OREGON CHILD ABUSE HOTLINE
QUARTERLY REPORT 2023
FOURTH QUARTER

TABLE OF CONTENTS

ORCAH Performance Goals and Key Performance Indicators

ORCAH's three foundational goals are safety, consistency, and customer service.

Safety refers to the extent to which ORCAH is contributing to the Child Welfare mission of ensuring child safety in a manner that promotes equitable service delivery.

Consistency refers to ORCAH's ability to provide consistent, equitable decision making that aligns with statute and policy, as well as call handling and documentation that is predictable.

Customer service refers to meeting the needs of the children and families of Oregon by answering calls timely with an approach to the work that is trauma-informed and considers cultural context.

Key performance indicators are measurable values that demonstrates how effectively an organization is meeting its performance goals. ORCAH's key performance measures are:

- Contact service level
- Timely referral to Child Protective Services (CPS) of assigned reports
- Timely approval of closed at screening (CAS) reports
- Accurate screening decisions
- Sufficient information gathering/documentation
- Consistent screening decisions
- Equity in screening practice and decisions

Contact Volume

Contact volume refers to the number of calls and cross reported law enforcement reports ORCAH receives. ORCAH has seven queues for incoming calls and police cross-reports; Law Enforcement calls (LEA), Medical Providers (MP), Mandatory Reporters (MR), General Public (GP), Spanish Language (SP), Reception (RQ) and Police Reports (PR).

ORCAH contacts increase during Spring and Fall months and decrease during Summer and Winter school breaks. School employees are the most frequent reporter type, leading contact levels to ebb and flow in relation to the school calendar.
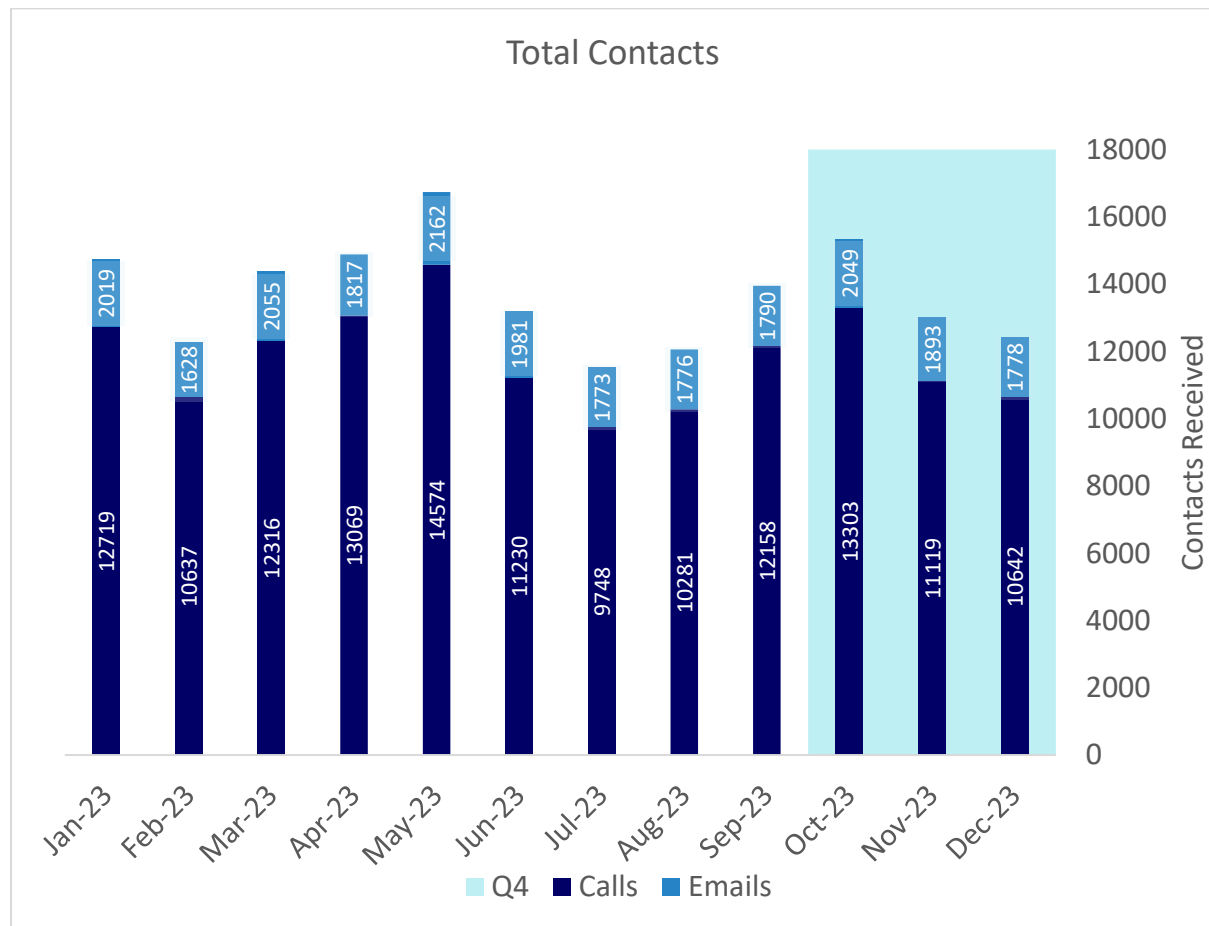
Wait Times, Service Levels and Abandonment

Abandonment rate refers to the number of calls that drop before answered by ORCAH and service level refers to the percent of the time that ORCAH answers calls within 4 minutes.

Call Volume and % Calls Abandoned

Call Volume and % Calls Answered in Under 4 Minutes
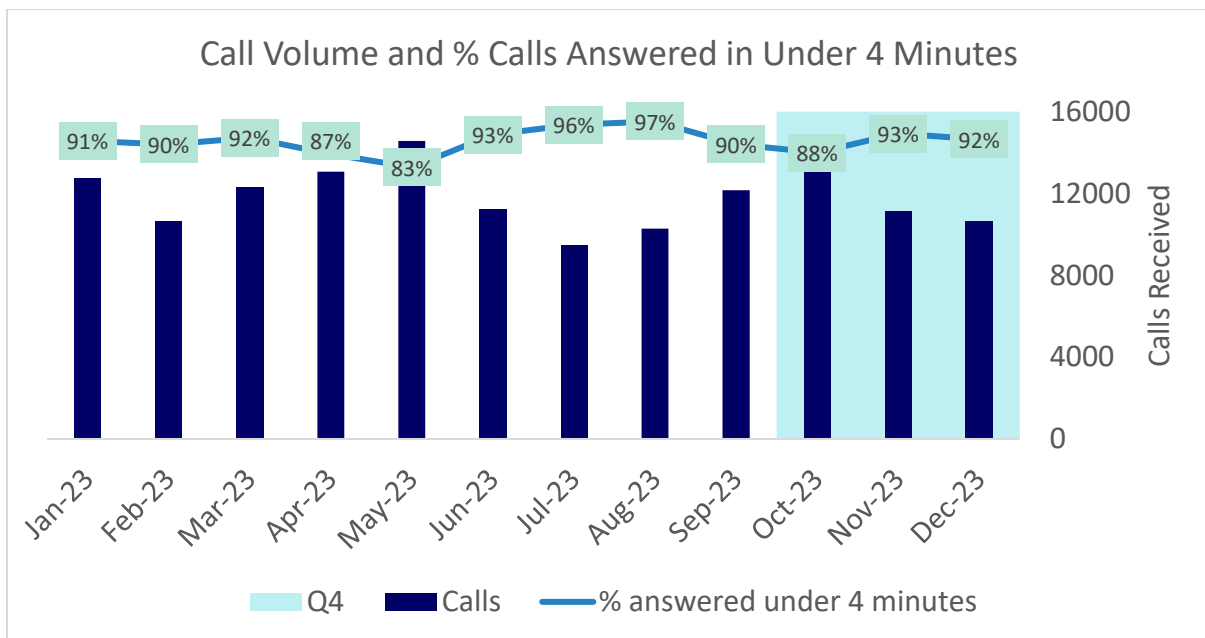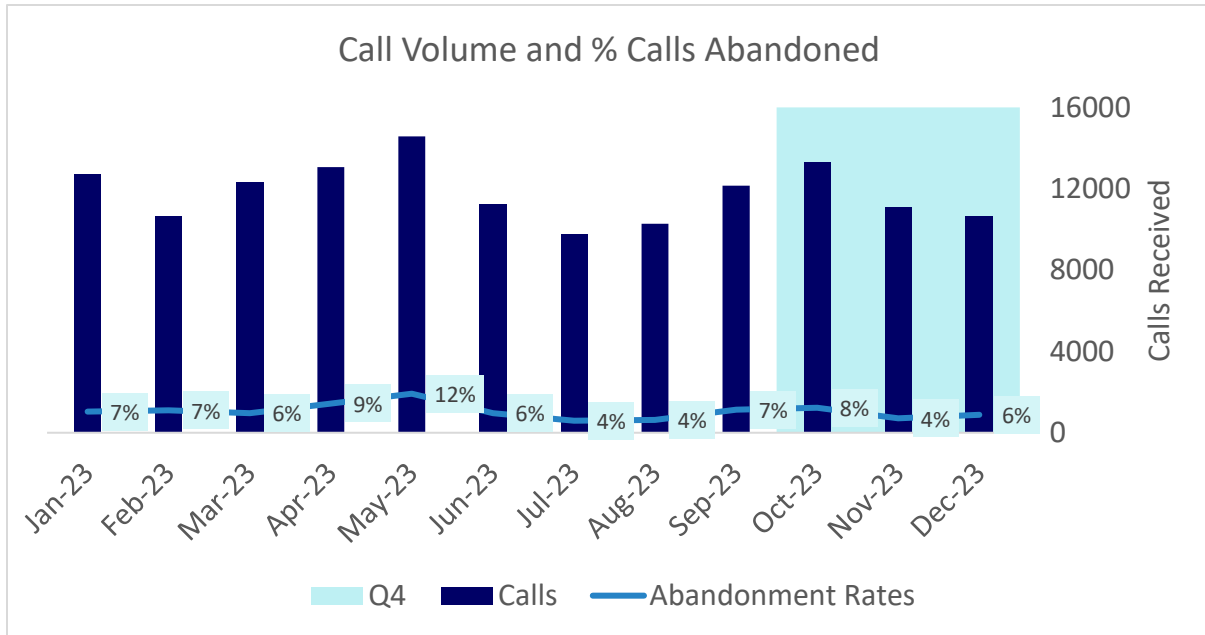
The abandonment rate and average wait times increased in Q4 compared with Q3. However, over 90% of callers had their calls answered in under four minutes.

