

Mandatory Reporting Task Force

Alternative Processes and Services

The Mandatory Reporting Task Force is charged in its [enabling legislation](#) to, among other things, “analyze **alternative processes and services** for families who do not present mandatory reporters with child abuse or neglect concerns but who would benefit from alternative services”.

To aid this, the Office of Colorado’s Child Protection Ombudsman (CPO) has conducted research on how other states and jurisdictions have implemented alternative processes and services. These include the use of **decision tools** to aid reporters in choosing whether or not a case meets the threshold requiring a report, **consultations** for mandatory reporters to help them make that decision, and **warmline** systems to potentially connect families in need of assistance to services and resources when the concerns of a mandatory reporter for a family do not rise to the threshold of abuse and neglect suspicions.

It is important to note that the CPO is providing this information as an informational resource as task force members consider possible changes in Colorado. The curation of this information is not an endorsement of any particular policy, and the CPO neither endorses nor disapproves of the policies included below.

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Decision Tools

Some jurisdictions have created **tools to help mandated reporters decide** whether a concern they have meets the threshold required to prompt a report of child abuse or neglect. These resources generally contain reminders about which specific circumstances legally require a report of child abuse and neglect, and they offer **information, recommendations, and/or links to resources or service referrals that may be more appropriate** when circumstances do not

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meet the abuse or neglect threshold. These tools also discuss the negative impacts of **implicit bias**, the disproportionate impacts abuse and neglect reports can have on certain communities, and offer guidance on how to assess bias in one's decision-making process.

New York

The state of **New York** has developed a [Mandated Reporter Decision Tree](#) (Appendix A, pages 6-7) to aid mandated reporters in determining whether they should contact the Statewide Central Register of Child Abuse and Maltreatment (SCR) about a concern. The first page of this resource contains a **decision tree/flow chart** to help mandatory reporters understand whether they must report a certain situation. The second page offers a **strategy to mitigate bias** when making a decision to report, encouraging mandatory reporters to ask themselves if they would make the same decision to call in a report if the child or family had a different characteristic, such as race, immigration status, socio-economic status, and disability status.

Evident Change

The nonprofit organization [Evident Change](#) has created **Community Response Guides** to help individuals who are considering making a report of child abuse and neglect **determine whether a report is necessary** or if, for instance, a referral to a community service or agency resource is a better option. These tools have been developed for a number of jurisdictions, including the state of New Hampshire, counties in California, multiple states in Australia, and Singapore. More information about this tool can be found in a two page promotional resource in Appendix B (pages 8-9).

A beta version of this tool - designed for use in Humboldt County, California - is available for testing online [here](#). **Please take a few minutes to interact with the tool** and click through hypothetical scenarios to see how the tool functions by selecting the "I would like to practice" option. Please note that the a speaker from Evident Change will be presenting to the task force and answering questions on February 28, 2024, and this presentation will be available [online](#) shortly thereafter.

Consultations

The CPO has identified two jurisdictions of note that offer some level of **consultation service** to mandatory reporters or community organizations. These consultations are offered in an effort to **reduce reports** being made when an individual has concerns about a child or family, but those concerns **do not meet the threshold** of child abuse and/or neglect.

Dane County, Wisconsin

The second largest county in Wisconsin – Dane County – offers **consultations to mandatory reporters via the county’s abuse and neglect “Access” hotline**. A [blog post](#) from September 2023 describes this service at some length:

“This provides the reporter the opportunity to discuss their concerns and engage in **conversation regarding whether the concerns meet the legal definition of maltreatment**. During these consults, workers provide feedback to callers if additional information needs to be gathered, **what the reporter can do to support the family** and community resources that may be beneficial. Consultations may also result in a CPS report.

Feedback from reporters has been **very positive** and they **appreciate having time to consult and talk through their concerns**. One example of a consultation call would be to discuss domestic violence concerns in a family, how that may impact the children and what factors CPS considers in those type of cases. Access workers appreciate the opportunity to connect with our partners in the community and engage them in a **mandated supporter** role.

