Recognize

CENTER FOR SAFE AND STABLE FUTURES

At its core, this is about a simple truth: a system cannot protect what it cannot see.

Summary

Strengthening our responses to child abuse and neglect requires both better use of data to detect risk and better tools to interpret information. Predictive risk modeling can help surface high-risk cases and support more accurate, consistent screening decisions. At the same time, retaining referral and investigative records for internal use ensures that patterns of concern are visible when future reports are made.

Together, adopting predictive risk modeling tools and reforming expungement laws give the system a clearer line of sight. They do not replace professional judgment—they reinforce it. By equipping frontline staff with more complete information and stronger decision-support tools, states can act earlier, prioritize effectively, and better protect children from harm. When agencies expunge data, they destroy information that is needed to protect children and they avoid accountability.

These tools generate risk scores or alerts that help:

- **Identify** children and families with repeated or escalating concerns
- **Prioritize** reports more accurately based on safety and risk
- **Surface** information that may not be immediately visible during intake
- **Support** consistent, systematic decision-making across staff

Results

-23%

Near fatalities and fatalities

-20%

Re-referrals, indicating fewer repeat concerns

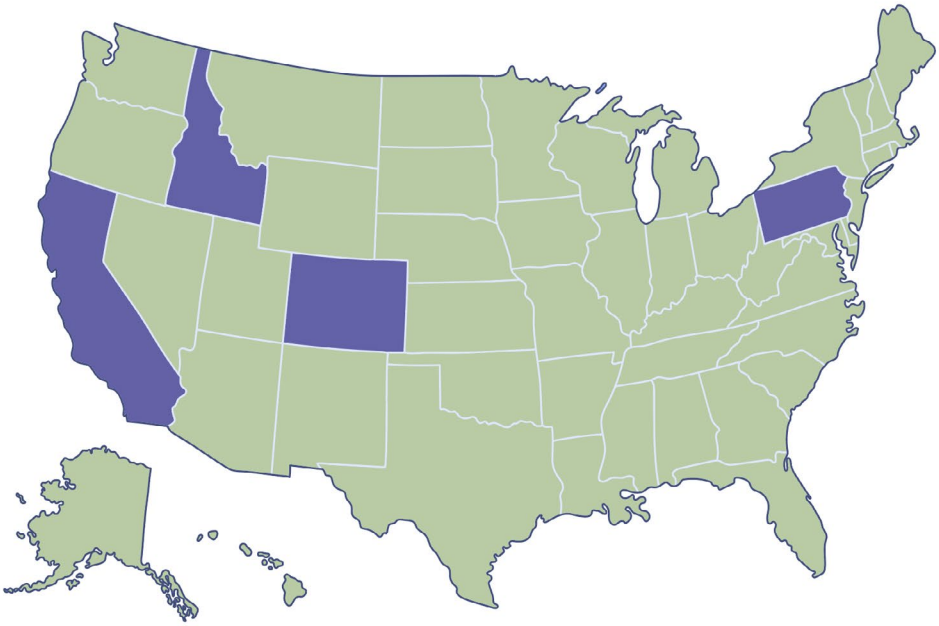
Increased

- ↑ Consistency in responses
- ↑ Contacts, visits, and consultations

Decreased

- ↓ Racial disparities
- ↓ Injuries
- ↓ Future system involvement

Jurisdictions leading in predictive risk modeling



Allegheny County, Pennsylvania

In 2016, Allegheny County launched the Allegheny Family Screening Tool (AFST), the first predictive risk model implemented in public child welfare. The tool uses historical child welfare and cross-system data to support hotline screening decisions, with independent evaluations showing improved identification of high-risk cases, reductions in unnecessary investigations of low-risk families, and decreased disparities in decision-making.

Northampton County, Pennsylvania

Northampton County launched the Northampton Decision Aid Tool (NDAT) to support child welfare hotline screening and quality assurance decisions using predictive analytics derived from the county's existing child welfare data system. The tool is designed to help supervisors and caseworkers identify higher-risk referrals, reduce unnecessary investigations of lower-risk families, improve consistency in screening decisions, and strengthen resource allocation while maintaining human-led decision-making and public transparency.

Arapahoe, Douglas, and Larimer Counties, Colorado

Colorado counties have implemented predictive risk models that support decision-making across the continuum of child welfare involvement, including hotline screening, assessments, in-home services, and foster care oversight. Independent evaluations found the models improved child safety outcomes, reduced decision-making time, enhanced supervisory oversight, and reduced disparities while maintaining human-led clinical judgment.

Idaho (Statewide)

Following implementation of a new case management system, Idaho deployed a statewide predictive risk model to support centralized intake and investigative supervision. The model helps supervisors identify high-risk referrals requiring immediate attention while diverting lower-risk cases to alternative service pathways, improving consistency, workload management, and alignment of investigative resources with predicted safety risk.

Los Angeles County, California

Los Angeles County launched a predictive risk modeling pilot in 2021 to strengthen supervisory oversight of child maltreatment investigations. Rather than directing case decisions, the model provides supervisors with earlier access to relevant case history and risk indicators, with pilot results showing improvements in child safety outcomes, increased case consultation activity, reductions in re-reports, and no increase in foster care placements or disparities.