

Office of Missouri State Auditor Nicole Galloway, CPA

Department of Social Services Child Abuse and Neglect Hotline Unit

Report No. 2018-133 December 2018

CITIZENS SUMMARY

Findings in the audit of the Child Abuse and Neglect Hotline Unit

Staffing Levels and Performance

Fair:

The Child Abuse and Neglect Hotline Unit does not have sufficient staffing to handle the increasing volume of reports, which has led to increased wait times and/or reporters having to call back multiple times. Staffing levels have declined since 2015 and have not kept pace with the growing number of reports. According to Department of Social Services records, the average Child Abuse and Neglect hotline wait time has increased by approximately 47 seconds per year from 2013 to 2017.

Although the Child Abuse and Neglect Hotline Unit is actively monitoring some performance measures, it has not developed and monitored formal and quantifiable operational performance goals or expected levels of performance and, as a result, is unable to compare actual operational performance to expected or desired operational performance.

In the areas audited, the overall performance of this entity was Good.*

*The rating(s) cover only audited areas and do not reflect an opinion on the overall operation of the entity. Within that context, the rating scale indicates the following:

Excellent: The audit results indicate this entity is very well managed. The report contains no findings. In addition, if applicable, prior recommendations have been implemented.

Good: The audit results indicate this entity is well managed. The report contains few findings, and the entity has indicated most or all recommendations have already been, or will be, implemented. In addition, if applicable, many of the prior recommendations have been implemented.

The audit results indicate this entity needs to improve operations in several areas. The report contains several findings, or one or more findings that require management's immediate attention, and/or the entity has indicated several recommendations will not be implemented. In addition, if applicable, several prior recommendations have not been implemented.

Poor: The audit results indicate this entity needs to significantly improve operations. The report contains numerous findings that require management's immediate attention, and/or the entity has indicated most recommendations will not be implemented. In addition, if applicable, most prior recommendations have not been implemented.

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NICOLE GALLOWAY, CPA

Missouri State Auditor

Honorable Michael L. Parson, Governor and Dr. Steve Corsi, Psy.D., Director Department of Social Services Jefferson City, Missouri

We have audited certain operations of the Department of Social Services, Child Abuse and Neglect Hotline Unit, in fulfillment of our duties under Chapter 29, RSMo. The scope of the audit included, but was not necessarily limited to, the year ended June 30, 2017. The objectives of our audit were to:

- 1. Evaluate the unit's internal controls over significant management and financial functions.
- 2. Evaluate the unit's compliance with certain legal provisions.
- 3. Evaluate the economy and efficiency of certain management practices and procedures, including certain financial transactions.

We conducted our audit in accordance with the standards applicable to performance audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform our audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides such a basis.

For the areas audited, we identified (1) no significant deficiencies in internal controls, (2) no significant noncompliance with legal provisions, and (3) the need for improvement in management practices and procedures. The accompanying Management Advisory Report presents our finding arising from our audit of Child Abuse and Neglect Hotline Unit.

Nicole R. Galloway, CPA State Auditor

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Background

The Missouri Department of Social Services - Children's Division (DSS-CD) is responsible for directing and supervising the administration of various child welfare services. The DSS-CD works in partnership with families, communities, the courts, and other governmental entities toward ensuring the safety, permanency, and well-being of children statewide. The DSS-CD operates the Child Abuse and Neglect (CA/N) Hotline Unit as required by state law. Section 210.145.1(4), RSMo, requires the DSS-CD to operate a single, statewide toll-free telephone number¹ at all times for receiving and maintaining reports of child abuse and neglect. The CA/N Hotline Unit has been operating 24 hours a day, 7 days a week since August 1975.

Permissive reporters, such as relatives or neighbors, voluntarily report alleged child abuse and neglect. In addition, Section 210.115.1, RSMo, mandates that certain professionals (mandated reporters) report alleged child abuse and neglect. These professionals include health care professionals, mental health professionals, social workers, child care providers, law enforcement officials, school officials, ministers, and other persons with responsibility for the care of children.

In 2013, the General Assembly revised state law² to require each mandated reporter in the same workplace to make separate³ reports of alleged child abuse and neglect. This law change has led to a continuing increase in the number of annual reports to the CA/N Hotline Unit. See Figure 1 in the Management Advisory Report for reporting data by year.

