Mandatory Reporting Task Force | Meeting Two

June 7, 2023, Meeting Recap

Overview

The Mandatory Reporting Task Force is legislatively charged with analyzing the effectiveness of Colorado's mandatory reporting laws in keeping children safe, connecting families with the resources they need, and providing clarity to mandatory reporters. Integral to this analysis, the task force will continue to examine the relationship of these laws to systemic issues and disproportionate impacts on under-resourced communities, communities of color, and people with disabilities.

Summary of June7, 2023, Meeting

> **Directive Discussed:** *Is mandatory reporting effective in serving children and families in Colorado? (See C.R.S. §19-3-304.2(7)(a)(I))*

Is Mandatory Reporting Effective for the Professionals Making the Calls?

The focus of this meeting, and the three after it, will involve different types of mandatory reporters, data analysis, discussions on receiving and assessing reports, and monitoring the child welfare system. During previous meetings, the task force has identified three main buckets that capture the reasons why mandatory reporters make calls:

1. Concerns about the safety of a child, where reporters express worry based on what they have heard or seen.
2. Desire to connect families and children with resources and services, reflecting the belief that making a report is the best way to ensure access to necessary support.
3. Concerns about legal liability for failing to report, indicating that some reporters may feel compelled to report due to potential legal consequences.

The first member panel to address these buckets was comprised of members who represent medical and mental health professions on the task force.

Member Panel #1: Medical/Mental Health Professionals

- Heather Kaczmarczyk, MSW, LCSW (Proxy for Kelsey Wirtz)
- Dr. Kathi Wells, MD, FAAP
- Donna L. Wilson, Ph.D., LPC

Panel members identified the following as reasons behind filing reports in child welfare settings:

- Safety concerns
- Fear that a lack of resources will result in abuse or neglect
- Assumption that CPS will provide resources
- Liability – more for systems than individuals

Panel members discussed that maintaining a relationship with a family or a lack of trust in the system may serve as a reason not to make a report. They also discussed concerns that removing the current mandates may perpetuate bias. The current lack of clarity in the law often creates the difficult position of making a report and relying on a separate system to resolve the concern.

The panel also discussed the distinction between reporting for safety and risk versus the legal requirements for mandatory reporters. The law states that mandatory reporters should report if they know or suspect child abuse may have occurred or could occur, which differs from the internal child welfare definitions of imminent risk of moderate to severe harm. There may be a need to clarify and align these different thresholds to avoid confusion. Current law fails to capture the nuance between abuse and neglect. The panel also cited the following as concerns with the current law and processes for mandatory reporting:

- Variations between state and county administrations
- Lack of shared language and definitions
- Confusion, inconsistencies in reporting
- No alternate resources when no serious safety concerns but a lack of resources
- Disparities in practice (i.e. testing at risk mothers)

The panel was asked to discuss potential solutions and alternative reporting methods. This discussion largely centered on finding a middle ground between reporting and providing meaningful support to families. The following ideas were discussed:

- Warm lines staffed by trained professionals to triage cases and connect families to appropriate resources and support in the community. These services would be able to identify when a situation requires a report of significant abuse or if it can be addressed through other means.
- Single access point, such as a dedicated phone line or resource center, where professionals can refer families in need of services and support without immediately resorting to intervention or removal.
- A connected safety net to provide effective support.
- Settlement house model, also known as a one-stop shop, is a community-based approach where families can access various resources and services in a centralized location. It originated from an African American model aimed at providing resettled individuals with all the necessary support in one place.
    - This model offers a wide range of services such as job training, food resources, after-school tutoring, and financial literacy, among others. It aims to create a holistic support system for families, addressing their diverse needs and helping them become safe and responsible parents.
    - Family Resource Centers as a model that is operating in Larimer County as a possible example of alternative approach.

