

**CT'S DIFFERENTIAL RESPONSE MODEL
REQUEST FOR INFORMATION
RESPONSE SUMMARY
October 29, 2008**

Background

The Department of Children and Families (DCF) issued a Request for Information (RFI) on August 1, 2008 seeking information and feedback regarding the design and potential statewide implementation of a differential response (DR) approach to working with families following receipt of a report of abuse or neglect. The goal of DR is to establish an alternative response track for accepted reports of child abuse or neglect that offers a strength-based, solution-oriented, and service approach in contrast with the traditional investigation approach which can be more adversarial and authoritative.

This promise of this reform effort is to assure that families feel more engaged in assessing their needs and more willing to be part of the solution. Also, DR creates more opportunity for early and more comprehensive assessments of the family core living and care-giving needs, which left unattended has resulted in either repeat reports of child abuse or neglect, or worse, contributed to an increase in the likelihood of future harm to children.

Through this RFI process, the Department was interested in continuing a public dialogue in order to further illuminate the implications of DR for families, communities, service delivery, and for child welfare practice. Further, the RFI sought comment and insight regarding expectations of how families should experience DR, how DR can be measured and evaluated, what model of DR will be the right fit for Connecticut, and what service infrastructure will be needed to support a DR model.

The response deadline for the RFI was October 14, 2008. The Department received 16 responses. Responders included private providers, a nonprofit association, three public entities, and a private foundation. Below is a brief summary of their responses to 22 questions posed in the RFI across 5 inquiry domains, including: conceptual views on DR; family experience expectations; program outcomes and measurement; DR model design, and; service development and delivery. In addition, the Department summarized comments made throughout responses related to implementation strategy and suggestions where further public dialogue and engagement would be appropriate.

- I. Conceptual Views**
- II. Family Experience Expectations**
- III. Program Outcomes and Measurement**
- IV. DR Model Design**
- V. Service Development and Delivery**
- VI. Implementation Strategy and Areas for On-going Dialogue**

Number I: All States Have This Pathway.

- Report made to Hotline.
- Hotline determination: Statutory definition and/or other state established criteria for accepting a report is not met.
- Pathway selected: Report not accepted.
- Intervention: None recommended. Informational assistance may be provided by the Hotline.

Number II: Some States With A Well Established Differential Response Practice Utilize This Model.

- Report made to Hotline.
- Hotline determination: Statutory definition and/or other state established criteria for accepting a report is not met. However, a service need is identified.
- Pathway selected: Report not accepted. Hotline contacts community partner provider.
- Intervention: Community partner provider visits with family and attempts to intervene.

Number III: Some States Utilize This Community Partner Or Team Response Model.

- Report made to Hotline.
- Hotline determination: Statutory definition and/or other state established criteria for accepting a report is met. Safety and risk concerns are low to moderate.
- Pathway selected: Report accepted for a differential response track. Hotline contacts community partner provider. Joint Child Welfare and provider home visit conducted.
- Intervention: Family Strengthening Services (aka Assessment) initiated.
- Determination: No determination regarding allegations in the report is made.

Number IV: Some States Utilize A Scaled Back Investigation Or "Assessment" Model.

- Report made to Hotline.
- Hotline determination: Statutory definition and/or other state established criteria for accepting a report is met. Safety and risk concerns are low to moderate.
- Pathway selected: Report accepted for a differential response track.
- Intervention: Family Strengthening Services (aka Assessment) initiated by Child Welfare staff. Case opening, closure or transfer to a community-based provider is possible.
- Determination: No determination regarding allegations in the report is made.

Number V: All States Have This Pathway.

- Report made to Hotline.
- Hotline determination: Statutory definition and/or other state established criteria for accepting a report is met. Safety and risk concerns are moderate to high.
- Pathway selected: Report accepted for a traditional Child Welfare investigation.
- Intervention: Safety and fact finding are the priority.
- Determination: A determination regarding allegations in the report, perpetrator, Central Registry is made. Case may or may not be opened for continued DCF services.

RESPONDENT	PATHWAY PREFERRED	COMMENTS
1	Pathway III	
2	No response	
3	Pathway IV	
4	No response	
5	Pathway IV	Should start with Pathway 4 and as the infrastructure, resources and practice builds, DRS should move to Pathway III
6	Pathway III or IV	
7	Pathway IV	If provided the resources, DRS could adopt Pathway III
8	Pathway III	Pathway IV is too much like the current system
9	Pathway II	Assessments must be done without DCF workers as their presence would interfere with trust development with families
10	Pathway II, II, or IV	
11	Pathway II or III	
12	Pathway II and III	Pathway II will require additional resources and Pathway III (DCF and provider partnership) helps to build trust with families
13	Pathway III	Team approach is best and will exemplify a model of collaboration
14	Pathway III	
15	Pathway II or III	Depends on resource commitment
16	Pathway III	Right fit as it requires collaboration

5 separate endorsements of Pathway II
12 separate endorsements of Pathway III
5 separate endorsements of Pathway IV