Additionally, the abandonment rate and average wait times were lower in Q4 than in Q2.

Average Call Wait Times (in Minutes) by Queue Type
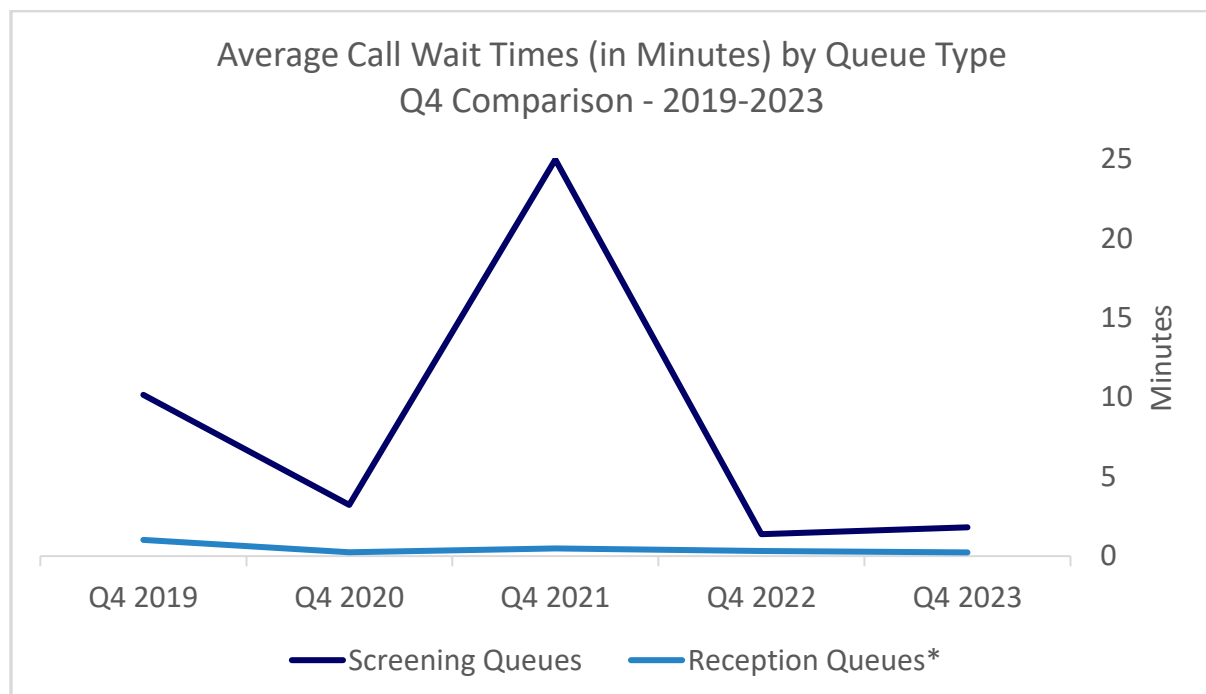
Q4 ▪ Screening Queues ▪ Reception Queues
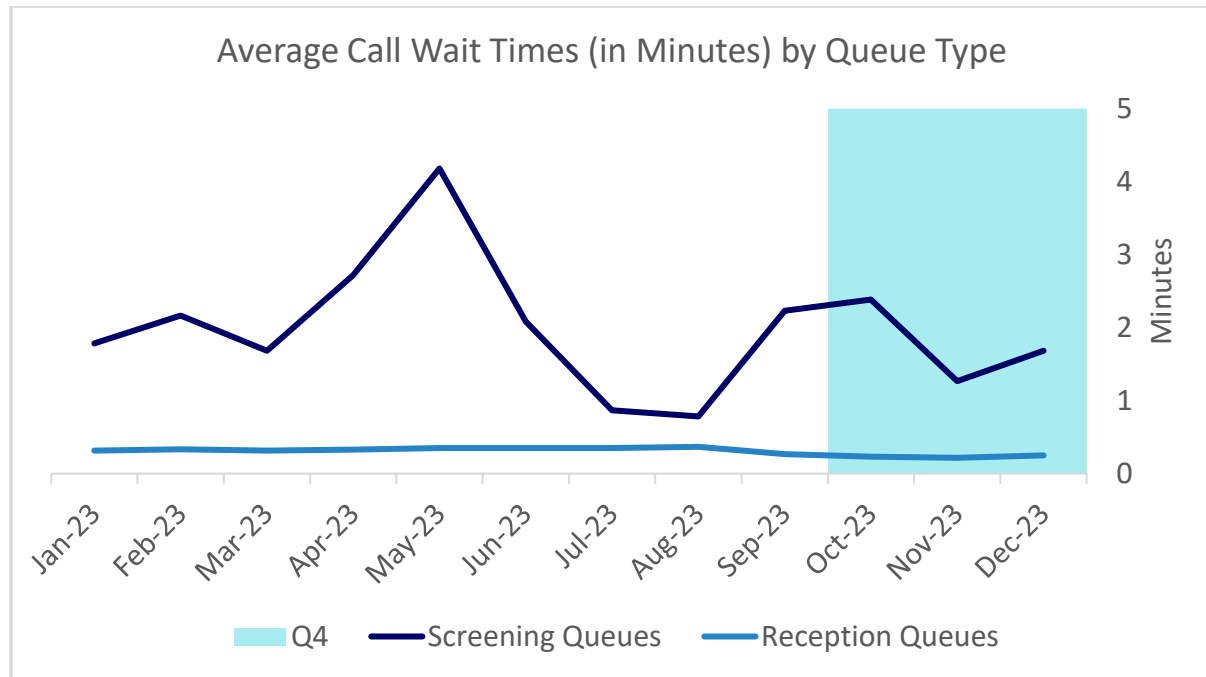
Screening queues include GP, LEA, MP, MR and SP. Reception queues include RQ and a queue for connecting callers in a screening queue to the reception staff. Average call wait times were well below the service level goal for Screener queue calls for all three months in quarter 4.