- Ease of access for families, minimizing overwhelm and confusion.
- Creating better connections to services from outside of the child welfare system to build trust and increase engagement from families. These include:
    - Culturally connected and community-based manner
    - Public health and community-based interventions as more positive and receptive alternatives
    - The use of navigators, care coordinators, and peer support to help bridge the gaps and guide families to the necessary services.
- Feedback and communication between professionals and the reporting system, ensuring that information on the outcomes of interventions or services is shared.
- Skill acquisition and behavior modification programs that aim to address parenting concerns and reduce child protection issues, rather than solely focusing on compliance and case management.
- Transparency and open communication with families about expectations and goals for reunification
- Rural areas - the lack of resources and inconsistencies in reporting pose special challenges in the child welfare system.
- Bridge the gaps between the intent of the law, research, policy, and practice.
- Distinguish between different types of family needs and abuse, clarify terms like "reasonable suspicion," provide proper training, and explore the establishment of an alternative system for support.

During this discussion the question was raised as to whether the task force has the ability to address these issues and make recommendations to the Colorado General Assembly. Stephanie Villafuerte, Chair, stated that it is within the task force's scope to make recommendations to the state legislature, including advocating for better resources such as a warm line or improved service provision. Stephanie emphasized the importance of conducting thorough research and gathering specific models that have proven successful. She also expressed the need to provide detailed recommendations rather than generic requests for more resources to ensure the recommendations are actionable and effective.

Medical/Behavioral Health Practitioners Panel Final Thoughts

Dr. Wilson, Heather, and Dr. Wells provided their final thoughts in response to the key questions. Dr. Wilson emphasized the need to bridge the gaps between the intent of the law, research, policy and practice. Heather highlighted the importance of considering the nuances within different roles and patient populations. Dr. Wells discussed the need to distinguish between different types of family needs and abuse, clarify terms like "reasonable suspicion," provide proper training and explore the establishment of an alternative system for support.

Review of National Mandatory Reporting Data and Colorado-Specific Data for Reports Made by Medical/Mental Health Professionals

Steve Ellis and Crystal Ward Allen with Case Family Programs provided insights on the role of medical professionals as mandated reporters. In upcoming meetings, the task force will integrate data into

conversations with other mandatory reporter professionals, such as educational professionals, non-profit providers and others.

Steve gave a brief highlight on mandatory reporting or screening trends in general, and then focused on those for health care and behavioral health professionals.

"Data is not the final answer but rather a starting point for further discussion and analysis."

The data used in the presentation is from the National Child Abuse and Neglect Data System with data on kids who are screened in, with a focus on data from the state of Colorado. (In Colorado, approximately two-thirds of the calls received are screened out and do not proceed to an investigation or assessment. The data presented specifically pertains to the one-third of reports that were screened in and deemed eligible for further investigation by meeting the hotline's scrutiny standards.)

Steve highlighted the racial and ethnic representation within the child welfare system, with an emphasis on over-representation and disproportionality of Black/African American children. The number of children screened in in Colorado is lower than the national average (33 versus 40 per thousand children). However, there is a significant disproportionality in Colorado concerning the representation of Black/African American children who are represented over twice as high as that of other racial and ethnic groups, and it has gradually been increasing over time.

Steve discussed the percentage of children screened in for investigation by the top four reporter sources: law enforcement, family/ friends and medical/mental health professionals. Reports from each group have remained relatively steady, but there has been a noticeable uptick in reports coming from medical and mental health professionals -- from 18% in 2012 up to about 26% currently.

There are variations among reporting sources for Black/African American children. Generally, education tends to report a slightly higher percentage of Black/African American children compared to other reporting entities. On the other hand, family and friends tend to report a slightly lower percentage of Black/African American children. Similarly, the medical and mental health groups also report a lower percentage of Black/African American children compared to other racial and ethnic groups.

Shifting focus to what happens to these reported cases in terms of their disposition, over time there is a relatively consistent trend in the substantiation of cases. Approximately 27% of all screened-in cases are substantiated. However, there have been notable changes in the distribution of dispositions:

1. There has been an increase in the number of cases that were initially reported but later categorized as unsubstantiated, accompanied by a simultaneous rise in cases being directed towards alternative response systems. There appears to be an inverse relationship between these two categories.
2. When we examine the data by race and ethnicity, Black/African American individuals tend to have higher substantiation rates but lower rates of referral or involvement in alternative response systems.

