

Systematic approaches to assessment in child protection investigations - a literature review

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Abstract

The primary aim of this study is to summarize research findings about the use of assessment frameworks, i.e. structured models that guide information collection and decision making in child protection services, by reviewing the literature. The research review method consisted of identification, selection, coding, categorisation and summary of publications on child protection investigative work. The results indicated that there is some documentation showing that the use of frameworks leads to more information being gathered, a greater focus on the needs of the child and increased involvement of the child during the investigation. One side effect is that the investigative work becomes more extensive and time-consuming.

Keywords: child protections investigation, case assessment, decision making, assessment framework, comparative social work, system evaluation

Introduction

One of the primary tasks of child protection services is to clarify information and conduct assessments of cases that are reported to a child protection agency. In Sweden and Denmark national frameworks that defines the contents and processes of Child Protection Services (CPS) assessments have been introduced. These frameworks are based upon the British assessment framework (United Kingdom Department of Health 2000), but have been adapted to suit national legislation. The Swedish framework (BBIC) (Socialstyrelscen, 2015) was introduced in 2006 and the Danish framework (ICS) (Socialstyrelscen 2014) was introduced in 2007. Both the Swedish and the Danish frameworks have since been evaluated and revised.

Norway does not have any common framework that details the processes of a CPS investigation. When child protection services receive a report that a child may be in need, the municipal child protection service should within one week determine whether there are grounds for further investigation. About 80 % of the referrals that child protection services received in 2014 were investigated more closely. The rest were dismissed without inquiry. Whenever a child protection service initiate an investigation, this should normally be carried out within three months. Among the referrals that were further investigated, services were offered in 42% of the cases in 2016 (Statistics Norway). The rest of the cases were closed for various reasons.

Inspections of the CPS has been conducted by The Norwegian Board of Health Supervision (Helsetilsynet, 2012) and the Office of the Auditor General of Norway (Riksrevisjonen, 2012). Both of these inspections identified shortcomings in the way child protection services carry out assessments. Their critique focused on two main findings. (i) The collection of information is carried out unsystematically and (ii) the child is rarely participating in the investigation. The inspections concluded that there had been instances where reports of cases that contained serious concerns of abuse or neglect have not been assessed properly and that cases were prematurely closed. This was further documented in the report from a second wave of inspections conducted by the Board of Health Supervision in 2016 (Helsetilsynet 2017). The critique has led to a debate concerning the need for a more systematic approach towards CPS assessments in Norway and questions about whether a more structured system is needed have been discussed (Samsonsen, 2016).

A survey among managers of 217 municipal CPS agencies in Norway conducted in 2014 (Vis, Storvold, Skilbred, Christiansen & Andersen, 2015) concluded that almost 20 % of the agencies did not use any framework for CPS investigations. One third used locally developed frameworks and the rest used a privately developed framework (Kvello, 2017) integrated in the computer programs used for electronic record keeping of client data. The computerized framework exists in two different versions. One older version from 2007 is used by about 15 % of the services and an updated version from 2016, is used by the remaining services. Among the participating CPS managers, about 85% were positive towards the use of structured frameworks for assessment in CPS cases and many called for introduction of a common national framework.

Following these reports, the Norwegian Directorate for Children, Youth and Family Affairs commissioned a study to review the research literature in order to determine what is known about the effects of using frameworks for assessment of children and families when a case is reported to the CPS. Because of similarities in language, legislation and culture, and because the study was commissioned to inform future policy changes, the contracting authority were particularly interested in results from Sweden and Denmark.

The primary aim of this study is to summarize research findings about the use of assessment frameworks in general and to conduct a more in depth reviews of the results from Sweden and Denmark.

Method

This scoping research review consists of identification, selection, coding, categorisation and summary of national and international publications on child protection investigative work.

Identification of publications

The search for publications was carried out using three approaches. First, an electronic search using databases of research literature, followed by a search of websites and, finally, a manual search of relevant literature lists.

Broad searches in the PsychoInfo database (Ovid) (Supplementary table S1) and SocialCareOnline (Supplementary table S2) database was done. Two separate search strings were developed for those databases. The first string developed for PsychInfo contained 71 keywords and 25 words linked to subject headings in the database. There were two main types of search words, the first group were selected to identify studies

about children in contact with child protection services. The second group were selected to identify studies about use of assessment frameworks and decision-making. The complete search string combined these keywords and subject headings through 36 search-lines. Number of hits for each line were recorded. The PsychInfo search yielded 6.360 hits when limited to studies from 2005 and onwards. A more limited search was done using the database, SocialCareOnline. This search was particularly directed towards identifying models for investigative work and decision-making. The search contained 11 search words (i.e., child abuse, neglect, child protection, decision making, assessment), and yielded 500 hits. Search for publications in Nordic languages were conducted in the database, Norart. This search provided 5 publications. Using the open net via «Google.no» and the websites, «Socialstyrelsen.se» and «Socialstyrelsen.dk», we searched for Nordic literature on the BBIC model used in Sweden and the ICS model in Denmark, identifying a total of 13 publications. Through a manual review of literature lists in publications that were identified in the systematic searches, and by contacting colleagues, 7 new publications were singled out. Through these search methods a total sum of 6885 potentially relevant publications were identified.