The Access team began tracking data on consultation calls at the beginning of the summer, a time when our call volume is lower. In June, the Access team had 123 consultations which was **27% of all the calls** to the reporting line. In July, there were 83 consultations which was **18% of the total calls**.”

Arapahoe County, Colorado

Arapahoe County, Colorado has created a **Community Development and Prevention Program (CD&P)**, which includes a **consultation component** for community partners. Information on this program is available in a resource provided by the county and attached to this document as Appendix C (pages 10-11). Quotes in this section come from that resource:

The program was primarily designed with a primary focus of supporting “community partners by **helping them to enhance their own capacity** to service children, at-risk adults and their families, **without making DHS the default system to do so**”. Through the program, the county strives to assist community partners – primarily medical, mental health, education, and law enforcement professionals – “in mitigating those concerns on their own, through the **identification of interventions, resources and services that will aid in ensuring families don’t end up in our system**. Community Development is geared toward **working with mandated reporters long before they pick up the phone** to make a report with us.”

The county reports that “in the first three years of the program, comparing those families not served by CD&P, to those that were, we saw a **significant decrease in recidivism** (new referrals, assessments, cases, placements, etc) for those families who received our services.”

Warmlines

Many states offer services referred to as “warmlines”; for instance, this [directory](#) offers information on warmlines in 42 states offering emotional supports to callers. Similarly, [2-1-1](#) systems aiding in the navigation of local resources can be found throughout the country. However, some jurisdictions have built up more extensive warmlines or helpline systems that can offer referrals to resources, services, and local community assistance. [These types of warmlines](#) may be utilized by a mandatory reporter if they have a concern about a child or family, but that concern does not rise to the threshold of suspecting child abuse and/or neglect.

Warmlines in three jurisdictions – Connecticut, New York, and San Diego – are discussed below. **In Appendix D (pages 11-12), you can find a chart created by the CPO with information and links to nine programs that may also be of interest to the task force.** Please note that details such as funding components could not be determined due to the presence of mixed funding sources.

Connecticut

Rather than maintaining a distinct child abuse and neglect hotline *and* warmlines, Connecticut has one [Careline](#) system where trained staff decide whether a report (a) meets the threshold for abuse or neglect prompting an investigation, or (b) would better be resolved through referrals to care, services, and/or resources. Connecticut’s Department of Children and Families’ Careline serves as the “**single point of contact** statewide for the reporting of suspected child abuse and neglect” and operates 24 hours a day, 7 days a week.

When individuals (including mandatory reporters) call the Careline, “**highly-skilled professionals**...answer questions and gather critical information from callers **to determine if a report meets Connecticut’s statutory criteria** for child abuse or neglect”. If the abuse/neglect threshold is met, the report is forwarded to a case investigator for “prompt and appropriate action”. **If the abuse/neglect threshold is not met** and an investigation is not warranted, **staff “may refer the caller to an appropriate service program in his/her community”**. Mandated reporters in Connecticut also have the ability to report “[non-emergent](#)” suspicions of abuse or neglect through a web portal.

New York

New York has a Help, Empower, Advocate, Reassure and Support ([HEARS](#)) family line to provide resources and service referrals. Many states have this sort of a program, but what makes this relevant to the task force is that very recent [changes to mandated reporter training encourages routing cases to the HEARS line](#) instead of a child abuse/neglect report, as appropriate. “The new training will also help mandated reporters identify when concerns do not rise to a level legally requiring a report be made...the training will help mandated reporters **determine**