While there has been an overall increase in alternative response cases and a decrease in substantiations, the white population stands out as a driving factor in these trends.

In looking at the flow chart of reporters and dispositions, Steve pointed out that two different sets of laws and priorities drive the outcomes and decision-making in this context: On one hand, reporting individuals are guided by laws that require them to report based on reasonable suspicion or suspected abuse. Their decision to report is influenced by these legal requirements. On the other hand, the dispositions depicted on the right side of the graph are determined by the state's set of definitions and laws, which dictate the substantiation, unsubstantiation or alternative response processes.

In future discussions, the task force noted that it would be interesting to delve into the observation that in the education sector, there is a higher frequency of cases being classified as unsubstantiated compared to substantiated or directed towards alternative response.

In 2021, medical and mental health professionals reported 26% of all cases. From 2012 to 2021, there was a consistent increase in the percentage of cases reported by this group, indicating a rising trend. The breakdown of this data by race and ethnicity shows a general upward trend for all groups, but around 2018/2019 there is a noticeable differentiation between the black and white groups.

The task force requested that the data be spliced between behavioral health and health care professionals.

Dispositions of cases reported by medical and mental health professionals, similar to all reporting groups, substantiation rates remained relatively stable, while unsubstantiated cases decreased, and alternative response cases increased. However, Black/African American children tend to have slightly higher substantiation rates compared to other groups.

Focusing on a specific report type within the medical and mental health category, cases where professionals reported allegations of neglect may have some duplication because there can be multiple allegations (when someone makes a report, they might mention neglect as well as other concerns like substance abuse, physical abuse, or sexual abuse). To clarify, the term "neglect" serves as a broad category encompassing various subcategories, which may be further specified in the state's data system. However, for Casey Family Programs' analysis, they rely on the larger, more general neglect category.

- Neglect allegations reported by medical and mental health professionals account for approximately 24% of all reports. Approximately 28% were substantiated, while around half were unsubstantiated.
- Out of all reports made by medical and mental health professionals, approximately 26% involve physical abuse allegations. The data showed that 14% of these are substantiated, while approximately 60% are unsubstantiated.
- Approximately 31% of reports by medical and mental health professionals include allegations of sexual abuse. Among these reports, about 28% are substantiated. It's worth noting that sexual abuse cases tend to result in either substantiation or unsubstantiation, without significant representation in the alternative response category. (Michelle Dossey later clarified that alternative response is not used in sexual assault cases.)

- Medical and mental health professionals make approximately 48% of all reports related to medical neglect, among which about 15% are substantiated, approximately 57% are unsubstantiated, and about 28% are directed towards alternative response.

Task Force Discussion

Dr. Wilson led the Colorado Disparities Resource Center from 2009 to 2011 and expressed shock that the data presented now looks almost identical to what it was back then. The lack of significant changes despite efforts focused on disproportionality, disparities, implicit bias, and mandated reporter training is very disappointing. (Crystal pointed out that the disparities for black children have actually increased).

Michelle emphasized that it is crucial to recognize the interconnectedness of other issues within the child welfare system. The state has specific thresholds and guidelines for determining founded, unfounded, or inconclusive cases, as well as criteria for alternative response and high-risk assessment tracks. Understanding these definitions and requirements is essential in comprehending the nature of the problem and working towards changing the trajectory of reported cases and addressing disproportionality. She highlighted the importance of everyone in the group having access to and understanding these definitions to gain a comprehensive understanding of the issues at hand.

