



# Recurrence Rates by Urgent Protection and Chronic Need

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## Introduction

The Ontario Child Abuse and Neglect Data System (OCANDS) is the first data system in Ontario to longitudinally track children and their families involved with the child welfare system. OCANDS extracts administrative data from participating child welfare agencies and standardizes these data to better understand the trajectories of children and their families across their involvement with the system. One of the tasks performed by OCANDS is to calculate “Service Performance Indicators” (SPIs) for participating child welfare agencies. In 2011, 24 SPIs were endorsed by the province as a metric that would represent the key dimensions of child welfare initially put forward by the National Outcomes Matrix (NOM) (Trocmé et al., 2009): safety, permanence and wellbeing, as well as agency management (Commission to Promote Sustainable Child Welfare [Commission], 2012). For additional contextual information about the SPIs, please see the OCANDS fact sheets (Fallon et al., 2016; Fallon, Filippelli, Black, King, & Ekins, 2016).

With resources from a Social Sciences and Humanities Research Council (SSHRC) Connections grant, we have partnered with a group of agencies to use OCANDS to address their specific questions about the experiences of children and their families who are served by agencies in Ontario. The purpose of this information sheet is to present data collected from 6 participating agencies on recurrence. **Recurrence** refers to families coming back into contact with the child welfare system after their files were closed. This is viewed as a proxy for service effectiveness.

This data was disaggregated by urgent protection and chronic need classifications (see Trocmé et al., 2014). SPI 4 and 5 cases were further categorized as either urgent protection or chronic need cases. For the purposes of this information sheet, investigations were classified as either urgent protection or chronic need. Investigations were classified as urgent protection if : a) there was a child in the family younger than four and the investigation was for neglect or physical abuse, b) the primary concern was sexual abuse, or c) a child had sustained physical harm (Trocmé, Kyte, Sinha, & Fallon, 2014).

Investigations involving severe injuries were classified as requiring an urgent investigation given that such cases can lead to an escalating pattern of maltreatment and the importance of forensic evidence (Dubowitz & Bennett, 2007); sexual abuse investigations were included as requiring an urgent investigation because of the importance of forensic evidence and the possibility that the

offender might threaten or pressure the child to recant (Paine & Hansen, 2002); and abuse and neglect cases involving children under the age of four were included as urgent because of the increased likelihood of severe injury (Knight & Collins, 2005; Kajese et al., 2011), their limited verbal skills, and the possibility that harm may escape scrutiny from daycare and school programs. Chronic need cases are those which are being investigated for family functioning concerns which, although extremely important for the promotion of child and family wellbeing, do not have the same time limited, forensic considerations of the urgent protection cases.

## Methodology

SPI 4 (Recurrence of Child Protection Concerns in a Family after an Investigation) is calculated by documenting each closed investigation for the fiscal year and following that investigation forward by one year. This would calculate a 12 month verified recurrence for investigations. Verification refers to whether it is more probable than not that the originally alleged or new child protection concerns (including harm or risk of harm) have occurred or currently exist (Commission, 2012). SPI 5 (Recurrence of Child Protection Concerns in a Family after Ongoing Protection Services) is calculated by documenting each closed ongoing case file for the fiscal year and following that case forward by one year. This would calculate a 12 month verified recurrence for on-going cases.

## Findings

### **Recurrence by Urgent Protection and Chronic Needs: Index and Recurrence Intervention by Fiscal Year**

Tables 1 and 2 show the recurrence rates for cases classified as urgent or chronic at both the index and recurrence stages. Using 2013/2014 fiscal year as an example, of the 3759 cases classified as urgent protection when they were closed at investigation, 4.23% have recurred as urgent protection cases and 6.68% have come back as chronic need (see Table 1). The number of cases initially categorized as chronic following investigation was approximately 3 times higher at 11936 (76% of all cases). Urgent protection cases recurred at a rate of 1.90%; for chronic need, the recurrence rate was 11.02%. Table 2 provides data related to cases that were closed following on-going services. The majority of cases do not recur within 12 months. Cases are more likely to return as chronic need cases. The greatest number of cases that do recur are chronic need cases returning as chronic need.