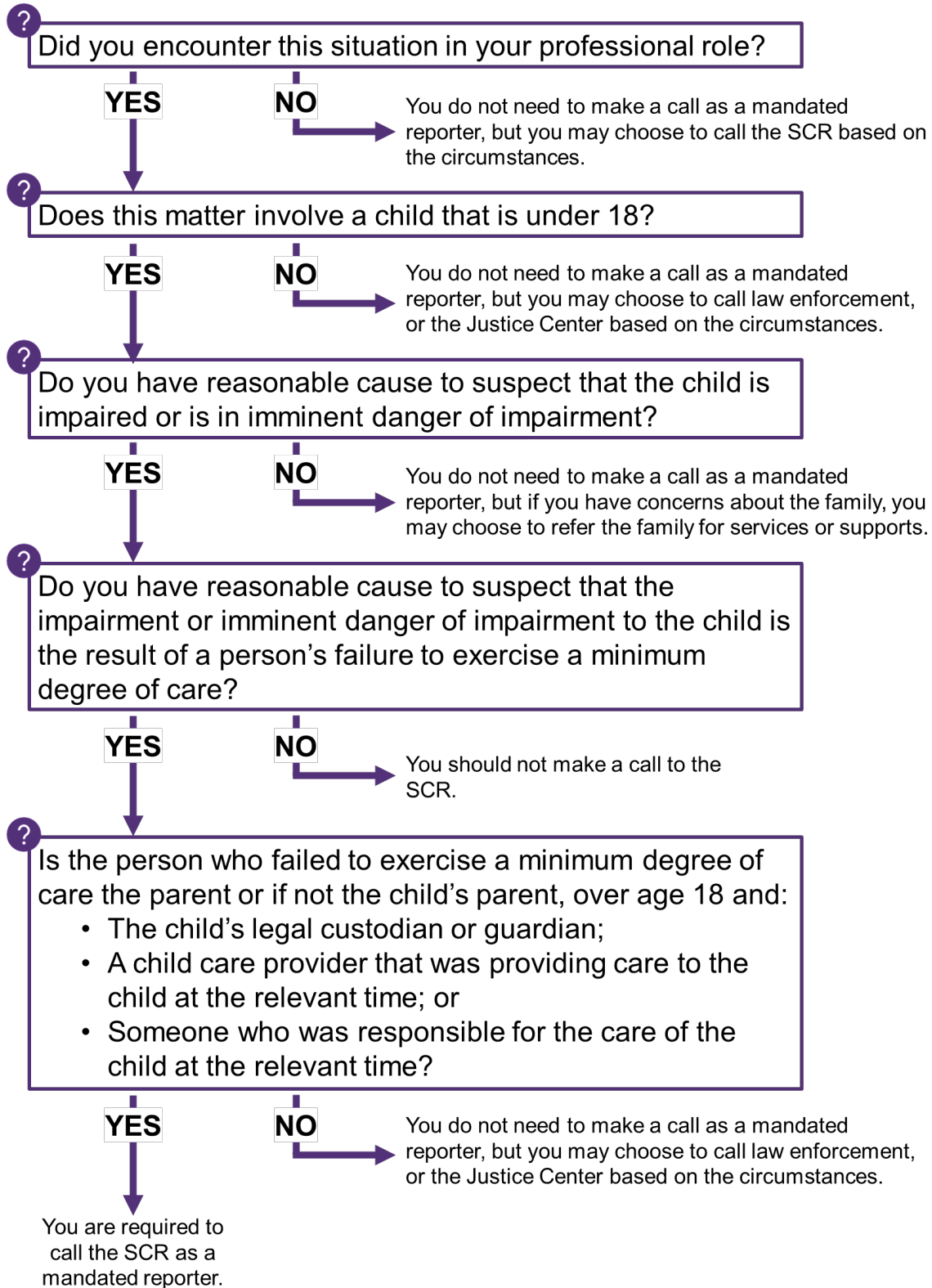
whether a family could instead be supported by directing them to culturally responsive, effective and community based programs through OCFS’ new H.E.A.R.S. family line”. Please note that speakers from New York’s Office of Children and Family Services will be presenting to the task force and answering questions about the HEARS Family Line on February 28, 2024, and this presentation will be available [online](#) shortly thereafter.