Selection of publications

The identified publications were reviewed and assessed in a stepwise process. For inclusion, the study had to deal with child protection work and related to the use of structures or models in the investigative work process. In this review any publications of empirical studies (qualitative and/or quantitative) and theoretical studies are included. Because there exist one previous meta evaluation of international experiences regarding adoption of the British assessment framework (Léveillé & Chamberland, 2010) we did not include the studies from this review. We do however include the conclusions from their review in this synthesis. As a consequence there is a body of research on the use of the British assessment framework that is omitted. Our focus is thus more on the results from use of the Swedish and Danish adapted versions of the British assessment framework than on the previously reviewed results from the UK. Apart from the year of publication, there were no other exclusion criteria.

First, all titles were evaluated. Based on the titles, publications that clearly did not meet the inclusion criteria were excluded. Thereafter, the remaining (N=609) publications were reviewed and more closely considered according to inclusion criteria. This resulted in the selection of 220 publications for complete text assessment. After the full text review, 22 publications were coded and included. A synopsis of the selection process is presented in Table 1.

- Insert table 1 here

After the selection of articles at the title level (step 2), reviewing of publication summaries were carried out (step 3), two researchers independently evaluated 10% of the publications. At step 2, there was a 93% agreement and at step 3 the agreement was 71%. In the cases of disagreement at step 2, the publication was included. Disagreement at step 3 was discussed between the researchers until consensus. At step 4 two researchers examined all of the studies together. At step 6 two researchers coded all of the studies together.

Coding of publications

Included publications were coded with respect to place of origin, type of publication, method, study topic, type of assessment framework, informant type, number of informants, response rate, average age of participants, gender of participants and the main conclusion of the study.

Results

The literature search identified 22 publications reporting various experiences with use of assessment frameworks for investigation of referrals to child protection services.

Many (N=7) of the included studies addressed theoretical perspectives related to the use of structured assessments in general. In the rest of the studies, specific types of assessment frameworks were studied. These frameworks were the British framework for assessment of children in need and their families (FACNF) the Dutch Assessment framework (ORBA), the Irish assessment framework, the Swedish version of FACNF called BBIC (Barns Behov i Centrum [Childrens' needs in focus]), and finally the Danish version of FACNF called ICS (Integrated children's system).

Theoretical perspectives on structured assessments (N = 7)

A summary of publications that discussed theoretical perspectives on assessment frameworks are shown in table 2. These are not limited to discussions regarding the frameworks used in Europe.

- insert table 2 about here

In a research review of methods that improve decision making in child protection decisions, Bartelink, Yperen and Berge (2015) found 17 studies that examined different decision-making models. Two main types of decision-making models were singled out. These are described as collaboration-based decision-making models and structured decision-making models. Models based on collaborative decision-making, focus on dialogue between parents and children while placing less emphasis on structuring the investigation process. Structured decision making is characterised by the use of frameworks for case assessment that guide the assessment by specifying the information that should be collected and considered. The authors concluded that the use of structured decision-making methods increases the systematic level of child protection work and improves assessments and analyses of complex cases. The researchers' stresses, nonetheless, that there is little documentation to prove that such systems lead to greater consensus in determinations than decision-making processes led by intuition and clinical judgment.

In a theoretical discussion, Harris (2011) argues that there are several disadvantages when analysis requires that parents adapt to and cooperate with an assessment regimen. Among other things, it may lead to alienation of the family and an exaggerated focus on the deference and willingness of the parents to change, along with an increasing use of power during the investigation. The author argues that it can undermine the quality of the investigation when the social worker's primary focus is on getting the parents to cooperate on specific investigative procedures rather than on working to establish cooperation and partnership. However, there is no empirical basis that directly documents this assumption.

Helm (2011) distinguished between analytical judgment versus intuitive judgment. Analytical judgment is a step-by-step process of logically coherent deductions. Intuitive judgment involves the use of previous experience to solve new problems. By using assessment frameworks, greater emphasis is on analytical judgments through logic and reasoning than seem the case for more intuitive judgments. The study also claims, that access to reliable information and an analytical approach does not automatically translate to correct decisions. Helm's (2011) point is that, even if the quality of information collection is increased by the use of assessment frameworks, it is not tantamount to a reliable assessment of that material.

Gillingham's (2011), and Gillingham and Humphreys' (2010), criticise the use of Structured Decision Making (SDM), an instrument for decision making that has been

implemented in 20 states in the USA and 2 states in Australia. This critique is similar to the arguments made by Helm. Based on ethnographic studies with participatory observations in child protection services, they evaluate the use of this instrument. In the study, they find that the use of investigative aids/instruments provides newly-educated trainees a useful reference for how the work should be conducted, but that experienced social workers are concerned about the professional development of newcomers. In particular, they point out that judgment is not developed when there is too much dependence on following procedure and checking the right boxes. Gillingham nonetheless points out that the instruments themselves are probably not the problem, but rather their implementation and use. Because it is challenging to implement such tools and ensure that they are used properly, Gillingham argues that SDM is not a miracle solution for improving the quality of decision making. However, it should be noted that Gillingham's studies were based on observations and conversations with social workers rather than evaluation of the decisions as such.

Problems with implementing tools for decision-making support are addressed by Foster and Stiffman (2009). They examined the use of a database system for decision-making support of a child protection service in Missouri, USA. They found that use of the system gradually declined after training. In order for technology such as decision-making aids to work, it needs to be fully integrated into the entire case review process, according to the authors. The authors concluded that technology alone does not change the way in which social workers do their job.