Average Call Wait Times (in Minutes) by Queue Type
Q4 Comparison - 2019-2023

Screening Queues ▪ Reception Queues*

Calls Answered within Specific Intervals (in minutes) - Q4 Comparison 2019-2023
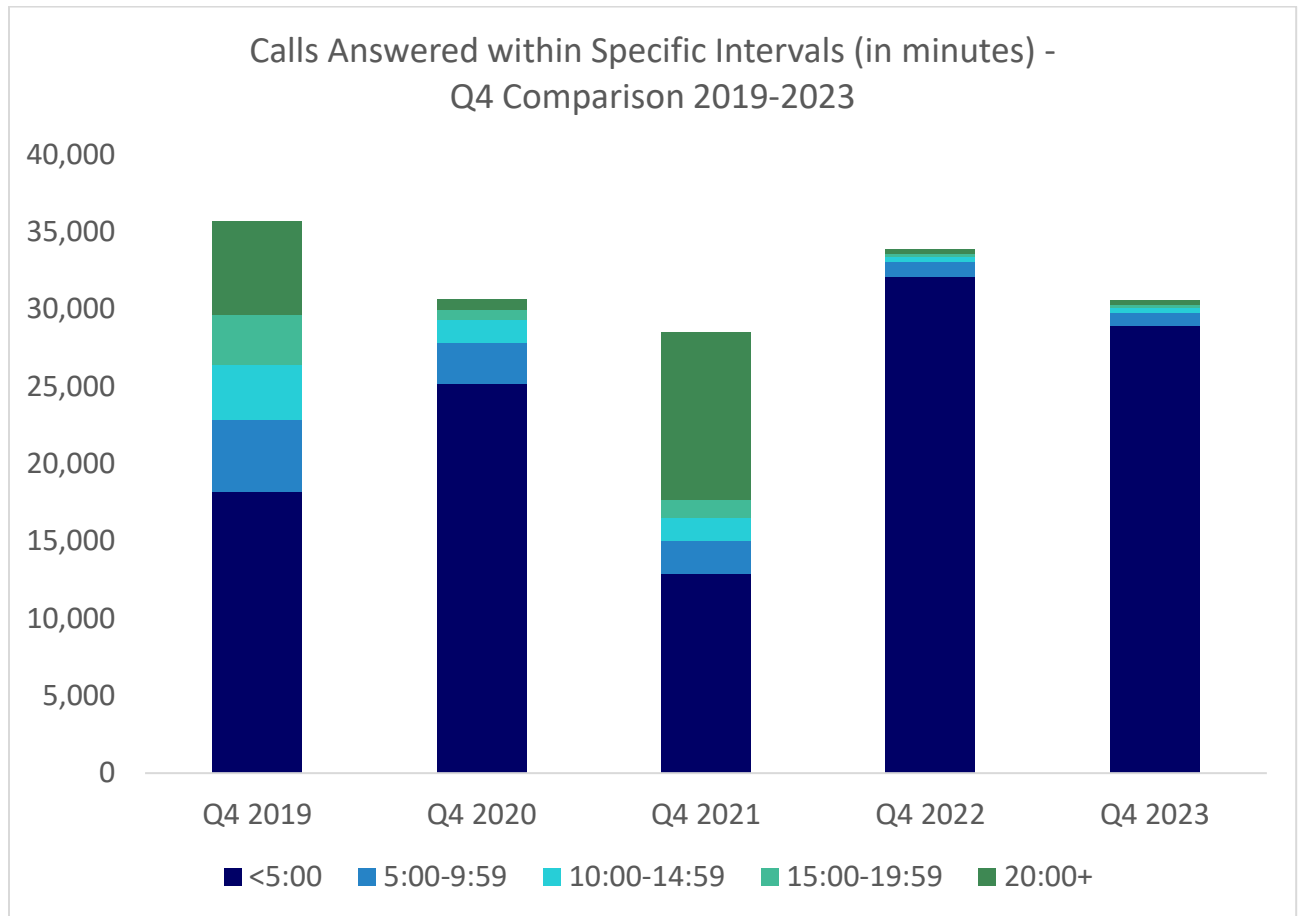
As with the average wait times, the percentage of calls answered in longer intervals fell dramatically in 2022 and remained low in 2023, when comparing the fourth quarters of the past five years.

Screening Reports and Assignment Rates

When a contact includes information that is either a report of abuse or describes conditions, circumstances and/or behaviors that could place a child at risk (close at screening), screeners document the contact in a Screening Report. The rate of assignment refers to the percentage of Screening Reports that were deemed to meet criteria to assign.

Assignment Rate of Documented OR-Kids Screening Reports
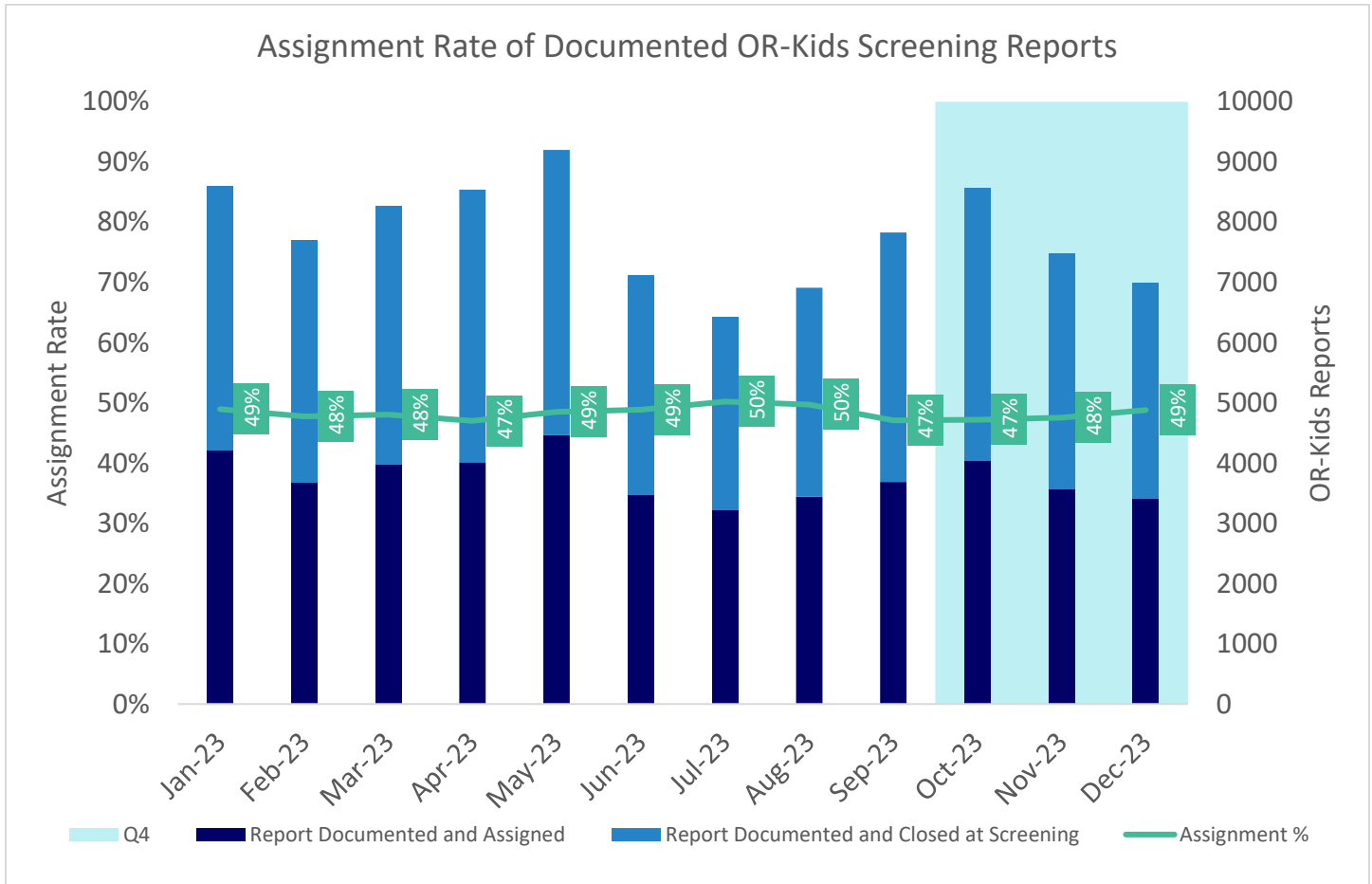
The trend of assignment rates is inversely related to the increase in contact volume, with slightly higher assignment rates during the summer months and December (times that school is not in session). This trend was consistent throughout the first five years ORCAH was fully centralized. The assignment rate of documented reports has remained at or slightly below 50% for all four quarters of 2023. This appears to correspond to a decrease in report assignment rate since the implementation of the Screening Decision Making tool in August 2022.