Structured decision-making protocol

In our prior audit⁴ of the CA/N Hotline Unit, we recommended the department implement a structured decision-making (SDM) tool to increase consistency and accuracy in making intake, screening, risk assessment, service, and placement decisions. In response to our recommendation, the department indicated it had already begun working with a third party in 2000 to explore the adaptability of a specific SDM model to the hotline. The Missouri General Assembly passed legislation in 2004 requiring the division utilize SDM protocols to classify all reports of child abuse and neglect and give priority to ensuring the well-being and safety of the child, as required by Section 210.145.2, RSMo. In response to this requirement, the CA/N Hotline Unit implemented the current SDM intake screening tool during 2005. This

¹ The toll-free number for reporting child abuse or neglect is 1-800-392-3738.

² Section 210.115, RSMo, was revised with the passage of House Bill 505, First Regular Session, 97th General Assembly (2013), and included an emergency provision, making it effective immediately upon passage and approval.

³ There is one exception to this requirement which allows for a single report if certain criteria are met. Section 210.115.2, RSMo, allows two or more members of the same medical institution to submit a single report by a designated member or the medical team.

⁴ Report No. 2000-132, *Audit of Child Abuse and Neglect Reporting and Response System*, issued in December 2000.



evidence-based and research-based system uses structured assessments to improve the validity and consistency of each decision. The intake screening tool uses various decision trees to help personnel make key assessments regarding child safety and the necessary or appropriate response time.

Personnel interview the reporter through a three-part interview beginning with initial questions to gather information (i.e., demographics) about the reporter, child, child's family, and the reporter's concerns; followed by a set of key questions for up to 30 different pathways and decision trees (if applicable); and ending with a closing procedure that informs the reporter of the specific call classification.

During the initial part of the interview, personnel ask permissive reporters if they would like to provide their names and/or other identifying information; mandated reporters are required by state law to provide identifying information. The final question during the initial part of the interview asks the reporter for a description of the reporter's abuse and neglect concerns. The reporter's answer guides the interviewer to at least 1 of the following 30 pathways, which requires the interviewer to ask a unique series a questions to gather information and make a determination on what action(s), if any, to take.

- 1. Abandoned
- 2. Accident
- 3. Afraid to go home
- 4. Beaten/injured
- 5. Behaving strangely
- 6. Bruises/visible marks
- 7. Dirty/inappropriate clothing
- 8. Domestic violence
- 9. Drug-exposed infant
- 10. Drugs/poisoning
- 11. Educational needs
- 12. Emotional abuse/rejection
- 13. Exhibits provocative behavior
- 14. Exposed to sexual acts/materials
- 15. Fatality
- 16. Hungry
- 17. Kicked out of home/locked in/out
- 18. Overheard sounds
- 19. Parents requesting immediate removal/refusing to pick up child
- 20. Parent's inappropriate behavior
- 21. Parent's mental illness
- 22. Restraint
- 23. Sexual acts/exploitation
- 24. Shaken baby



- 25. Suspicious injury
- 26. Threat to seriously harm or kill
- 27. Unsafe/unsanitary home
- 28. Unsupervised
- 29. Untreated illness/injury
- 30. Utilities

If the information provided by the reporter meets at least one condition for a CA/N report on at least one pathway, the interviewer will have completed two types of decision trees. The 4 types of response-priority decision trees include physical abuse, sexual abuse, neglect, or medical neglect. These help the interviewer determine how quickly the investigation or family assessment must be initiated. The three response levels are 3, 24, and 72 hours. If a 3-hour response is indicated on one tree, it is not necessary to complete the additional decision trees. The track assignment decision tree is used to assess whether a CA/N report should be categorized and assigned to field personnel as an investigation or a family assessment. The CA/N Hotline Unit has protocols in place for supervisors to perform overrides when warranted, which allows additional flexibility.

Classification

The classification of each report is determined by whether the 3 conditions reported meet the criteria to be accepted as a CA/N report pursuant to the definitions in Section 210.110, RSMo, as follows:

- The child is under 18 at the time of the call;
- The alleged perpetrator has care, custody, and control of the child⁵; and
- The allegation of abuse⁶ and/or neglect⁷ meets the legal definition.