San Diego

San Diego maintains a robust [2-1-1 program](#) that houses a 24-hour confidential phone service and **searchable online database of more than 6,000 services and resources** for referral. San Diego’s Child Welfare Services (CWS) has created a strong partnership with the program through the Family Strengthening and Prevention Initiative. When child abuse and neglect reports are **screened out by CWS, referral to San Diego 2-1-1 is one of the primary options available** to ensure families get the resources and services they need. More information on this program can be found in [this](#) 2020 Casey Family Programs article. Involved families are informed that, although the partnership exists, CWS will not be involved in their care coordination or given information, in an effort to **reduce stigma and fear** associated with receiving these services. Services provided by the 2-1-1’s “navigation specialists” include **follow-up** to ensure the families are successfully connected to referred available services. The program website [maintains](#) a useful **data dashboard**, with information including referral quantities, demographics of users, and needs assessment results.

Mandated Reporter Decision Tree

Use the below to determine if you should make a call to the SCR. Remember that as a mandated reporter you should answer the questions in the decision tree based on objective facts and information. Please assess whether your own biases may be impacting your answers by reviewing the reflection question on the other side of this page.



Assessing for Bias in Decision-Making

Each assessment made by a mandated reporter regarding whether to call the SCR can change the course of the life of a child and the members of a family. It is important to be aware of the propensity for implicit or explicit bias and to be intentional about making decisions based on the objective facts of a situation.

One proven strategy to mitigate bias is to examine whether the facts of the situation would lead you to the same decision to call the SCR if the demographic information for the child or family were different.

For example, would you make the same decision to call if any of the following were different? The child or family's:

- Race?
- Ethnicity?
- Gender?
- Gender identity?
- Sexual orientation or expression?
- Religion?
- Immigration status?
- Primary spoken language?
- Culture?
- Age?
- Neighborhood where they reside?
- Presence of a disability?
- Occupation?
- Socio-economic status?

If you answered yes to any of those questions, bias may be impacting your decision to make the call.

If you are interested in learning more about what feeds into implicit bias, Harvard University has developed the Implicit Association Test (IAT). You can access a variety of IAT tests here:

<https://implicit.harvard.edu/implicit/takeatest.html>



EVIDENT CHANGE

Inform Systems. Transform Lives.

COMMUNITY RESPONSE GUIDE

The decision to report suspected abuse or neglect to child protective services (CPS) has high stakes. A call to CPS can have profound effects on a family. On a larger scale, the quality of reporting decisions can support or compromise the well-being of entire communities. As an example, families of color are disproportionately reported for neglect, leading to increased inequities and disruption of communities of color.

Because a CPS report is a family’s initial point of entry into the system, improving reporting practices can have lasting, transformative effects on CPS systems and the communities they serve, increasing equity, minimizing unnecessary interventions, and helping families thrive.

EVERYONE CAN PROTECT KIDS AND SUPPORT FAMILIES

Evident Change’s *Community Response Guide* helps communities collaboratively develop accurate, equitable CPS reporting practices tailored to their needs. The public, online guide includes decision trees for neglect or abuse concerns, linked to a regularly updated roster of local prevention agencies. The result is a real-time decision aid that helps reporters and concerned community members understand and consider the range of local options to help families.

The guide benefits everyone:

- Reporters have clear support for their decisions.
- Prevention providers and the community at large understand their responsibility for supporting children and families.



- CPS agencies receive the most appropriate reports.
- Families are more likely to receive the support they need without unnecessary intervention.
- Communities can better support their members without unnecessary entries into the CPS system when appropriate to do so.

DEVELOPING A COMMUNITY RESPONSE GUIDE

Community Response Guide development is a collaboration involving participants from child welfare, prevention service providers, and the community. The average timeframe for development is 18–24 months. The work includes the following activities.



LEARN MORE

Evident Change has created community response guides in multiple Australian states and Singapore and is now building its first guides of this kind in the United States. We can help your community develop and implement a customized guide to support reporting responsibilities.

To discuss a guide for your community, contact Phil Decter, Director of Child Welfare, at (800) 306-6223 or pdecter@evidentchange.org.