Table 1.  
12-Month Service Recurrence (SPI-4) by Urgent or Chronic Classification (2013/2014)

Index Intervention Type	Recur Intervention Type	2013/2014		
		Denom *	Num **	%
Urgent	Urgent	3759	159	4.23%
	Chronic		251	6.68%
Chronic	Urgent	11936	227	1.90%
	Chronic		1315	11.02%
<b>Total</b>		<b>15695</b>	<b>1952</b>	<b>12.44%</b>

\***Denominator:** All cases closed at investigation during the fiscal year (both verified and not-verified)  
 \*\***Numerator:** All cases closed at investigation during the fiscal year that were re-opened within 12 months of case closure where the allegations of child welfare concern were verified

Table 2.  
12-Month Service Recurrence (SPI-5) by Urgent or Chronic Classification (2013/2014)

Index Intervention Type	Recur Intervention Type	2013/2014		
		Denom*	Num**	%
Urgent	Urgent	917	63	6.87%
	Chronic		98	10.69%
Chronic	Urgent	4522	120	2.65%
	Chronic		641	14.18%
<b>Total</b>		<b>5439</b>	<b>922</b>	<b>16.95%</b>

\***Denominator:** All cases closed at on-going services during the fiscal year (both verified and not-verified)  
 \*\***Numerator:** All cases closed at on-going services during the fiscal year that were re-opened within 12 months of case closure where the allegations of child welfare concern were verified

### Recurrence by Urgent Protection and Chronic Needs: Index Intervention by Fiscal Year

The rate of service recurrence, disaggregated by urgent and chronic classifications at the index (first) intervention stage are presented below, for cases closed at investigation (SPI-4; Table 3) and ongoing services (SPI-5; Table 4) over the last three fiscal years. Recurrence rates are stable. For both urgent and chronic cases, the recurrence rate is between 11% and 13% (for SPI 4) and between 14% and 18% (for SPI 5), indicating that the majority of cases do not recur during the 12 months following discharge.

Table 3.  
12-Month Service Recurrence (SPI-4) by Index Type (2011/2012, 2012/2013, 2013/2014)

Index Intervention Type	2011/2012			2012/2013			2013/2014		
	Denom	Num	%	Denom	Num	%	Denom	Num	%
Urgent	3947	517	13.10%	3692	437	11.84%	3759	419	11.15%
Chronic	12750	1762	13.82%	12114	1590	13.13%	11936	1545	12.94%

Table 4.  
12-Month Service Recurrence (SPI-5) by Index Type (2011/2012, 2012/2013, 2013/2014)

Index Intervention Type	2011/2012			2012/2013			2013/2014		
	Denom	Num	%	Denom	Num	%	Denom	Num	%
Urgent	794	132	16.62%	890	130	14.61%	917	162	17.67%
Chronic	3802	671	17.65%	4095	734	17.92%	4522	772	17.07%

### Recurrence by Urgent Protection and Chronic Needs: Recurrence Intervention by Fiscal Year

Tables 5 and 6 indicate the rate of service recurrence, disaggregated by urgent and chronic classifications at the recurrence stage (how cases were classified when they were re-opened



within 12 months), for cases closed at investigation and ongoing services. Across the 3 fiscal years, cases that were closed at investigation came back into contact with the six agencies with a chronic need concern approximately 10% of the time, and with an urgent protection concern approximately 2.3% of the time (SPI 4). Cases closed at on-going services came back at approximate rates of 13% for chronic needs and 3% for urgent protection concerns (SPI 5).

Table 5.

*12-Month Service Recurrence (SPI-4) by Recurrence Type (2011/2012, 2012/2013, 2013/2014)*

Recur Intervention Type	2011/2012			2012/2013			2013/2014		
	Denom	Num	%	Denom	Num	%	Denom	Num	%
Urgent	18045	454	2.52%	17211	363	2.11%		395	2.32%
Chronic		1935	10.72%		1769	10.28%	17020	1662	9.76%

Table 6.

*12-Month Service Recurrence (SPI-5) by Recurrence Type (2011/2012, 2012/2013, 2013/2014)*

Recur Intervention Type	2011/2012			2012/2013			2013/2014		
	Denom	Num	%	Denom	Num	%	Denom	Num	%
Urgent	5178	148	2.86%	5604	174	3.10%	6095	196	3.22%
Chronic		671	12.96%		745	13.29%		802	13.16%

## Limitations

OCANDS collects administrative data from participating CASs. Administrative data was designed for case management. For both SPI 4 and 5, verified recurrence describes cases where a verified investigation occurred in the 12-month period following the case closure. It is important to note that the rate of recurrence is not equivalent to the rate of re-victimization. A verification decision can mean that the family requires service, or the child was in fact victimized. The verification of risk factors does not necessarily mean that a maltreatment incident occurred.

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