If all 3 criteria are met, the report is generally accepted as a CA/N report; however, if any one of these criteria is not met, then the report is classified as a Non-CA/N report.

CA/N report classification

Investigations are performed by local DSS-CD personnel in response to a report of child abuse or neglect when there is an identified need to collect physical and/or verbal evidence. Investigations prompt a visit to the home to

⁵ Per Section 210.110(16), RSMo, care, custody, and control of the child includes, but is not limited to, the parents or legal guardians of a child, other members of the child's household, those exercising supervision over a child for any part of a 24-hour day, any person who has access to the child, or any person who takes control of the child by deception, force, or coercion.

⁶ Per Section 210.110(1), RSMo, abuse is any physical injury, sexual abuse, or emotional abuse inflicted on a child other than by accidental means.

⁷ Per Section 210.110(12), RSMo, neglect is the failure to provide the proper or necessary support; education as required by law; nutrition; or medical, surgical, or any other care necessary for the child's well-being.



ensure the safety of the child and, if appropriate, DSS-CD personnel may seek assistance from local law enforcement for possible co-investigation of criminal actions.

Family assessments are performed by local DSS-CD personnel to provide a prompt assessment of a child and his/her family and include provision of community-based services to reduce the risk of child abuse and neglect and support the family. Family assessments prompt a visit to the home to ensure the safety of the child, are designed to connect the family to various services (anger management, drug treatment, counseling, or parenting assistance), and identify factors that may place the child at risk of future abuse and neglect.

Non-CA/N report classification

Non-CA/N reports are reports that do not meet the legal definition of child abuse or neglect, and can be classified into 1 of 3 categories.

- 1. A non-CA/N referral is classified as one of the following types of referrals:
 - Preventive Service Referral A referral to a local service provider for intervention with the family.
 - Newborn Crisis Assessment Medical professionals report concerns about the health and safety of newborns (up to the age of one year), either because of drug exposure or the caregiver is unable to meet the needs of the infant.
 - Non-Caretaker Referral A referral to local law enforcement or the juvenile office for situations in which a child has been abused by someone who does not have care, custody, and control of the child.
 - Non-CA/N Fatality Referral A report of the death of a child when no child abuse or neglect is alleged.
- 2. Documented calls are calls that do not meet the criteria for a CA/N report or a non-CA/N referral. These include concerns relating to children who are 18 and older, reports with insufficient information to locate the family, reports of children who are located out of the state and the reporter is not a Missouri mandated reporter, and reports in which the allegations do not meet the legal definition of child abuse or neglect.
- 3. Other calls are calls in which the caller makes no attempt to report child abuse or neglect and gives no information leading to a maltreatment type. These calls include instances when the caller called the wrong number, requests the phone number to a local county DSS-CD office, requests to speak with local county DSS-CD personnel or other CA/N Hotline Unit



personnel, or an approved caller requests a prior check on a specific perpetrator, child, or case.

Online reporting

In November 2016, the CA/N Hotline Unit increased access for mandated reporters by opening an online reporting site⁸ to be used for making a non-emergency report if the mandated reporter has determined the child is not in imminent danger. The reporter is prompted to answer a series of questions designed to determine if the report should be considered an emergency and thus require a phone call to the CA/N Hotline Unit.

Consulting group's operational review and assessment

The department contracted with a consulting group in June 2017 to review the CA/N Hotline Unit's business processes and the current technology utilized in order to recommend both programmatic and technological improvements. The department determined this review was necessary based on various internal and external concerns regarding hotline operations. The primary internal concerns were the outdated technology used (i.e., the telephone system) and an inadequate number of staff to handle the increasing number of reports. The primary external concern was that reporters were experiencing increasing wait times and could not always contact the hotline promptly.

The consulting group reviewed the procedures handbook, pathway protocols, training documents and exercises, staffing and scheduling, and hotline statistics. The consulting group's recommendations addressed the SDM protocol, staffing levels, training, peer reviews of records, data and reporting, and technological improvements. A cost analysis was completed of each of the viable technology solutions to assess feasibility.