Sam Carwyn stated that, although slightly outside the focus of the group, it is important to consider the frequency with which black and brown children are placed in kinship care and aging out of the system. Colorado has implemented a new kinship navigator practice approved by the federal government, which aims to engage and support all families, recognizing the positive impact of kinship care on children's well-being. However, recent federal regulations have changed the eligibility criteria for kinship care, posing a potential barrier for historically overrepresented black individuals who now have to go through the entire foster care process. This shift in access to kinship care should be considered when examining the changes in data regarding its utilization in black and brown communities. (Kinship care is lower for Black children and higher for Latinx children.)

Jennifer Eyl highlighted the difference between the broad scope of mandatory reporting, which captures a wide range of concerns related to abuse or neglect, and the actual substantiation or alternative response rates. This data point is important when considering the effectiveness and potential improvements of mandatory reporting. Jennifer also reminded the group that there is a distinction between the child welfare system as a whole and the concept of mandatory reporting, noting that these are two distinct entities with different dynamics and considerations.

Cris Menz expressed concern about reporting undocumented individuals in a rural community, but the data did not reflect that population.

Dr. Wells posed two questions: What percentages of calls were received in different mandatory reporting categories and the racial breakdown within those categories and what happens to those screened out? How can we access information so that mandatory reporters know whether services have been provided and we can understand the opportunities for alternative responses?

Steve Ellis noted that there is not that level of information in NCANDS, and/or data would be raw data without context around it.

Dr. Wilson expressed the need for a more collaborative and integrated approach to serving children and families, referencing the settlement house model as a potential solution and shared an example from Columbus.

Doris Tolliver asked whether it is possible to analyze the data based on the distinction between rural and urban areas. Steve can look at county data and would just need to know which counties comprise rural versus rural regions.

Sam asked whether the data would show if a family had multiple reports filed against them and the frequency of these reports.

Steve explained that, in theory, it is possible to determine if there have been multiple reports filed for a specific child and the outcomes of those reports using the child level file. However, this analysis has not been conducted extensively due to matching rate issues between different years. While it can open the door for discussion, it may not provide absolute certainty and confidence in making conclusive statements.

Kevin Bishop said it reinforces his belief that there are disparities across multiple systems, including the criminal justice system, where black and brown individuals are overrepresented and have disproportionate interactions with law enforcement. He emphasized the importance of clarifying and tightening the definition of when a report is necessary. It is worrisome that reports are sometimes made with the intention of providing resources, which may come with conditions that impose certain expectations on people. This reinforces his suspicion that there is moralizing and imposing of norms happening through this reporting mechanism.

Stephanie's main takeaway from the discussion is that there are existing infrastructure components that can be further developed and explored. She mentions Family Resource Centers, which have been underfunded despite being around for several decades. She also highlights the 211 line at Mile High United Way, which connects people with numerous providers. Stephanie expresses optimism and believes that these existing models can be relied upon and improved upon for greater success. However, she raises concerns about solely providing a phone number to access resources, emphasizing the importance of quality and personalized assistance. In her role at the CPO, they prioritize customer service and ensure individuals are guided and supported in accessing the appropriate resources. Stephanie emphasizes the need for both quantity and quality when considering infrastructure and services.

Carlos Castillo concluded that the current reporting model is inefficient. The overreporting or misreporting of cases burdens multiple agencies, including Denver Police Department and child welfare services. Carlos believes that adopting a different model could alleviate these issues. He emphasizes the need for sufficient staffing and resources to address cases appropriately, noting that many cases don't require involvement from law enforcement but rather different types of resources. By directing these cases to the right resources and making appropriate allocations, the system can be alleviated and prevent unnecessary burdens.

Jade Woodard proposes a shift in the role of mandatory reporters, suggesting that instead of simply referring families to a resource line like 2-1-1, they should provide more personalized support. Jade envisions a system where mandatory reporters act as guides and supports for families, helping them

navigate a family well-being track or system rather than relying solely on mandatory reporting or child welfare systems. The focus would be on providing assistance and resources to families unless certain criteria or documentation indicate a need for intervention related to safety concerns that the family cannot handle on their own. Jade emphasizes the importance of considering the nuances and possibilities for warm lines, referrals, and handoffs in this context.