

**PA 101-0528 Unfounded Review Reports/Indicated Review Report**  
**December 1, 2025**

From PA 101-0528

- A. If the Department intends to classify a report as unfounded and it is subject to review, the review must be completed prior to finalizing the report as unfounded. The Deputy Director of Child Protection oversees a review process that ensures the Department reviews a random sample of at least 5% of child abuse and neglect reports involving a child of compulsory school age. Review must be done by the Area Administrator within 15 days of when the final unfounded finding is entered. If the Area Administrator determines that the recommendation of an unfounded finding is inconsistent with the Department's rules and procedures the Area Administrator shall document this in an Unfounded Review Report. This report must be forwarded to the investigator, supervisor, Regional Administrator, and Deputy Director of Child Protection to ensure appropriate corrective steps are taken before the final finding is entered. The Report must be included in the investigative file.
- B. If the Department intends to classify a report as indicated and it is subject to review, the review must be completed prior to finalizing the report as indicated. The Deputy Director of Child Protection oversees a review process that ensures the Department reviews a random sample of at least 5% of child abuse and neglect reports involving a child of compulsory school age the child is not a youth in care, and the Department is not opening a case for any type of services, including situations where the family refuses services. Review must be done by the Area Administrator within 15 days of when the final indicated finding is entered. If the Area Administrator determines that the recommendation of an indicated finding is inconsistent with the Department's rules and procedures the Area Administrator shall document this in an Indicated Review Report. This report must be forwarded to the investigator, supervisor, Regional Administrator and Deputy Director of child protection to ensure appropriate corrective steps are taken before the final finding is entered. The Report must be included in the investigative file.

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**Process Explanation**

SACWIS determines monthly review goals using an annually moving, 36-month average. For example, for the calendar year 2020, the system aggregates unfounded and indicated monthly Investigation data from January 2017 through December 2019. Once totaled, it automatically creates Investigation reviews for 5.5% of each finding group to provide the required 5% total and a nominal overage for instances where a review cannot be expediently completed.

The Investigations that are subject for review must have been submitted for approval by a worker to a supervisor. Those that are facility-related, have a current service case, are within 15 days of completion, or are otherwise administratively confidential or unqualified are excluded. Investigations that do meet the criteria are assigned to Area Administrators outside of their area of responsibility and are expected to be completed within 3 days. If this is not possible, the Deputy Director of Child Protection and surrogates reserves the right to re-assign or remove a review to avoid negatively impacting the completion of an Investigation. The program and goals are evaluated on a monthly basis to ensure timely completion of

reviews and active acknowledgement of responses by the primary worker and their immediate supervisor.

### **Unfounded Review Report Due December 1, 2025**

Beginning in December 2021, the Department captured investigations in pending status with a recommended finding of unfounded with a child of compulsory school age. On a weekly basis (with some variation during this reporting period due to COVID-19) investigations meeting this criterion were pulled and given to the assigned Area Administrator (outside the supervisory chain for the investigator) for review while it remained pending.

The Unfounded Review Report was completed by the Area Administrator assigned to review the case. Upon completion of the review of the case the Area Administrator determined whether the unfounded report was consistent with the Department's rules and procedures. If the reviewing AA determined the pending report did not comply with rule and procedure, the AA made written notification, detailing the specific issues to the Deputy of Child Protection, and the appropriate Regional Administrator, Area Administrator, supervisor, and investigator. At that time, under the assigned investigator's leadership, the noted non-compliance was addressed and rectified and shared with the Deputy Director.

Below describes our findings after the second review period of June 2025 - December 2025 and includes the number of unfounded reports reviewed, as well as the findings and recommendations detailed in the unfounded reports reviewed.

Further outlined are recommendations for reforms based on the findings of these reviews and the steps to implement them:

Total Unfounded Reports reviewed: 1983

- Findings requiring statewide implementation of response/reform:
  - 98% - Initial Supervision note was present.
    - 0% - N/A
  - 93% - Child Safety was addressed in note.
    - < 1% - N/A
  - 87% - Appropriate Collateral Contacts were made.
    - 3% - N/A
  - 89% - Appropriate Professional Collateral Contacts were made.
    - < 1% - N/A
  - 93% - Finding was consistent with Departments rules and procedures.
    - 2% - N/A
  - 2% - Report was recommended indicated, intact services were offered.
    - 95% - N/A
  - < 1% - Report was not recommended indicated and an intact case was not opened, and the family is otherwise eligible for intact services, and a discussion did take place with the AA about a referral being made to the State's Attorney's Office.
    - 96% - N/A
- Other findings from reviewed investigations:
  - 1.5% - Reviewed investigations were changed from unfounded to indicated after review.