Schlonsky and Wagner (2005) indicated that both risk assessment instruments and structured assessment of a case context may be viewed as decision-making aids. In order to implement such practices, these needs to be rooted in the organization to be applicable. This involves several factors. To some degree, caseworkers should be positive towards standardisation of methods in the organization in addition to a need of an infrastructure and technical support for the methods chosen. One weakness of the assessment frameworks used in these studies is that they do not include methods for risk assessment. In a theoretical discussion, Schwalbe (2008) suggests that the preliminary risk assessment in a case influences the subsequent investigative work in that the first risk assessment could be a premise for the investigation. It is therefore pointed out that a successful integration of risk instruments and assessment frameworks encourages more knowledge on how the understanding of risk affects the hypotheses social workers develop for further investigation.

Use of assessment frameworks in UK, Ireland and the Netherlands (N = 5)

The identified studies are shown in Table 3.

- Insert Table 3 about here

There is one published meta-evaluation on experiences applying the AF model in several countries (Léveillé & Chamberland, 2010). The authors present a synopsis of experiences from 36 different studies. The majority of these come from Great Britain (N=27) while the remaining studies are from Ireland (N = 5), Australia (N = 4) and Sweden (N =5). The evaluation shows positive effects of using AF: (i) improved cooperation between child protection and other health and social services, (ii) improved cooperation with and participation by the users, (iii) investigations that are more focused on the needs of the child, (iv) more comprehensive investigations and (v) investigations with greater clarity and structure. For negative effects, the application of AF leads to increased use of time per case and, thus, increased workload during the investigative phase. There is some documentation of other negative effects too, such as poorer cooperation between the services and with parents. There is no evidence showing that the use of AF leads to better outcomes for children who are involved in investigations.

Nine years after the adoption of AF, a study examining British social workers' experience with the model (Nethercott, 2016) pointed out that difficulties in applying AF are particularly associated with getting families to commit to filling out comprehensive materials. Experienced social workers however, find ways to work with families and help navigate them through the investigative process without alienating parents or children.

In order to raise the quality of reported neglect in the Netherlands, a method of risk assessment, investigation and decision making called ORBA¹ was developed in 2006. In a study (de Kwaadsteniet, et al., 2013) that explored whether the use of ORBA led to more systematic and transparent investigations of referrals, a total of 160 child protection cases were reviewed and analysed. Results showed that using the method led to decisions that more frequently incorporated rationales tied to the following factors: chance of recurrence, protection factors in parenting capacity, protection factors in the family, risk factors in the family and local environmental protection factors. There were

no differences in assessment of risk factors in parenting capacity, local environmental risk factors, assessment of possible consequences for the child, parents' motivation to change and interaction between child and parent. When ORBA was used, the case files contained an investigative plan with hypotheses, explanation and conclusions about the necessity of services along with the reasoning and rationale for opening and closing cases more often. However, the rationale behind the decisions was not always clear (missing in approximately 40 % of the cases with ORBA vs. about 93% in other cases). The study concluded that the application of ORBA led to more systematic and structured case investigation and more explicit and plausible decisions, but that it still needed to structure the work more. It was suggested that an investigative plan should be formulated for every case and that a requirement to provide the rationale behind decisions and conclusions are needed. The authors argued that this probably cannot be achieved with systems alone but that there is also a need for training and guidance of personnel.

In a vignette study focusing on whether there was agreement among caseworkers who were trained in the use of ORBA and those who were not (Bartelink, et al., 2014), no documentation suggested that there was considerably more agreement among ORBA users than among other caseworkers. The authors concluded that, even though previous research on the use of ORBA had shown that it led to greater similarity in the material collected, this was not commensurate with the level of agreement in decision-making. The authors pointed out that inadequate levels of agreement in assessments and decisions cannot be resolved by systems alone, but also depends on social workers' awareness of how they are influenced by subjective factors. This can only be achieved when social workers explicitly identify and discuss the rationale for their assessments and conclusions. It was suggested that group-based decision-making models may be a way of assuring that different understandings of the cause of a problem will be discussed and analysed with the idea of avoiding unintended subjective bias.

An evaluation in Ireland demonstrated that a nationally developed framework for child protection assessments, to a certain degree, encouraged interdisciplinary and cross-sectoral collaboration (Buckley, Whelan, Murphey & Horwath, 2007). This was measured using the following three criteria: (i) whether or not others contributed beyond the one responsible for the case, (ii) the number of interdisciplinary meetings and (iii) the number of collaborative parties from other services that took part in meetings on the case. Increased frequency of meetings on a case, in which an

investigative framework was used, led to more cooperation across services. The social workers reported less feeling of professional isolation.

Studies of the Swedish and Danish versions of the framework for assessment of children in need and their families(N = 10)

The identified studies are shown in table 4.

- Insert Table 4 about here

There is no overall evaluation of the BBIC model in Sweden. User evaluations are reported by the National Board of Health and Welfare and by regional authorities. In a final report on the implementation of the BBIC project, the authorities (Socialstyrelsen, 2007) highlighted some of the experiences in using the model during the implementation phase. Among other things, BBIC had helped to strengthen the child's position by allowing the child to be more active in the investigative process. Social workers gained added awareness and knowledge on the needs of the child. The parents felt that they participated more. The National Board of Health and Welfare concluded that BBIC had helped to increase the level of structure and systematic order during the investigative phase, but that it was difficult to know whether application of BBIC had led to better decisions for the children involved in the investigation.