COMMUNITY DEVELOPMENT & PREVENTION

Engaging Community Partners In The Prevention of Abuse and Neglect



Community Development

Our program was developed and its primary focus is to support our community partners by helping them to enhance their own capacity to serve children, at-risk adults and their families, without making DHS the default system to do so. We offer education, consultation and coaching so our partners can assess for and identify, the barriers that exist, which place the child or adult at risk. Our approach encourages a trauma focused lens and insists that our community partners have a full and balanced picture, by partnering with families instead of against them. Our target population is medical, mental health, education and law enforcement professionals. We strive to assist them in mitigating those concerns on their own, through the identification of interventions, resources and services that will aid in ensuring families don't end up in our system. Community Development is geared towards working with mandated reporters long before they pick up the phone to make a report with us. We also provide a mandated reporter training series, resource sharing, and targeted outreach during community crisis, and we participate in a variety of community facing forums as a part of a multi-disciplinary team. We also offer liaisonship between our external agencies and the Department in order to expedite connection, collaboration and information sharing by our staff.



Family Navigation

Limited services are available to support families directly when there is not a community partner available or willing to engage a family directly. A Prevention Consultant will partner with families for approximately 60 days. Their goal is to build a rapport, establish connections and be a conduit to the community to ensure families have access to services necessary in order to keep them from entering the child and adult protection system. The primary goal is to help families establish connections within their communities and teach them how to advocate for themselves. We seek to help families locate a community partner or case management services, to support the family after our involvement and in a sustainable manner moving forward.

Post Closure Outreach

When families are recently closed out within a year from our child or adult protection system, and a new referral is made that does not meet the threshold of abuse or neglect, but has a high likelihood of re-entering our system, our Post Closure Outreach Consultant will be assigned. They are responsible to connect with the prior caseworker and supervisor to review the previous involvement, look for opportunities to enhance our practice, and facilitate re-engagement with the family and/or community partner to provide booster consultation, resources and connections to mitigate the reported concerns. This could include calling a community partner or the family for connection to an additional resources/support. Our consultant can also support our staff in creating sustainable community partnerships so families do not continue to be re-reported unnecessarily. Our Post Closure Outreach Consultant will assist the caseworker through any challenges they encounter, aid in the resource exploration, and provide support in navigating barriers.



MISSION: Through effective collaboration with community partners, shared priorities and leveraged assets, we will develop a collective vision with clear expectations while creating a partnership culture through education, support and consultation.

VISION: Provision of integrated community based, prevention focused initiatives, programs and strategies to increase the community level response to the needs of ALL children, families and adults.

GOALS:

Decrease Need for Child & Adult Protection Involvement

Enhance Community Partnerships & Liaisonship

Contribute To Enhanced Agency Practice

Decrease Referrals, Assessments, Cases & Placements

Decrease Recidivism



Our Lessons Learned

- We all have a shared responsibility to engage families to establish relationships and connections in order to offer support
- The Department of Human Services cannot be the default system to “fix” social problems or be used to threaten families to comply with social norms
- Families must be connected directly to resources. Those resources must be free from difficult referral processes, impossible expectations and long waitlists
- We must ask families what they really need and how we can help them instead of assuming we know best. Families are the experts on themselves, not us.
- Consultation by DHS must be offered “any table, anywhere, anytime” when community partners are feeling “stuck” in complex situations
- It is important for community partners to have the hard conversation with families about their concerns. If DHS has the conversation on their behalf, it will disintegrate the relationship and trust between the family and the reporter/agency
- When DHS is involved with families, connection and communication with our community partners is essential. They are a part of the “team” supporting the family. We can’t expect them to help keep families safe if they aren’t included

Community Development and Prevention Outcomes

Community Development and Prevention was created in 2018. In the first three years of the program, comparing those families not served by CD&P, to those that were, we saw a significant decrease in recidivism (new referrals, assessments, cases, placements etc.) for those families who received our services. If we all partner together in this work, we are able to decrease the overall workloads for our entire division.

We need to stop just pulling people out of the river. Some of us need to go upstream and find out why they are falling in.

