS Manager, at 608-261-9929, or Janice Ereth, CRC Director, at 414-961-9849. 🐼



## NCCD/CRC Website

**N**CCD/CRC introduces its website, located at <http://nccd-crc.org>. You can reach the website through any browser, though it is best viewed through Netscape's Navigator or Internet Explorer. You can reach our website by typing in the above underlined text in the space marked "address." Once you have reached the site, remember to bookmark<sup>3</sup> it for future reference.

The website has an abundance of information on the structured decision making model for child protective services. If you go to <http://nccd-crc.org/crcindex.htm>, you will find information about each assessment tool, workload allocations utilizing SDM, and a downloadable copy of a reliability study comparing the use and consistency of three risk assessment tools.<sup>4</sup>

Other features of the website include:

- Child Maltreatment and Delinquency - a review of research exploring the links between child abuse/neglect and juvenile delinquency;
- Past and Present Projects - where NCCD/CRC has worked in the nation and a description of each project;
- Current Publications - publications available from NCCD/CRC;
- Internet Resources - other useful Internet resources on child maltreatment, juvenile delinquency, adult corrections and more;
- What's New - a bulletin board of recent and upcoming events. 🐼

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<sup>3</sup> Under Netscape Navigator, select "Add Bookmark." In Internet Explorer, select "Add to Favorites."

<sup>4</sup> Funded by the National Center on Child Abuse and Neglect (Grant 90-CA-1550).



Please send us your comments and suggestions regarding what you would like to see in future issues of **SDM News**. We would also like to hear your remarks concerning challenges and successes with the SDM system in your jurisdiction and will feature them in upcoming newsletters.

**SDM News** is a quarterly newsletter published by the **Children's Research Center** to provide information to CPS staff working in jurisdictions that use SDM. Send article submissions, address corrections, and other correspondence to: SDM News c/o CRC, 426 S. Yellowstone Dr., Suite 250, Madison, WI 53719.

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