The findings further highlighted statewide child protection performance in the assessment of safety with 99% of unfounded reports reflecting all children seen and assessed as well as the initial Child Endangerment Risk Assessment Protocol completed.

All reports returned for additional tasks and referral for services were addressed in formal supervision between the supervisor and the investigator. The identified tasks were completed promptly, and the case was brought to full compliance with rule and procedure, as well as referral for services. This occurred prior to the final finding and closure.

The case pull and subsequent review of the reports by the AA outside the supervisory chain occurred *prior* to the opportunity for the assigned supervisor to review the pending-approval case and as such it is impossible to assume that the pending report would not have been given the same attention to the need for additional tasks and referral for services. Regardless, each report returned was staffed as described above, the investigator was counseled as to the identified issues and restorative accountability provided and documented.

At the end of this reporting period, the Deputy Director of Child Protection convened a statewide Area Administrator meeting, including the Deputy of Child Protection, the Regional Administrators and all Area Administrators to share the findings and common themes of the reports returned. Each Area Administrator with their supervisors will address these common themes and need for increased accountability to the findings with their teams via their daily check-ins, weekly supervision, and monthly site meetings.

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### **Indicated Review Report December 1, 2025**

Beginning in December 2021, the Department captured investigations in pending status with a recommended finding of indicated with a child of compulsory school age 0-5. On a weekly basis (with some variation during this period due to COVID-19) investigations meeting this criterion were pulled and given to the assigned Area Administrator (outside the supervisory chain for the investigator) for review while it remained pending.

The Indicated Review Report was completed by the Area Administrator assigned to review the case. Upon completion of the review of the case the Area Administrator (AA) determined whether the indicated report was consistent with the Department's rules and procedures. If the reviewing AA determined the pending report did not comply with rule and procedure, the AA made written notification, detailing the specific issues to the Deputy of Child Protection, and the appropriate Regional Administrator, Area Administrator, supervisor, and investigator. At that time, under the assigned investigator's leadership, the noted non-compliance was addressed and rectified, and shared with the Deputy Director.

Below describes our findings after the second review period of June 2025 - December 2025 and includes the number of indicated reports reviewed, as well as the findings and recommendations detailed in the indicated reports reviewed.

Further outlined are recommendations for reforms based on the findings of these reviews and the steps to implement them:

Total Indicated Reports reviewed during SACWIS process: 576

- Findings requiring statewide implementation of response/reform:
  - 97% - Initial Supervision note was present.
    - 0% - N/A

- 93% - Child Safety was addressed in note.
  - 0% - N/A
- 89% - Appropriate Collateral Contacts were made.
  - 2% - N/A
- 91% - Appropriate Professional Collateral Contacts were made.
  - <1% - N/A
- 94% - Finding was consistent with Departments rules and procedures.
  - 6% - N/A
- 54% - Report was recommended indicated, intact services were offered.
  - 16% - N/A
- 12% - Report was recommended indicated and an intact case was not opened, and the family is otherwise eligible for intact services, and a discussion did take place with the AA about a referral being made to the State's Attorney's Office.
  - 32% - N/A
- Other findings from reviewed investigations:
  - 1.2% - Reviewed investigations were changed from indicated to unfounded after review.

The findings further highlighted statewide child protection performance in the assessment of safety with 99.6% of indicated reports reflecting all children seen and assessed as well as the initial Child Endangerment Risk Assessment Protocol completed.

All reports returned for additional tasks and referral for services were addressed in formal supervision between the supervisor and the investigator. The identified tasks were completed promptly, and the case was brought to full compliance with rule and procedure, as well as referral for services. This occurred prior to the final finding and closure.

The case pull and subsequent review of the reports by the AA outside the supervisory chain occurred *prior* to the opportunity for the assigned supervisor to review the pending-approval case and as such it is impossible to assume that the pending report would not have been given the same attention to the need for additional tasks and referral for services. Regardless, each report returned was staffed as described above, the investigator was counseled as to the identified issues and restorative accountability provided and documented.

At the end of this reporting period, the Deputy Director of Child Protection convened a statewide Area Administrator meeting, including the Deputy of Child Protection, the Regional Administrators and all Area Administrators to share the findings and common themes of the reports returned. Each Area Administrator with their supervisors will address these common themes and need for increased accountability to the findings with their teams via their daily check-ins, weekly supervision, and monthly site meetings.

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