During the course of our audit, we followed up on these recommendations to determine if the issues had been addressed. We noted that the CA/N Hotline Unit had either implemented or was in the process of implementing most recommendations.

Scope and Methodology

To gain an understanding of the CA/N Hotline Unit, we reviewed the unit's written policies and procedures and other pertinent documents, including the final report of a recent CA/N Hotline Unit assessment performed by a consulting group and issued in October 2017; observed live operations of the primary CA/N Hotline Unit office located in Jefferson City, Missouri; tested a selection of 120 phone calls and online reports in all 4 categories (CA/N, non-CA/N referral, documented, and other) to ensure personnel were following the designated SDM protocols and classifying reports as a CA/N report or a non-CA/N report in accordance with state law; and interviewed various personnel of the unit.

⁸ https://apps.dss.mo.gov/OnlineCanReporting/default.aspx, accessed on August 13, 2018.



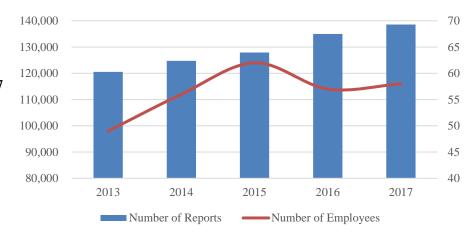
We obtained an understanding of the internal controls that are significant within the context of the audit objectives and assessed whether such controls have been properly designed and placed in operation. We obtained an understanding of legal provisions that are significant with the context of the audit objectives, and we assessed the risk that illegal acts, including fraud, and violations of applicable contract, grant agreement, or other legal provisions could occur. Based on that risk assessment, we designed and performed procedures to provide reasonable assurance of detecting instances of noncompliance significant to those provisions.

Child Abuse and Neglect Hotline Unit Management Advisory Report State Auditor's Finding

Staffing Levels and Performance

The Child Abuse and Neglect (CA/N) Hotline Unit does not have sufficient staffing to handle the increasing volume of reports, which has led to increased wait times and/or reporters having to call back multiple times. Consequently, the CA/N Hotline Unit may not accept and classify reports timely, which may potentially put some abused and/or neglected children at a higher risk of not receiving timely and critical assistance and protection. During the fiscal year ended June 30, 2017, the CA/N Hotline Unit accepted 138,582 reports (calls and online reports), and had 58 employees as of June 2017.

Figure 1: Total number of reports taken by the CA/N Hotline Unit and number of staff, fiscal years 2013-2017



Source: CA/N Hotline Unit records and organizational charts⁹

As illustrated in Figure 1, the number of reports received since fiscal year 2013 has increased by an average of about 4,500 reports annually (4 percent increase). As previously noted, the continuing increase in the number of reports is at least partially a result of the General Assembly revising state law in 2013 that increased reporting requirements for mandated reporters.

Number of staff and staffing requirements

As illustrated in Figure 1, staffing levels have declined since 2015 and have not kept pace with the growing number of reports. Total staffing gradually increased from 49 in fiscal year 2013 to 62 in fiscal year 2015, but then fell to 57 in fiscal year 2016 and remained almost static (58) for fiscal year 2017.

The 58 employees reported for fiscal year 2017 consisted of 1 unit manager, 6 supervisors, 1 trainer, 40 full-time Children's Service Workers (CSWs), and 10 part-time/hourly CSWs. All 58 employees can take phone calls; however, generally the CA/N Hotline Unit has between 2 and 22 CSWs answering calls at any given time. All employees must have at least a bachelor's degree in social work or a related field; this is the same requirement as county DSS-CD field personnel. Management indicated there has traditionally been a high

⁹ The organizational charts provided by management were the last available charts prepared for each fiscal year. Some charts were prepared in May and others were prepared in June.



Child Abuse and Neglect Hotline Unit Management Advisory Report - State Auditor's Findings

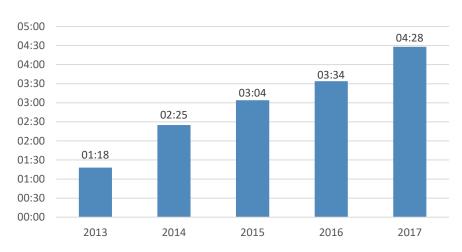
level of employee turnover in the CA/N Hotline Unit due to various factors including low salaries and the nature of the position.