Timeliness of Screening Decisions

Closed at Screening

Rule requires that Closed at Screening reports be completed and approved by a supervisor within 10 days of the receipt of the information. However, completing these reports once the decision is made to close is prioritized after answering the calls and assigning to CPS.

Timeliness of Screening Decisions - Closed at Screening

Month	Within 10 Days	Over 10 Days
Jan-23	3531	857
Feb-23	2823	1228
Mar-23	2802	1497
Apr-23	3940	585
May-23	4455	284
Jun-23	3474	164
Jul-23	3082	11
Aug-23	3353	122
Sep-23	3962	180
Oct-23	4155	362
Nov-23	3732	186
Dec-23	3323	213

Legend: Q4 | Within 10 Days | Over 10 Days

Timeliness of Screening Decisions - Closed at Screening (CAS) - Q4 Comparison - 2019-2023

Quarter	% Closed Timely
Q4 2019	66%
Q4 2020	57%
Q4 2021	54%
Q4 2022	76%
Q4 2023	94%

Legend: Within 10 Days | Over 10 Days | % Closed Timely

The percentage of reports closed within 10 days was higher in the fourth quarter 2023 than any previous fourth quarter. The timely closure of closed at screening reports improved even while screeners documented, and screening supervisors reviewed, more reports compared to the fourth quarter of the previous four years.

Assigned for CPS Assessment

Screeners are required to make screening decisions within 10 hours unless granted an extension and to assign reports with a 24-hour response time "immediately". Though "immediately" is not defined, ORCAH's goal has remained aligned with the pre-centralization goal of assigning them within 3 hours of the receipt of the report. These graphs represent all assigned reports, regardless of response time.

Timeliness of Screening Decisions - Assigned Reports

Timeliness of Screening Decisions - Assigned Reports-
Q4 Comparison - 2019-2023
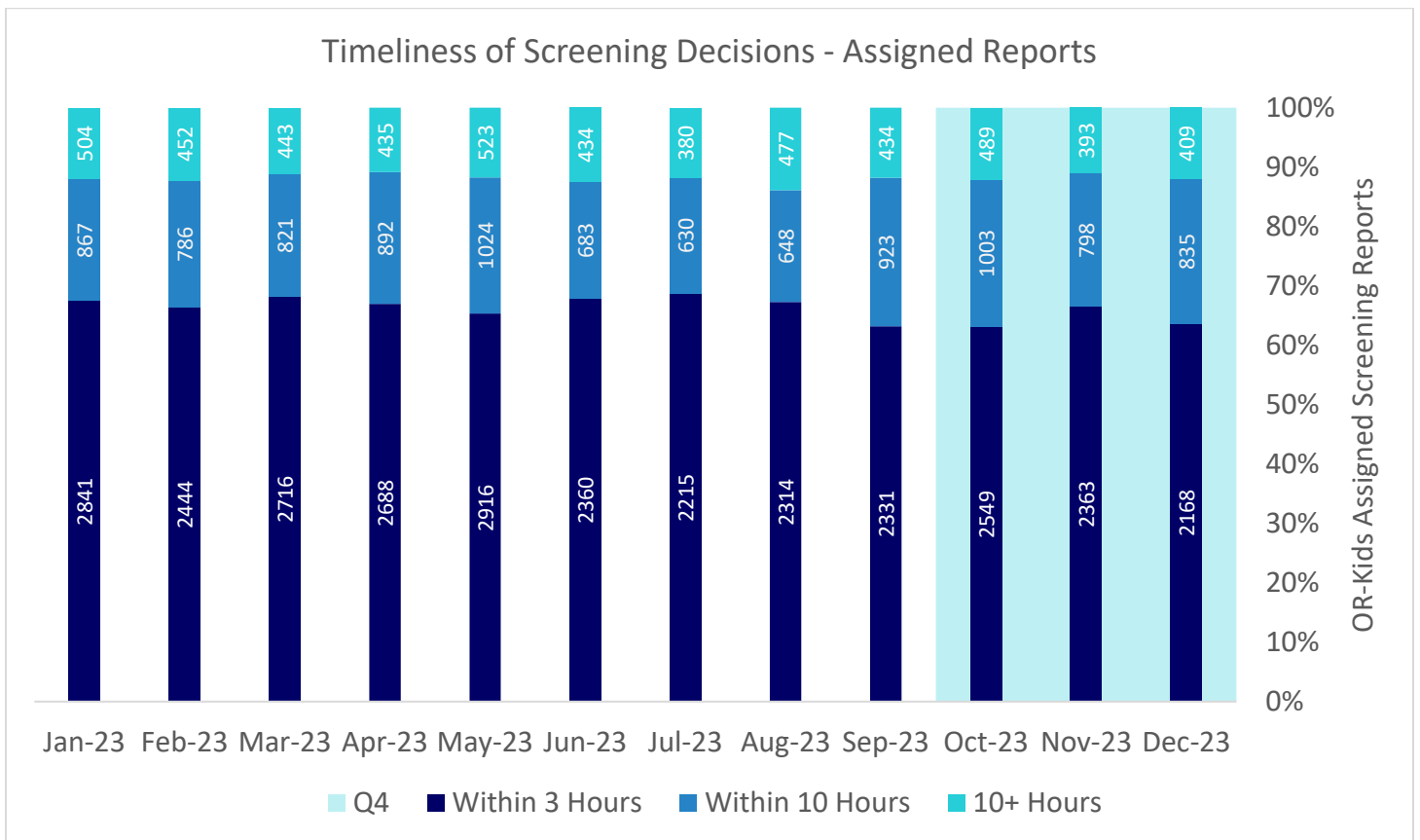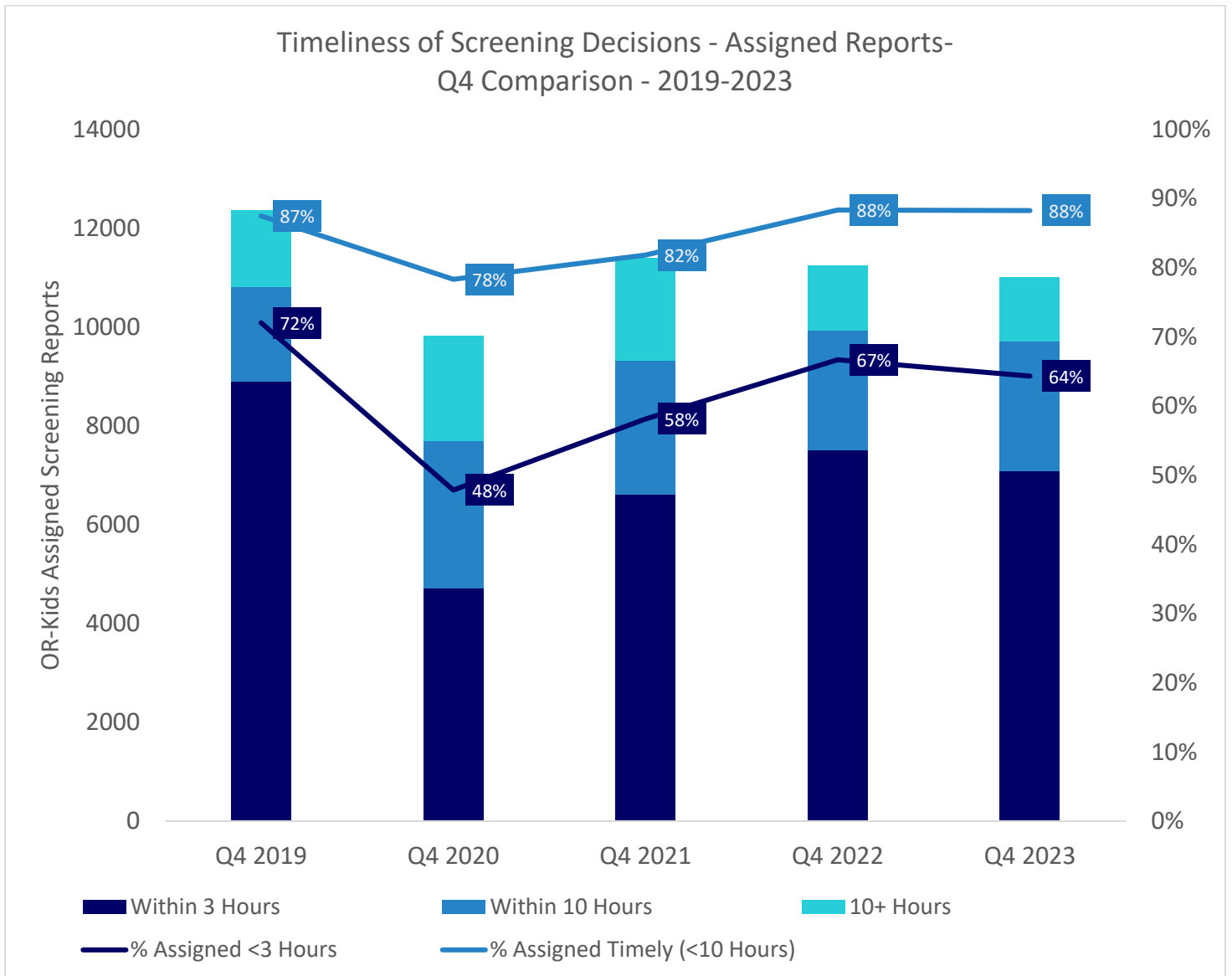
The percentage of reports assigned within 10 hours remained high during the fourth quarter. Almost two-thirds of reports were assigned within three hours during quarter 4. The number of assigned reports has slightly decreased during the fourth quarter over the past three years.
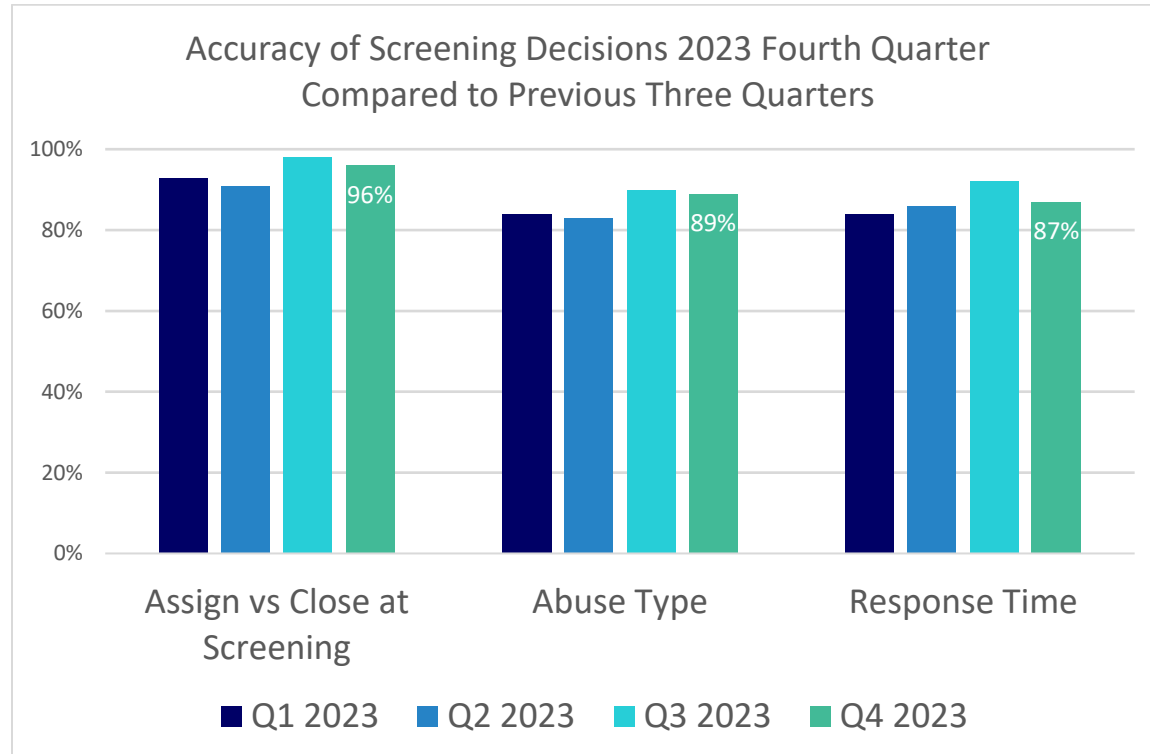
Quality Assurance