In a report on the implementation of BBIC in the Ørebro region, the following question was asked, «Does BBIC make a difference?» (Ångman, 2009). In this study, which reviewed completed BBIC forms in 136 cases, it was concluded that the use of BBIC did not automatically mean that all factors surrounding the child were sufficiently illustrated. The parents' child-raising capacity was found to be well exposed in half of the cases. In regards to the needs of the child, there was most often a lack of documentation on the child's self-help skills (39%), identity (43%) and social competence (32%). Data that was seldom missing included the child's physical health (5%), mental health (12%) and education (9%). Information on family factors was lacking in the areas of local environmental resources (28%), social integration (18%) and financial situation (14%). Facts about the family's background, work, network and living conditions were seldom missing (2-5% of cases). In 34 % of the cases there was information showing that violence had occurred in the family and, in approximately half of these, an assessment of risk for the child was found. The report stated that the social

worker had talked with or observed the child in 89% of the cases, which was interpreted to mean that the child was heard in the investigation. However, the report also stated that the child had been notified that an investigation was initiated in just 43 % of the cases. It is, therefore, unclear to what extent child participation was the objective of the social worker's conversations with the child. Most likely, the child was primarily viewed as a case informant. In 28 % of the investigations, information from other collaborative parties was missing. When information from others was obtained, the information was used in 59% of the case presentations. The study concluded that, even if the instrument causes increased analyses among social workers during the investigation, it does not necessarily mean that the case will be well depicted.

In a survey among municipalities in the Stockholm region, Gladh and Palm (2011) researched 132 cases. Of these, 72 cases had been investigated using BBIC while 60 case inquiries had used other methods. The purpose was to determine whether there are differences in how the investigation is documented when using BBIC. The study found that, when using BBIC, there was a description of the investigation process in 99% of the cases, whereas such description was included in only 50% of the non-BBIC cases. In approximately 57% of the cases, both BBIC and other, there was a distinction between facts and judgments. There were significant disparities in the degree to which family and environmental factors had been documented. In BBIC cases, there was significantly more frequent documentation of the family situation, living conditions, work, finances and social integration. There was no difference in how often the parents' background and local community resources were recorded. The study revealed that the needs of the child, with the exception of the sibling relationship, were more frequently documented in BBIC cases. The family's and child's resources were more often delineated in BBIC cases, in addition to material collected directly from the child and the mother. There was no difference in how often the father and other parties had provided information. The caseworker had more frequently had conversations with the child in BBIC cases. The study examined whether there was a correlation between the descriptions of the child's needs, the reason for the investigation and the decisions that were made. No differences were found in the correlation between needs and actions taken; however, greater correspondence was found between the reason for the investigation and the measures initiated in non-BBIC cases. However, this had to do with the formulation of assistance measures rather than whether cases had been correctly or incorrectly dismissed. The study concluded that BBIC had led to more accurate and open investigations once the caseworker is confident in using the instrument. It was also found that caseworkers

talked with the child and gathered material from other informants to a greater degree since the implementation of BBIC.

Through focus group interviews with 56 caseworkers, Svendsen (2012) explored user experience with BBIC, including caseworkers' perceptions of the strengths and weaknesses. Strengths included the following: the investigative process was clear; important parts of the investigation were not forgotten; the investigation helped maintain focus on the child; the evaluation of services was simpler and the system was flexible. Disadvantages were as follows: the system was technically challenging; the investigations were too extensive; managing details meant that important information could be missed during conversations with parents and children; and lack of help measures meant that there was an absence of correlation between investigative efforts and measures. The study concluded that the child perspective has become more apparent during investigations and that clients have received greater legal protection. However, weaknesses were found in the management of details contained in the system, which translated into less focus on essential information that could have been included from the conversation. One obstacle to extensive use of BBIC is that it is cumbersome and the technical system has the potential for development.

Two publications on BBIC were found in peer-reviewed research journals. Both of these dealt with how the child's health is documented with BBIC. In a review of child protection investigations (Hultman, Alm, Cederborg & Falth Magnusson, 2013), the types of health data collected on the child were studied, to see whether or not there was any difference when BBIC was used. The study categorised cases into four main groups. Group one consisted of 100 cases that contained little health information. The cases in this group had more likely been investigated without the use of BBIC and were more likely dismissed without follow-up. The three other groups consisted of 53 cases in which there were facts on neurological and psychosomatic symptoms, 64 cases containing information about the child's emotional problems and 51 cases with information on the child's mental health and behavioural issues. Cases containing mental health data had more often been investigated with BBIC. The study also found that, when the referral was due to the parents' mental health or issues of substance abuse, it was less likely that the child protection agency had documented the child's health than when referrals were related to the child's problems. The study concluded that, even though the child's health is better documented with the application of BBIC, a large proportion of BBIC investigations were also inadequate. In a subsequent study the roles the child's health background plays in the reasoning of the child protection

services when concluding investigations was examined (Hultman, et al., 2015). In this study, it was found that health status was rarely used as a reason for the child protection's decisions. When the child's mental health or behavioural issues were referred to in rationalising decisions, it was often used in singular and simplified causal explanations as a symptom or result of the parents' neglect or abuse. The study concluded that, when the child's health had been poorly investigated, it led to over-simplified explanations of the child's situation, which could lead to the implementation of measures that are not adequately suited to the child's needs.