(Desmond Tutu)



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Appendix D: Comparison Chart of Nine Warmline Programs

| WARMLINES | Where is this program housed? | Build on/plug into already-existing community offerings? | Scope of services | Hours | Affiliation with DHS/CPS? | Mention of non-English service? | Other unique traits |
|---|---|---|--|---|---|--|---|
| Connecticut: Talk It Out | Collaboration between Department of Children and Families, United Way, and community providers. | Yes. "If additional help is needed, they will be referred to community services." | Parents and families seeking assistance. | Phone: M-F, 8am-8pm; Sat & Sun 1pm-8pm. | Yes. | Yes, program has both English and Spanish capacity. | Exists alongside Careline, which refers out cases who are screened out for abuse and neglect. |
| Connecticut: Careline | Department of Children and Family Services | Yes. If determined that investigation not warranted, "may refer the caller to an appropriate service program in his/her community." | Reports of child abuse and neglect. | Phone: 24/7. | Yes. | Not found. | |
| 2-1-1 Idaho CareLine | Department of Health and Welfare | Yes. Database includes both state programs and community organizations/offerings. | Broad range of services. | Phone: M-F, 8am-6pm; Text: M-F, 8am-6pm; Online database: 24/7. | Yes. | Not found, though the website offers Google translation into many other languages. | Offers online resource/service dashboard, similar to San Diego 2-1-1 interface. |
| Prevent Child Abuse Louisiana | Nonprofit. | Likely. Services listed include referrals. | Parents and families seeking assistance. | Phone: 24/7; Text: 24/7. | No. | Not found. | Website states that all Parentline specialists are mandated reporters. |
| Minnesota Warmline | Nonprofit. | Yes. Connections may be made to nearest crisis services if needed. | Mental health and wellness. | Phone: Sun-Sat, 9am-9pm; Online screening: 24/7. | No, though website says it is promoted by many including social service agencies. | Not found. | More than 13,000 callers in 2020; 1/4 callers said they would have gone to ER or EMS/crisis services without. |

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| WARMLINES | Where is this program housed? | Build on/plug into already-existing community offerings? | Scope of services | Hours | Affiliation with DHS/CPS? | Mention of non-English service? | Other unique traits |
|---|---|--|--|--|---|---|--|
| Nebraska Family Helpline | Service of Nebraska DHHS, provided by nonprofit. | Yes. Referrals may include "existing community-based services". | Parents and families seeking assistance. | Phone: 24/7. | Yes. | Not found. | Page for professionals working with families, offers consultations as well as promotional materials. |
| New Hampshire: Family Support Warmline | External. Partnership between State and private nonprofit, funded in part by DHHS. | Yes. Calls may lead to the offering of referrals to other programs and providers in community. | Parents and families seeking assistance. | Phone: M-F, 8:30am-4:30pm | Yes. | Yes, "can accommodate just about any language spoken in NH." | |
| New York: Help, Empower, Advocate, Reassure and Support Family Line | Office of Children and Family Services | Yes. Service includes referrals to a variety of services, staff described extensive work partnering with existing resources. | Parents and families seeking assistance. | Phone: M-F, 8:30am-4:30pm | Yes, though referrals are not made from the HEARS line to the abuse and neglect hotline. | Yes, "the line offers messages in 12 languages", support in 10 languages. | Mandated reporters are required to take training that includes information about HEARS family line. |
| 211 San Diego | Nonprofit (though partnership exists between San Diego Child Welfare Services and 2-1-1 San Diego for screened out cases) | Yes. Database includes both state programs and community organizations/offerings. | Broad range of services. | Phone: 24/7; Online database: 24/7. | Yes, partnership between Child Welfare Services and 2-1-1. Families are informed that CWS will not be involved in their care coordination or given information. | Website available in English, Arabic, Chinese (simplified and traditional), Filipino, Persian, Spanish, and Vietnamese. | When abuse and neglect reports are screened out, referral to San Diego 2-1-1 among options. |