ORCAH CQI Program conducts quality assurance reviews of both screening reports and calls which provides data regarding ORCAH's performance in accuracy of screening decisions, sufficient information gathering and documentation, and equity in screening practice.

In the fourth Quarter of 2023, **404** reports and **695** calls were reviewed.

Accuracy

Quality assurance reviews of screening reports provides information regarding accuracy of screening decisions. The review measures include the extent to which ORCAH is making the three primary screening decisions according to rule and procedure:

- Whether to assign or close a report
- What type of abuse is being reported and assigned
- What is the response time for Child Protective Services to make initial contact.

Sufficiency

Quality assurance reviews of screening reports provides information regarding sufficient information *documentation* and history review. Screeners document information across two domains: Extent of the alleged abuse and Circumstances surrounding the alleged abuse. Each of these domains includes multiple types of information that need to be gathered and documented to be considered sufficient.

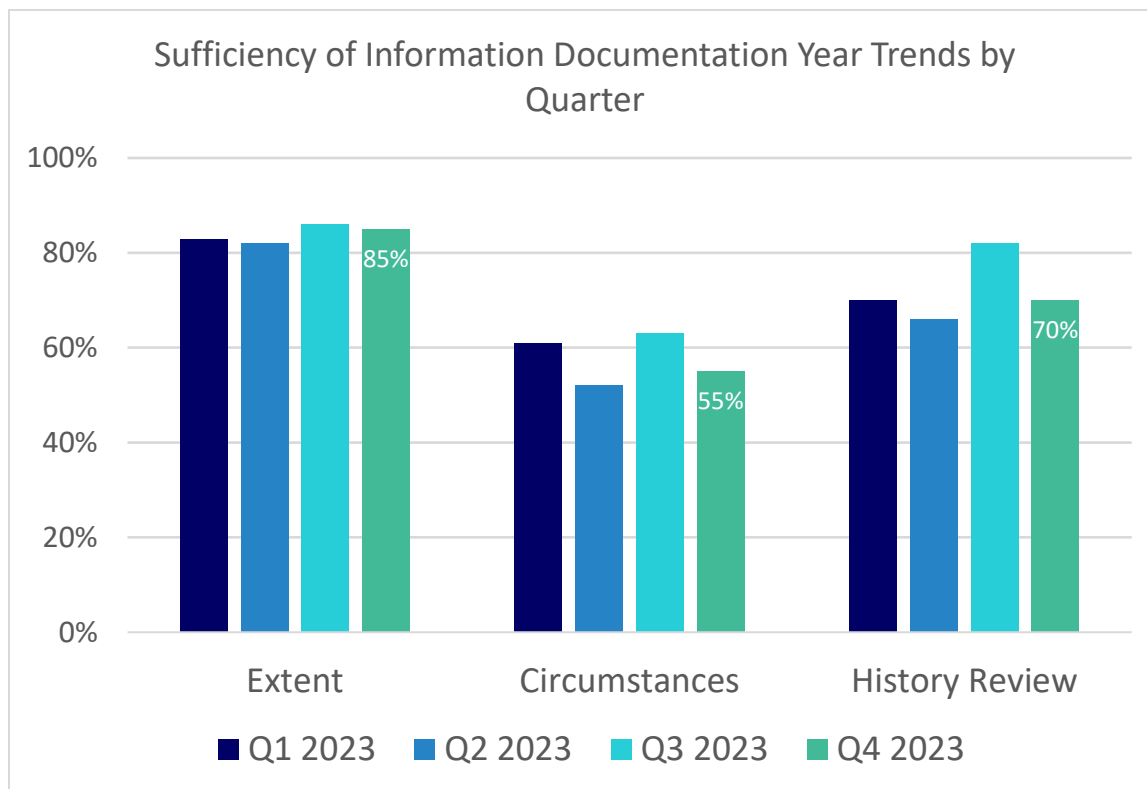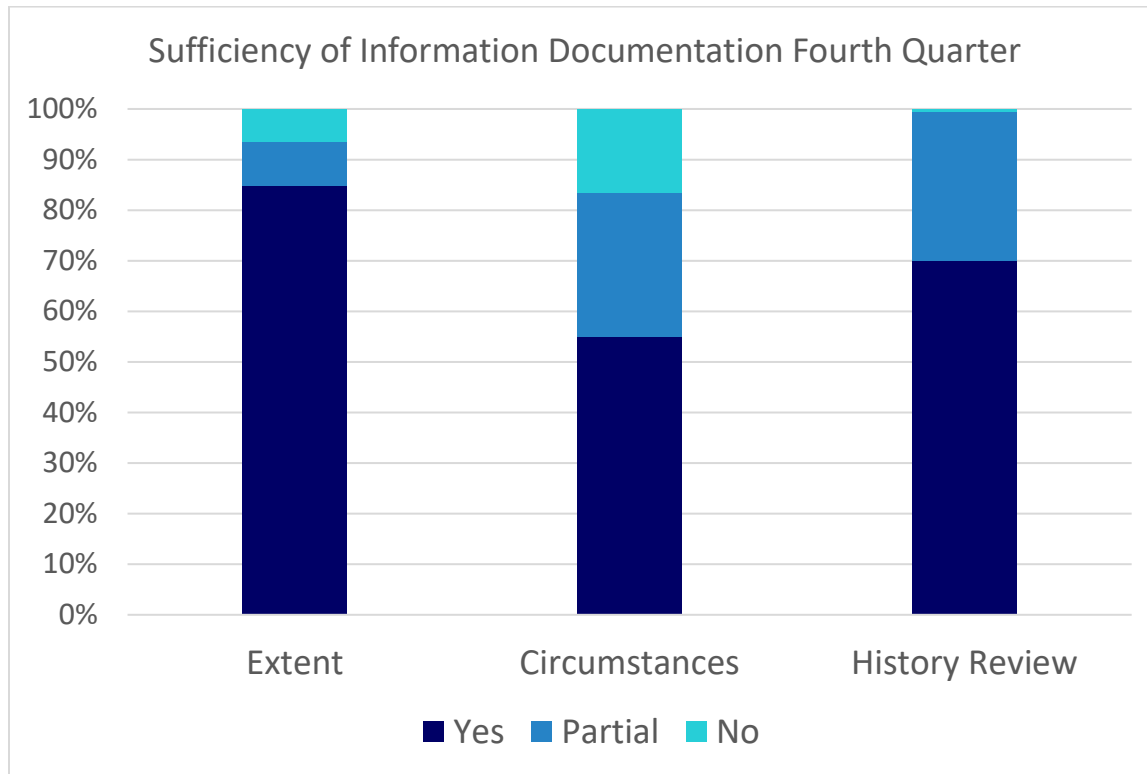Extent of alleged abuse includes:

- The alleged victims and alleged perpetrators

- The abuse allegation being reported

- Where the alleged abuse occurred

- When the alleged abuse occurred

- The impact to the child/ren

Circumstances surrounding the alleged abuse includes:

- Any information associated with what is being reported

- Progress, patterns, and duration of the events

- Parent/caregiver behavior associated with the alleged abuse

- Any known/anticipated response of parent/caregiver to the alleged abuse

- Reporter's indication of probable explanation for the alleged abuse

- Vulnerability of the children

Screeners review relevant child welfare history to determine if the report has been made/assessed already and to apply information learned regarding patterns of behavior to screening decisions.

A yes is given when the information documented is fully sufficient, a partial when some of the information is documented but not all needed information is, and a no when there is no information at all.

Sufficiency of Information Documentation Fourth Quarter

Sufficiency of Information Documentation Year Trends by Quarter

While the previous graph provided data regarding the breakdown of yes, partial, no responses, this one only captures the yes responses and includes the entire year.

Quality assurance reviews of calls provides information regarding sufficient information *gathering*. When listening to screener call-taking for the purpose of quality assurance, the extent to which the screener gathers the needed information is evaluated. If a reporter volunteers needed information without being asked, the measure is considered not applicable. The screener gathers information about the reported concern across the previously mentioned two domains: Extent of and circumstances surrounding the alleged abuse. They also gather information about the reporter regarding their demographics, motivation for making a report, source of information, and last contact with the child.
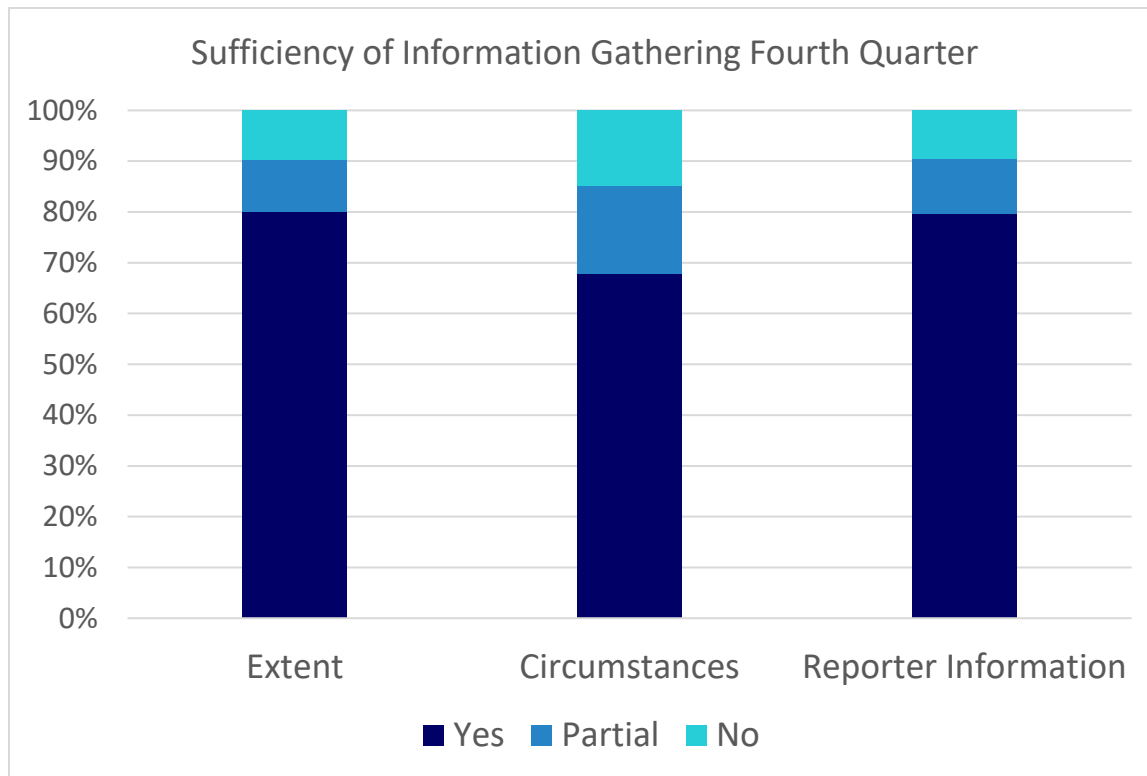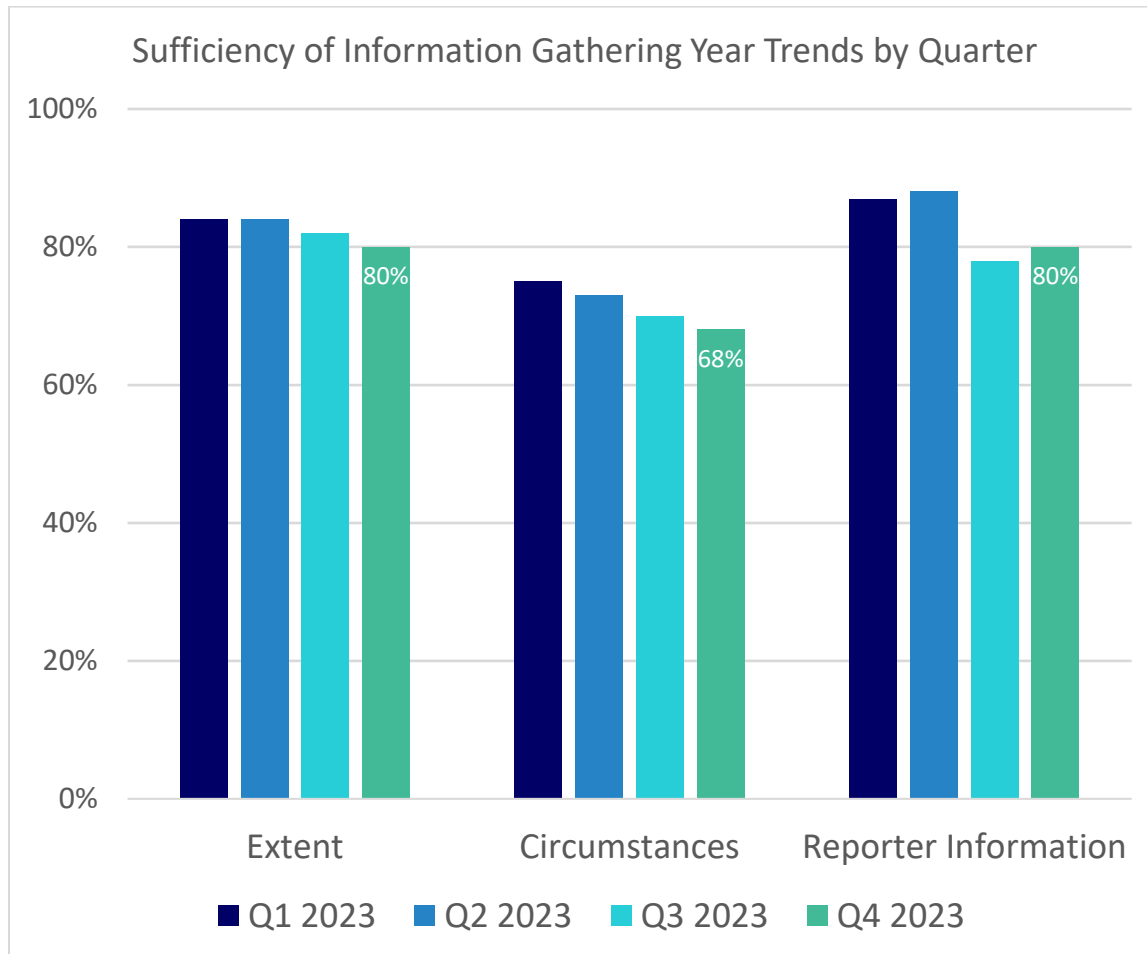
While the previous graph provided data regarding the breakdown of yes, partial, no responses, this one only captures the yes responses and includes the entire year.