Experiences with BBIC are also mentioned in three student works that are based on interviews with social workers. Vikberg and Wikstrøm (2010) found that social workers regard that the use of BBIC makes the investigation more structured in relation to the procedural timing of when the child's voice should be heard. This can lead to increased legal protection for the child. In interviews with six social workers, Fransson and Sindt (2010) found that the six social workers felt that children were seen and mentioned in investigations to a greater degree after the initiation of BBIC, but that it did not necessarily mean that more weight had been placed on the children's opinions. In a document analysis, Hedlund and Loven (2008) found that even if BBIC was employed, it did not reduce the occurrence of logical flaws or other argumentation errors in the assessments of the child protection services.

ICS is the Danish assessment framework for child protection. The framework is based on the English AF model. An IT system called DUBU was developed to support the use of the framework.

Two publications were discovered that addressed experiences applying the framework in Denmark. The first was an evaluation of experiences in the implementation of the model. The studies were conducted by Deloitte Consulting (2014) on assignment from the National Board of Health and Welfare in Denmark. At the time the study was carried out, ICS was being used in 50 Danish municipalities. The evaluation was based on questionnaires answered by 24 municipalities (55%), 588 caseworkers (73%) and 87 leaders (80%) in the municipalities. Interviews were also performed with staff in municipalities that did not use ICS.

Evaluation of staff user experience showed that employees in the municipalities that used ICS were enthusiastic about the system. Both leaders and caseworkers reported that application of the method had led to an upgrade from the social services perspective. Leaders expressed more frequently than caseworkers that ICS had led to

the improvement in the quality of social service. The staff also felt that the method had strengthened the focus on the child during investigations by means of thorough analysis of the child and the family's resources and challenges. They felt that ICS made their efforts more deliberate by placing the child at the centre of the investigation. It had led to better legal protection for children and parents by including them more in the investigative process. The professional assessment from a child services perspective had likely improved in that more comprehensive investigations were done. Half of the leaders and one third of the caseworkers felt that the method had led to a more uniform practice in the investigative work. One drawback of the system is that ICS does not include methodological support for conversations with children; such tools were thus called for. ICS has led to more comprehensive assessments as a result of the use of assessment frameworks. There was a widespread perception among leaders that the assessments had become too extensive. There was an opinion among social workers who used the system that focusing an investigation based on the objective and selecting which information is relevant was challenging.

In Deloitte's evaluation, an archive study of 112 ICS cases and 32 non-ICS cases was performed in addition to telephone interviews with seven families. Research from the archive study showed that there were considerable discrepancies in how the framework was used in practice, particularly in how the child's needs were analysed. By finding that assessments have become more comprehensive, the study supports user experience. The review of case journals showed that investigations in ICS municipalities were more extensive. However, it was not entirely clear that the quality of the analyses collected and professional judgments had improved. The quality was deemed better in the municipalities that also used the IT system, DUBU. No correlation was found between the amount of time the municipality had used the system and the quality of case management. The case review showed that children were consulted more often and their perspective was more often represented in case presentations in the ICS municipalities than in those without ICS. The parents' perspective was also more evident. The case review showed a greater correspondence between the identified needs and service planning in the ICS municipalities. The municipalities that had prioritised implementation of and leadership focus on the method were those that had seen the most enhancement of investigations from the child services perspective.

When it comes to the parents' user experience with ISC, there was a common perception of having been heard and understood during the investigative process; that they recognised themselves in the portrayals of the child protection services. The parents

described the investigation as a series of conversations on «how we were doing and what we do in different situations at home.» The parents felt that the caseworkers had been effective in establishing relations with and talking to the children. The children's perspective was not mentioned.

In a study comparing ICS to other assessment frameworks used in senior care and at work offices, Høybye-Mortensen (2013) examined how this decision-making support system influenced the social worker's exercise of judgment. Several caseworkers report that they spend more time on the investigation and collect more information about the family. ICS was used in different ways by the various caseworkers. The age-specific forms were used both as checklists for what to look for and as theoretical background to assess what is normal for children at a certain age. Less experienced caseworkers used checklists more subserviently as a guide for what should be asked, thus using the system more as a documentation tool. Social workers felt that ICS left room for professional judgment on the essence of the case and the selection of services to be implemented. Because ICS checklists define what is relevant to include in the investigation, there was less room for use of judgment in that respect. It seems that Danish social workers deemed the ICS system to be less rigid than what some British social workers felt about the AF model. The study concluded that ICS forms could be used instrumentally or normatively (providing guidance). If they are applied normatively, the quality of the social worker's assessments increases.

Discussion

In this literature review, particular focus was placed on research and experiential knowledge about strengths and weaknesses in the use of assessment frameworks in Europe and particularly in Sweden and Denmark. Several positive effects were identified. In studies that compare assessment frameworks with judgment-based information collection, it is well documented that use of such frameworks leads to increased gathering of material about the family situation and the needs of the child. There is documentation showing that assessments managed by assessment frameworks are broader and, in some areas, more thorough. Nonetheless, one cannot be certain whether this difference is the result of the implementation of a framework alone. A general limitation with all studies that retrospectively compare the use of assessment frameworks with other case investigations is that, without randomization of the various groups, conclusions about causality cannot be drawn. It may nonetheless be concluded that the use of assessment frameworks contributes to a more thorough assessment in