To handle the call volume and meet standard minimum service levels, ¹⁰ the consulting group hired by the agency to review the CA/N Hotline Unit's business processes and the current technology recommended the unit hire an additional 14 to 20 employees. CA/N Hotline Unit management also indicated the hotline unit had been understaffed in previous years. During fiscal year 2018, the unit increased staffing levels by 7 employees, to a total of 65 employees. The 7 new employees consisted of 4 full-time employees (1 supervisor and 3 CSWs) and 3 part-time/hourly CSWs. In conjunction with the new hires, the CA/N Hotline Unit created several new positions that included a specialist (collects and analyzes data including call/report volume and type, employee attendance, and wait times in order to project staffing needs), an additional trainer, and three additional supervisors. In addition, the hotline opened a new field office in Springfield, Missouri.

Hotline wait times have increased

According to DSS records, the average CA/N hotline wait time has increased by approximately 47 seconds per year (a 39 percent increase) from 2013 to 2017. From fiscal year 2013 to fiscal year 2017, the average wait time of a reporter has more than tripled from 1 minute, 18 seconds to 4 minutes, 28 seconds.

Figure 2: Average CA/N Hotline Unit call center wait times, in minutes, fiscal years 2013-2017



Source: CA/N Hotline Unit records.

As illustrated in Figure 2, reporters have been experiencing a significant increase in wait times over the last five years.

¹⁰ Service level measures the percentage of incoming calls that are answered within an established amount of time. The consulting group's analysis is based on a minimum service level of 95 percent, though it acknowledged an industry standard for this type of call center is hard to estimate.



Management efforts to improve wait times

Child Abuse and Neglect Hotline Unit Management Advisory Report - State Auditor's Findings

DSS management has made various efforts to improve wait times. In an effort to increase hotline access for mandated reporters and reduce the wait time for other callers, the CA/N Hotline Unit implemented an online reporting system during fiscal year 2017. During the first year of implementation the CA/N Hotline Unit received 6,614 online reports (included in the total of 138,582 reports received that year). Personnel indicated online reports take approximately half the amount of time to process as compared to phone calls, and they project the number of online reports will continue to increase as awareness of this option increases. In addition, a single telephone platform (system) was installed statewide. Prior to this implementation, central office staff had to manually route calls to the other field office (located in Kansas City, Missouri) as needed because the offices had different phone systems. As a result, this implementation has freed up staff to answer more calls and operate more efficiently. In addition, based on the volume and timing of reports, management has increased staffing levels during peak times, which include day and evening hours Monday through Friday.

Failure to establish performance goals or expected levels of performance Although the CA/N Hotline Unit is actively monitoring some performance measures, it has not developed and monitored formal and quantifiable operational performance goals or expected levels of performance and, as a result, is unable to compare actual operational performance to expected or desired operational performance.

The consulting group recommended the CA/N Hotline Unit gather and apply historical data; develop and implement data-driven, standardized, performance expectations and service levels; and train leadership, supervisors, and staff in reporting tools and measures. In response to the consulting group's recommendations, the department purchased a workforce management software (WFM) system that collects and analyzes data including call/report volume and type, employee attendance, and wait times in order to project staffing needs. The department implemented this system in May 2018, and, as recommended by the consulting group, is tracking certain call center metrics including the average call handling time, service level, average speed of answering calls, and specific times that employees are available to take calls. This information is used to determine staffing schedules based on projected call volume, and to alert management of the need for corrective action for employees who are not adhering to their assigned schedule or are unable to handle the expected number of calls per day. While management previously tracked certain individual performance measures for the purpose of evaluating employees, no individual or unit-wide performance goals or expectations have been established under the new management system. Officials indicated they are waiting until the new WFM system collects a full year of data before establishing new performance goals.