Sufficiency of Information Gathering Year Trends by Quarter

Extent — Q1 2023: 84%, Q2 2023: 84%, Q3 2023: 82%, Q4 2023: 80%

Circumstances — Q1 2023: 75%, Q2 2023: 73%, Q3 2023: 70%, Q4 2023: 68%

Reporter Information — Q1 2023: 87%, Q2 2023: 88%, Q3 2023: 78%, Q4 2023: 80%

Legend: Q1 2023, Q2 2023, Q3 2023, Q4 2023

Consistent Screening Decisions

In order to determine whether the Structured Decision-Making tool that ORCAH uses to make screening decisions guides staff to make consistent and accurate screening decisions (the extent to which multiple staff evaluate the same report and come to the same decisions), ORCAH partnered with the Office of Research, Reporting, Analysis, and Implementation (ORRAI) to conduct Inter-rater Reliability testing in April of 2023 and again in October 2023. This consisted of providing all staff at ORCAH who make screening decisions (screeners, supervisors, program managers, trainers, CQI unit members) with vignettes to which to apply the SDM tool.

Percent to Which Consistent and Accurate Decisions Were Made

	Spring	Fall
Assign vs. CAS	85%	81%
24 Hour Response	79%	76%
72 Hour Response	59%	59%

Percent to Which Consistent and Accurate Decisions Were Made

■ Correctly Identified Allegation ■ Correctly Did NOT Identify Allegation

17
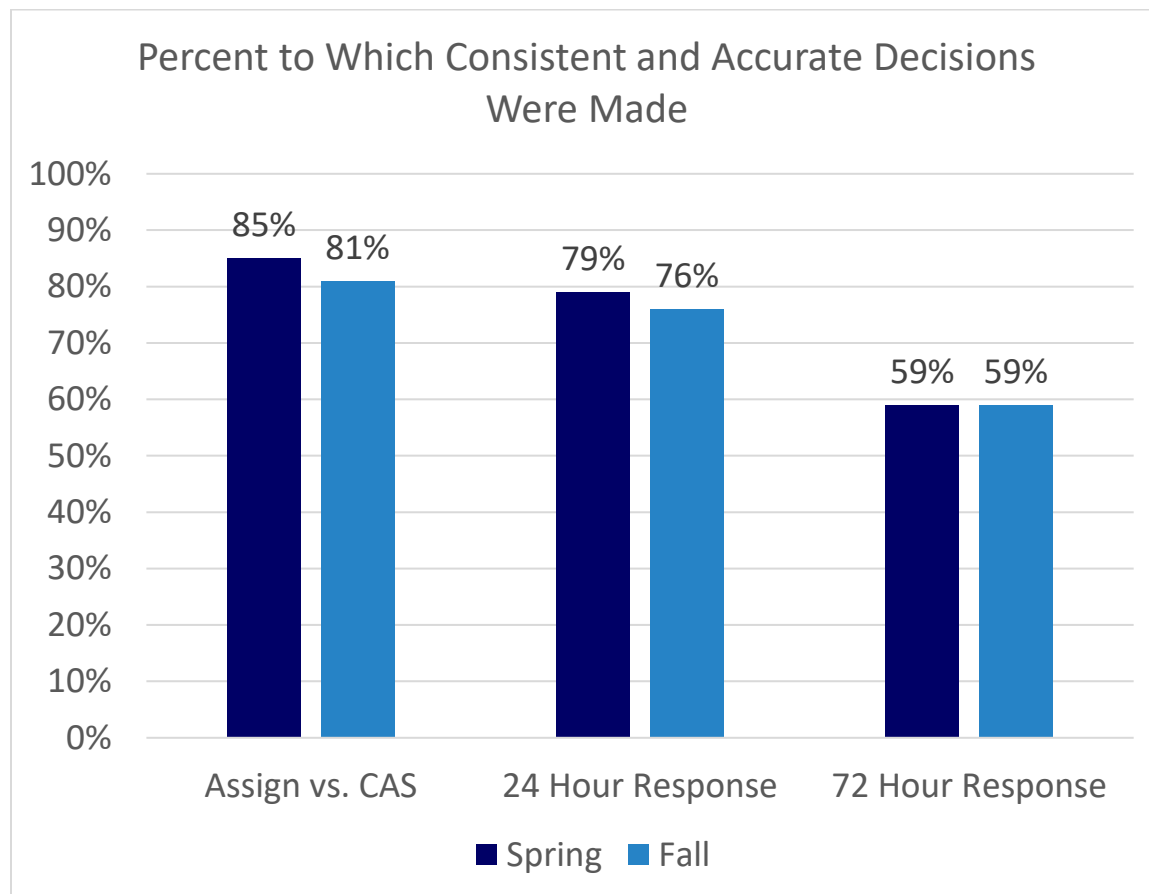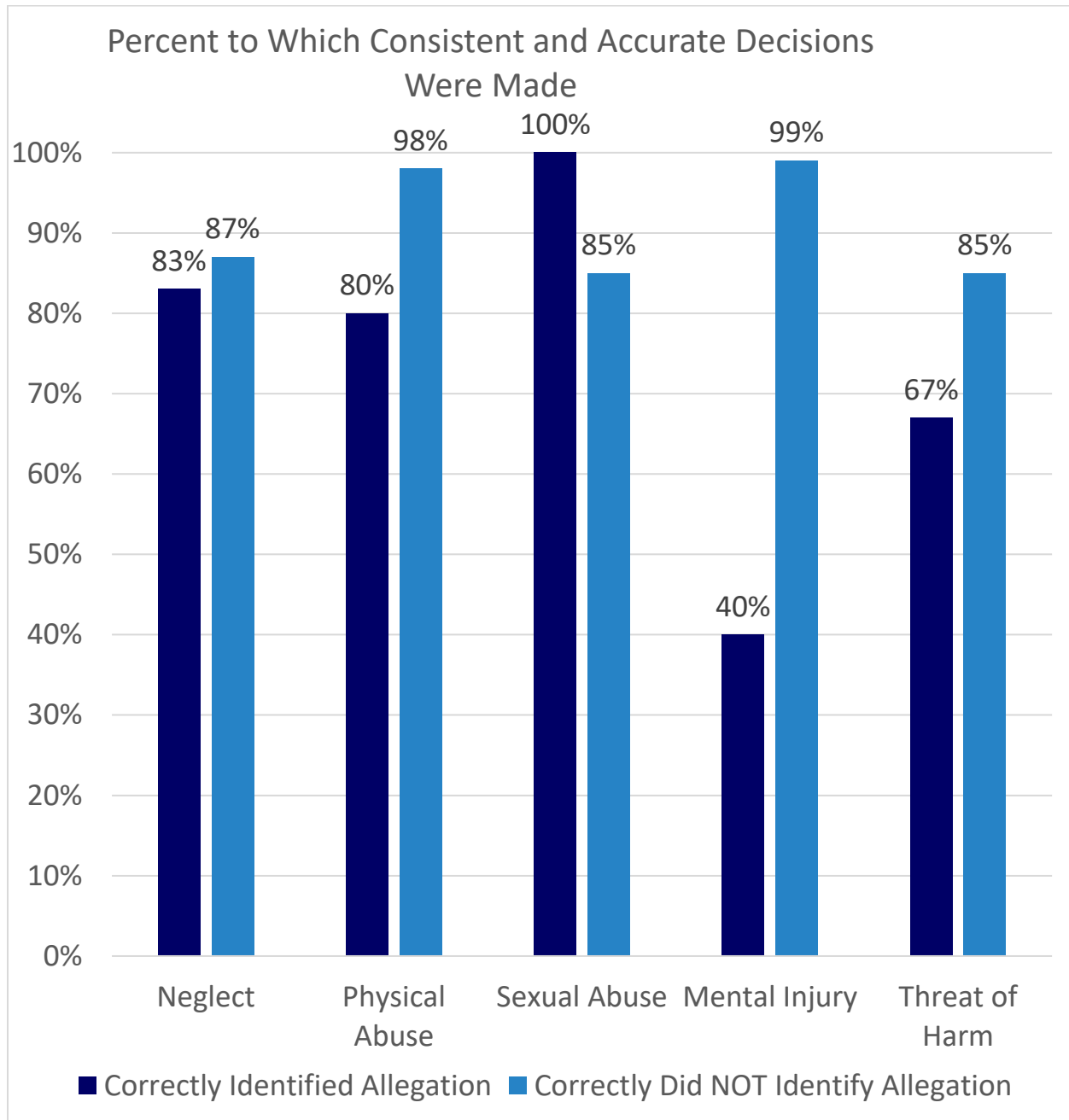
Equitable Screening Practices