that several areas connected to the child's situation and the parents' care capacity are documented. This can prevent shortcomings in the investigation, which can occur if judgment is used to a large degree in deciding what information is sought. This is well documented in studies of all three assessment frameworks; AF, BBIC and ICS. In British studies of the AF it has been documented that use of the model also led to improved investigations and environmental factors. There are no studies that have looked at whether this also pertains to BBIC and ICS. Even though the AF, BBIC and ICS templates are very similar, which means that the effects of BBIC and ICS would most likely correspond with that of the more extensively evaluated AF, it has nonetheless been concluded that there are several sides of BBIC and ICS that are less researched, meaning that there is a lesser degree of documentation for these models than for AF. At the same time there are several studies that question whether a consequence from the use of such frameworks is that assessments become too extensive in relation to the objective. There are some studies that find indications that, when the case is more broadly and meticulously investigated, it leads to a broader rationale for the decisions made. However, there is uncertainty connected to this conclusion. Use of assessment frameworks is considered not to lead to greater consensus among social workers on what is the correct decision. There is no documentation on whether the use of assessment frameworks leads to better decisions.

There is sufficient documentation that the use of assessment frameworks leads to more frequent conversations between the child protection services and children, and that children participate more during the assessment. This means that the child more frequently contributes information that sheds light on the case. There are also indications that the child's perspective is mentioned more often in case files when an assessment framework has been used. It is uncertain whether these conversations to a greater degree make the child feel like a participant in the investigation. The research demonstrates that parents have both positive and negative user experiences. It is uncertain to what degree the variation is caused by frameworks, as such, or whether it can be associated to a larger degree with the social workers' use of the systems.

There are also several limitations associated with use of assessment frameworks presented in the research literature. The most important limitation is that the frameworks primarily are tools for gathering information. There is no guarantee or evidence that the information is properly used in analyses or leads to better decisions. Another way to put it is that although assessment frameworks have internal validity by helping provide more and better information, they have unknown external validity with

respect to outcomes for children and families. There is no documentation that better systems for information gathering leads to greater consensus about decisions among social workers, nor whether decisions are better implemented or if users of services better receive them. A concern is that systems for information gathering takes time away from actually providing help and services for parents and children. This is what leads Gillingham (2011) to ask if we are just breeding workers that are good at ticking boxes. The point being that if procedures or systems are used instrumentally it may be seen as the goal in itself and not merely as a tool that serves a purpose. Then the system might impede the professional development and judgement which is a necessary prerequisite in decisions about child care and welfare. A different critique along the same lines is that when information gathering takes more time, using a systematic approach, it is possible that this takes time away from actually helping children and families. At the core of this is the observation that while assessments can go on almost endlessly there is a fairly limited amount and type of services that are actually available within a CPS agency. Thus, there is also a limit to the amount of detailed information that is necessary for reaching a decision. If systematic assessments take time away from providing services this is clearly problematic. There is thus the danger of spending too much time on investigating less serious cases and too little time on the most serious cases.

From the caseworkers' standpoint there are mixed experiences with the assessment frameworks. There is broad agreement that the frameworks contain information that can be relevant to an investigation, but that there is no need to collect the same information for all cases. If the frameworks are followed in their entirety it means that a considerably greater amount of time is spent on the investigative work. Social workers' user experience in Sweden, Denmark and Great Britain alike show that social workers deem the frameworks to be most beneficial when they are used to provide guidance. This means that they function as checklists for the planning of an investigation, whereby the caseworker makes a discretionary decision about what information needs to be gathered for the individual case. If the caseworker is forced to follow a data collection procedure without the opportunity to adapt it to the case at hand, caseworkers feel that it more often leads to unnecessary use of time on the investigation, a more invasive investigation than necessary and more difficulty in securing cooperation from the parents.

The models that are employed in Sweden, Denmark and Great Britain are frameworks for needs-based assessment. Such assessments presuppose that parents and children

want to cooperate on the investigation and contribute with truthful information. The models are not intended to investigate individual situations involving neglect or abuse. Thus, they are not suitable procedural methods for clarifying acute situations.

The models include a systematization of information collection during an investigation. Much of this information is expected to be gathered through conversations with children and parents. Use of the models assumes, therefore, that the social worker has knowledge and skills in communication and interview methods.

The significance of user friendly technical solutions is also highlighted by many as an important factor in the successful implementation of assessment frameworks. A central requirement is that the use and documentation of these templates be integrated into the journal/archive systems of the services and that the technical solutions for this be user-friendly.

Conclusions

Four models that are employed as national frameworks for child protection investigation was identified. The British AF model has been in use the longest and has been researched most. This research is primarily based on experiences from Great Britain and Australia. There is reliable documentation showing that, when the model is applied, it leads to the collection of more information, greater focus on the needs of the child and more substantial consultation with the child during the investigation. One side effect is that the investigative work becomes more extensive and time-consuming. There is a general lack of independent professionally-reviewed evaluations of these models. In particular, research is lacking on whether increased access to information through use of assessment frameworks leads to different and/or better decisions. Therefore, it is unclear whether application of these models leads to improved outcomes for children who come in contact with the child protection services.