Child Abuse and Neglect Hotline Unit
Management Advisory Report - State Auditor's Findings

According to Government Finance Officers Association (GFOA) guidance, ¹¹ goals should be specific, measurable, attainable, results-oriented, and time-limited. A specific goal is one that considers what is to be accomplished, why the goal is important, who is involved, and what are the resource requirements and constraints. For example, a goal for the CA/N Hotline Unit might be to reduce the average wait time for calls by 50 percent over the next year, or below a specific time, which is an outcome that is both measurable and specific and would allow the department to track progress toward meeting the specified goal. The establishment of reasonable performance goals or expected levels of performance for both the hotline as a whole and individual staff will allow CA/N management to periodically measure current performance against expectations and make necessary adjustments.

Conclusion

Without adequate staffing levels, the CA/N Hotline Unit is less likely to achieve its mission of protecting children, including ensuring the safety and well-being of children, and is unable to provide a high customer service level that would be expected in other highly sensitive call centers. Increased staffing levels would allow the unit to provide employees with increased training opportunities, efficiently perform quality control reviews of reports, ensure each work shift is adequately staffed, and reduce wait times.

The department has made significant efforts to improve performance, including a new telephone system, an online reporting system, and increased staffing levels from fiscal year 2017 to 2018. However, the CA/N Hotline Unit should continue to increase staffing levels to address the increasing number of child abuse and neglect reports as noted in Figure 1. In addition, increased staffing levels will help to reduce the average wait time for reporters and should provide a quicker response time to reports of potential child abuse or neglect.

The use of reasonable performance goals or expected levels of performance would help management ensure the CA/N Hotline Unit is performing in an efficient and effective manner and alert management to problem areas.

Recommendation

The DSS-CD, through the CA/N Hotline Unit, continue to explore opportunities to increase staffing levels. In addition, management should establish performance goals and monitor the unit's performance in an ongoing manner to ensure the goals, objectives, and mission of the unit are met.

Auditee's Response

The DSS-CD's written response is included in the Appendix.

¹¹ S.M.A.R.T. Goals, Government Finance Officers Association, 2018, https://gfoa.org/smart-goals, accessed on October 10, 2018.



Appendix Child Abuse and Neglect Hotline Unit Department of Social Services Response



MICHAEL L. PARSON, GOVERNOR • STEVE CORSI, Psy.D., DIRECTOR

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November 15, 2018

Honorable Nicole R. Galloway, CPA Missouri State Auditor P.O. Box 869 Jefferson City, MO 65102

Dear State Auditor Galloway:

Please find below the Department of Social Services' (DSS) response to the recommendation from the audit of the Child Abuse and Neglect Hotline Unit.

Staffing Levels and Performance Audit Recommendation:

The DSS-CD, through the CA/N Hotline Unit, continue to explore opportunities to increase staffing levels. In addition, management should establish performance goals and monitor the unit's performance in an ongoing manner to ensure the goals, objectives, and mission of the unit are met.

DSS Response:

The DSS continues to explore opportunities to increase the Child Abuse and Neglect Hotline Unit (CANHU) performance. This includes ensuring the unit remains fully staffed and all vacancies are filled timely. Options to 1) increase the use of online reporting in appropriate situations; 2) make changes to structured decision making to make the call experience more efficient, and 3) allocate existing staff based on call data are all potential opportunities to increase unit performance without adding staff.

Additionally, the DSS will continue to enhance performance monitoring and reporting to measure the expectations of Children's Service Workers answering and correctly classifying concerns of child abuse and neglect. These goals will balance both the quality and quantity of calls with DSS' efforts to answer timely all calls made to the CANHU and provide exceptional customer service. The DSS strives to provide reporters a quick and efficient reporting process; however, DSS recognizes and promotes emergency calls to be handled by calling 9-1-1.



Appendix Child Abuse and Neglect Hotline Unit Department of Social Services Response

There are CANHU performance goals established. These measures were provided to the SAO audit team. DSS is in the process of reevaluating the performance goals based on new technology implemented earlier this year. Performance goals surrounding the quantity of calls will be set based on data received through the Workforce Management System (WFM). The WFM builds upon call trends to forecast staffing levels. Data will be available in the spring of 2019 when the WFM will have been in operation for one (1) year. The WFM data will allow the DSS to confidently set accurate and relevant goals.

Thank you for allowing the DSS the opportunity to prepare and submit this response.

Sincerely,

/s/

Steve Corsi, Psy. D Director