The quality assurance reviews of screening *reports* include a review of whether there is sufficient documentation of information gathered from reporters and reviewed in OR-Kids regarding whether Native heritage exists and/or if the family identifies as Native. As of 2023, it also includes whether Tribes were notified when one was named (see second graph below). These align with the Oregon Indian Child Welfare Act.

Documentation of Native Heritage

Tribal Notifications Made
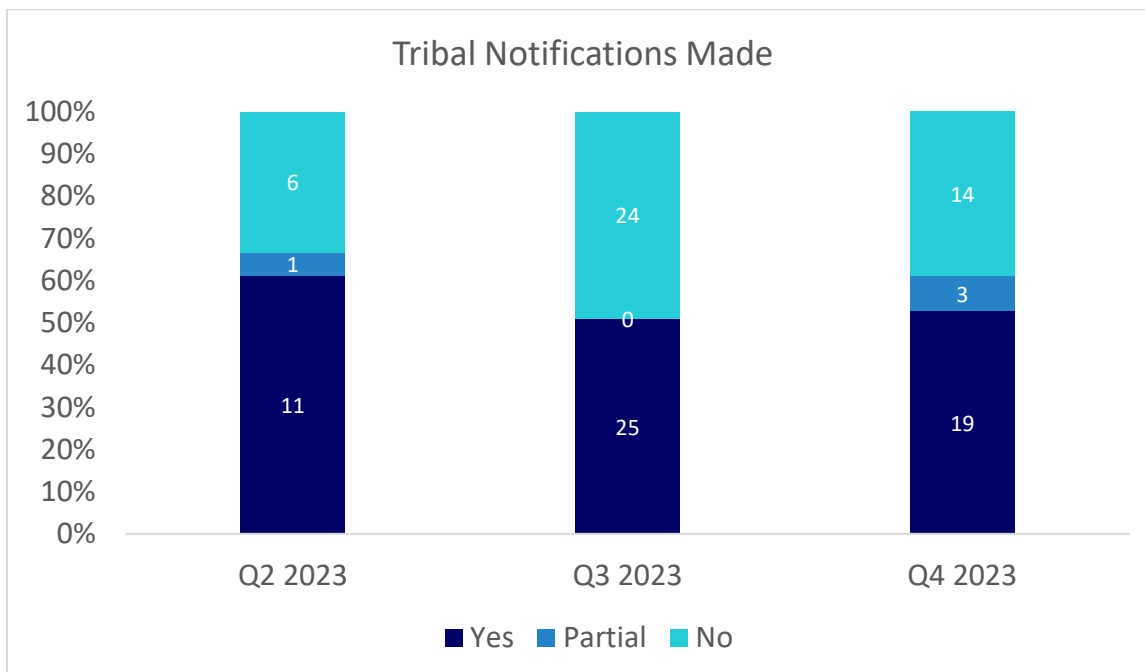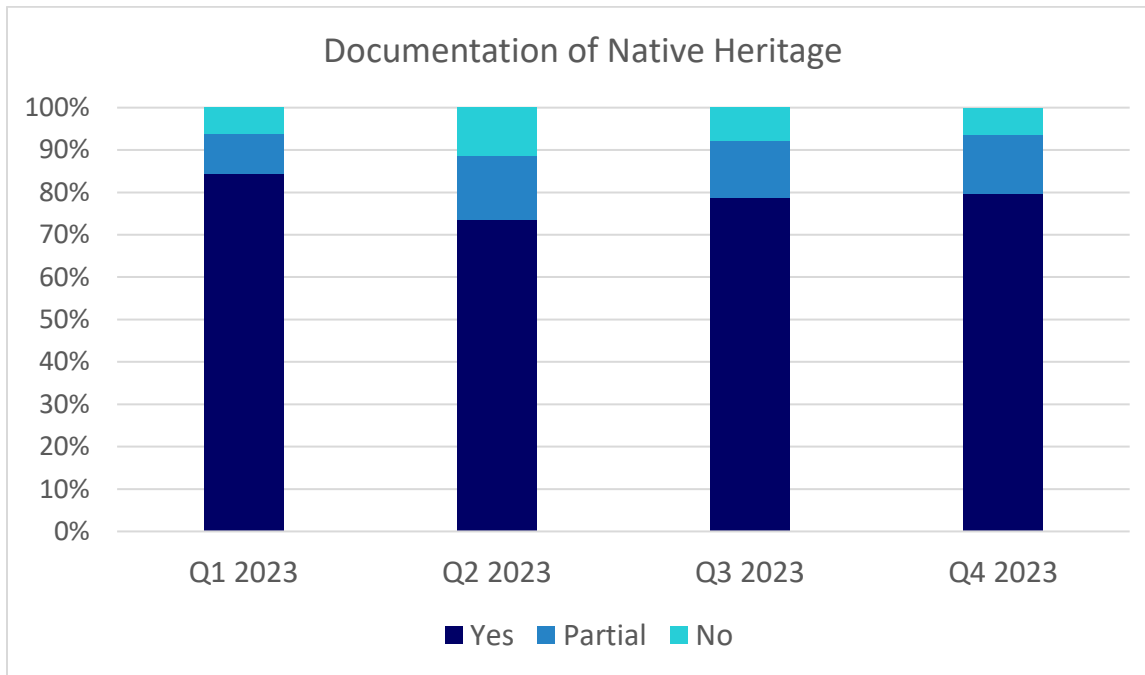
The quality assurance reviews of *calls* provide information about the sufficiency of information collection regarding family language and race/ethnicity, cultural considerations, and whether Native heritage exists.

Sufficiency of Information Gathering: Family Culture, Race/Ethnicity and Language, Native Heritage Fourth Quarter

Legend: Yes, Partial, No

- Language and Race/Ethnicity
- Cultural Considerations
- Native Heritage

Sufficiency of Information Gathering: Family Culture, Race/Ethnicity and Language, Native Heritage by Quarter

Legend: Q1 2023, Q2 2023, Q3 2023, Q4 2023

- Language and Race/Ethnicity — Q4 2023: 61%
- Cultural considerations — Q4 2023: 61%
- Native Heritage — Q4 2023: 86%