This study was commissioned by the Norwegian government in 2015 and they received the first results in 2016. Since then, work has been initiated by the Directorate for Children and Family affairs to develop specifications for a Norwegian assessment framework that shall be piloted in the future. It is not yet clear exactly what the contents of the framework is going to be but it is likely that it will be similar to those in the other Nordic countries. What is evident from the last ten years of revision and implementation of this system in Denmark, Sweden and UK is (i) that there has been a trend towards making frameworks less comprehensive and rigid and (ii) that good

coordination and integration with electronic systems for recordkeeping is instrumental for implementation. We have, in a separate study, looked at the different paths that the Swedes and Danes have taken in adapting the British system for use in their countries. Although this is topic for a different article, we would suggest that systematic changes should aim to improve quality of services and that adapting a system to local legislation, culture and professional practice is very important in this respect.

References

- Ångman, I. (2009). *Gör BBIC skillnad? En uppföljning av kvaliteten i socialtjänstens utredningar av barn i Örebroregionen-Barns Behov I Centrum*. [Does BBIC make a difference? A study of the quality in social services assessment of children in the Örebro region] Örebro :FoU Välfärd
- Bartelink, C., van Yperen, T.A., ten Berge, I.J. et al. 2014. Agreement on Child Maltreatment Decisions: A Nonrandomized Study on the Effects of Structured Decision-Making. *Child Youth Care Forum* 43: 639. <https://doi.org/10.1007/s10566-014-9259-9>
- Bartelink C., van Yperen T.A., & ten Berge I.J. 2015. Deciding on child maltreatment: A literature review on methods that improve decision-making. *Child Abuse and Neglect*, 49:142-53. doi: 10.1016/j.chiabu
- Buckley, H., Whelan, S., Murphy, C., & Horwath, J. 2010. Using an assessment framework: outcomes from a pilot study. *Journal of Children's Services*, 2 (1), 37 – 47. Doi: <http://dx.doi.org/10.1108/17466660200700004>
- Deloitte Consulting. 2014. *Evaluering af ICS – Integrated Children's System*. [Evaluation of ICS- Integrated children's system.]: Socialstyrelsen. ISBN-nummer: 978-87-93052-79-6.
- Foster, K. A., & Stiffman, A. R. 2009. Child welfare workers' adoption of decision support technology. *Journal of technology in human services*, 27(2), 106-126.
- Fransson, I., & Sindt, L. 2010. *Behandlares syn på BBIC: Rättssäkerhet, delaktighet och att få sin röst hörd*. [Case workers views on BBIC: rule of law, participation and being heard] Örebro University, School of Law, Psychology and Social Work.
- Gillingham, P., & Humphreys, C. 2010. Child protection practitioners and decision-making tools: Observations and reflections from the front line. *British Journal of Social Work*, 40(8), 2598-2616.

Gillingham, P. 2011. Decision-making tools and the development of expertise in child protection practitioners: are we 'just breeding workers who are good at ticking boxes'?. *Child & Family Social Work*, 16(4), 412-421.

Gladh, M., & Palm, A. B. 2011. *Med barnet eller blanketter i centrum?: uppföljning av handläggningssystemet Barns behov i centrum (BBIC) i nordvästra Stockholm*. [The child or the templates in focus?: follow up of the assessment framework BBICi north-west Stockholm]FoU Nordväst i Stockholms län.

Harris, N. 2011. Does responsive regulation offer an alternative? Questioning the role of formalistic assessment in child protection investigations. *British Journal of Social Work*, 41(7), 1383-1403.

Helm, D. 2011. Judgements or assumptions? The role of analysis in assessing children and young people's needs. *British Journal of Social Work*, 41(5), 894-911.

Helsetilsynet [Nowegian Board og Health Supervision]. 2012. *Oppsummering av landsomfattende tilsyn i 2011 med kommunalt barnevern – undersøkelse og evaluering*. [Summary of national supervision of municipal child protection services – investigations and evaluations]. Helsetilsynet Rapport 2-2012.

Helsetilsynet [Norwegian board of health supervision]. 2017. *Bekymring i skuffen – oppsummering av landsomfattende tilsyn i 2015 og 2016 med barnevernets arbeid med meldinger og tilbakemelding til den som har meldt* [Concerns in the file drawer – summary of national supervision in 2015 and 2016 regarding child protection services handling of referrals and responses to the referrer.] Rapport fra Helsetilsynet 1:2017

Hultman, E., Alm, C., Cederborg, A. C., & Fälth Magnusson, K. 2013. Vulnerable children's health as described in investigations of reported children. *Child & Family Social Work*, 18(2), 117-128.

Hultman, E., Cederborg, A. C., & Magnusson, K. F. 2015. Social workers' assessments of children's health when arguing for children's needs. *Child and Adolescent Social Work Journal*, 32(4), 301-308.

Høybye-Mortensen, M. 2013. Decision-making tools and their influence on caseworkers' room for discretion. *British Journal of Social Work*, bct144.

de Kwaadsteniet, L., Bartelink, C., Witteman, C., ten Berge, I., & van Yperen, T. (2013). Improved decision making about suspected child maltreatment: Results of structuring the decision process. *Children and Youth Services Review*, 35(2), 347-352.

Kvello, Ø. 2017. *Barn i risiko* [Children at risk] Oslo: Gyldendal akademisk

Léveillé, S., & Chamberland, C. 2010. Toward a general model for child welfare and protection services: A meta-evaluation of international experiences regarding the adoption of the framework for the assessment of children in need and their families. *Children and Youth Review*, 32, 929–944. doi: 10.1016/j.childyouth.2010.03.009

Nethercott, K. 2016. The Common Assessment Framework form 9 years on: a creative process. *Child and Family Social Work* (online ahead of press). Doi: 10.1111/cfs.12292

Samsonsen, V. 2016. *Assessment in child protection; A comparative study Norway – England*. PhD Thessis. University of Stavanger. Faculty of Social Science

Schlonsky, A. & Wagner, D. (2006). The next step: Integrating actuarial risk assessment and clinical judgment into an evidence-based practice framework in CPS case management. *Children and Youth Services Review*, 27, 409–427. doi: 10.1016/j.chidyouth.2004.11.007

Schwalbe, C. (2008). Strengthening the integration of actuarial risk assessment with clinical judgment in an evidence-based practice framework. *Children and Youth Services Review*, 30, 1458–1464. doi: 10.1016/j.chidyouth.2007.11.021

Socialstyrelsen [Swedish National Board of Health and Welfare] (2007). *Social barnavård i förändring Slutrapport från BBICprojektet*. [Social child care in change – Final report from the BBIC project] Artikelnummer: 2007-110-18

Socialstyrelsen [Danish National Board of Social Services] (2014) *Barnets velfærd I Centrum – ICS Håndbog*. [Child welfare in focus – ICS Handbook] Odense :Socialstyrelsen

Socialstyrelsen [Swedish National Board of Health and Welfare] (2015) *Grundbok I BBIC*. [Handbook for BBIC] Falun:Socialstyrelsen

Svendsen, T. (2012). *Socialarbetares förhållningssätt till BBIC: "det finns hur många fördelar som helst, bara man har tid"* [Socialworkers attitudes towards BBIC: "there are infinite number of advantages, if you just have time"]. FoU Nordväst i Stockholms län

United Kingdom Department of Health. (2000). *Framework for Assessment of children in need and their families*. London: The Stationary Office. <https://www.the-stationery-office.co.uk/doh/facn/facn.htm>

Vikberg, J., & Wikström, A. (2010). *Barns behov I centrum efter implementeringen: -En kvalitativ studie om barns delaktighet, barns bästa och BBIC som arbetsredskap utifrån fem socialsekreterares perspektiv*. [BBIC after the implementation – a qualitative study of child participation and child's best interests from the perspective of socialworkers] Mid Sweden University, Faculty of Human Sciences, Department of Social Work.

Vis, S.A., Storvold, A., Skilbred D.T., Christiansen, Ø. & Andersen (2015) *Statusrapport om barnevernets undersøkelsesarbeid – høsten 2014*. [Progress report on child protection investigations in Norway - 2014]. Tromsø: RKBU Nord

Table 1. Overview of identified and excluded studies at each step in the selection process

Step	Identified studies (N=6885)	Reason for exclusion (N=6863)	Included studies (N=22)
1. Literature search			
PsychInfo	6360		
Social care online	500		
Nordart	5		
Web search	13		
Recommended by colleagues	7		
2. Literature review			
Not relevant after title evaluation		6154	
Not relevant after summary evaluation		389	
Not relevant after full text evaluation		147	
Full text not available		26	
Duplicates		147	
3. Included in the review			22

Table 2. Publications that discuss the use of structured assessments in general N=7

Author	Year	Country	Study type	N	Frameworks / thematic content
Bartelink	2015	Netherlands	Systematic review	17 (studies)	Strucured models:FACNF, ORBA Other collaboration based models: family group decision maiking, shared decision making,
Harris	2011	Australia	Theoretical discussion	NA	Risk assessment procedures in general
Helm	2011	UK	Theoretical discussion	NA	FACNF, Risk assessments in general
Gillingham	2011	Australia	Etnographic	6 (child safety centers)	Queensland Practice Manual
Gillingham	2010	Australia	Etnographic	6 (child safety centers)	Children's Research Centre in Wisconsin: Screening tool, the Response Priority tool, the Safety Assessment tool, and the Family Risk Evaluation tool (FRET)
Foster	2009	US	Mixed methods	28 social workers	IMPROVE (Intervention for Multisector Provider Enhancement) system
Schwalbe	2008	US	Theoretical	NA	Actuarial risk assessment and structured decision making

Table 3. Publications that discuss the use of assessment frameworks in Europe (other than Nordic countries) N=5

Author	Year	Country	Study type	N	Frameworks studied
Léveillé	2010	UK	Systematic review	36	FAFNC
Nethercott	2016	UK	Interview with professionals	29	Common assessment framework
Kwaadsteniet	2013	Netherlands	Case file study	160	ORBA
Bartelink	2014	Netherlands	Vignette study	80	ORBA
Buckley	2007	Ireland	Interview with professionals	62	Assessment of Vulnerable Children and their Families (AVCF)

Table 4. Publications that discuss the use of assessment frameworks in the Nordic countries N=10

Author	Year	Country	Study type	N	Frameworks studied
Socialstyrelsen	2007	Sweden	Summary of reports from implementation process	NA	BBIC
Ångman	2009	Sweden	Case file study	136	BBIC
Gladh	2011	Sweden	Case file study	132	BBIC
Svendsen	2012	Sweden	Focus group interview	56	BBIC
Hultman	2013	Sweden	Case file study	272	BBIC
Hultman	2015	Sweden	Case file study	259	BBIC
Vikberg	2010	Sweden	Interview with social workers	5	BBIC
Fransson	2010	Sweden	Interview with socialworkers	6	BBIC
Deloitte Consulting	2014	Denmark	Questionnaire to social workers / managers/ case file study	588/87/145	ICS
Høybye-Mortensen	2013	Denmark	Case study	3	ICS

