The Child Endangerment Risk Assessment Protocol (CERAP) is a safety assessment tool used by the Illinois Department of Children and Family Services (DCFS) as part of all Child Protective Services (CPS) investigations to determine whether children are at immediate risk of moderate to severe harm. The CERAP consists of 14 yes or no questions that assess the presence of specific safety threats (e.g., member of the household describes the child in predominantly negative terms or has extremely unrealistic expectations). Following these questions, the investigator is asked to provide detailed information on any safety threats present and to describe family strengths or other circumstances that may mitigate these threats to safety. Based on consideration of all available information, the worker must make a safety decision about whether any child in the home is unsafe (i.e., in immediate danger of a moderate to severe nature).

If a household is deemed unsafe based on the CERAP assessment, the investigator must work with the family to develop a sound safety plan that addresses the safety threats or must remove the child(ren) from the home. If the child remains in the home, additional safety assessment must occur every five working days until the child is either determined to be safe or is removed from the legal custody of the caretaker. The investigator must complete an additional safety assessment at the conclusion of the investigation, unless a service case is opened, in which case the follow-up worker completes a new safety assessment at case opening. Re-assessment at the conclusion of the investigation is not required when the investigation is closed within 30 days, although some investigators elect to do one in this circumstance anyway. Despite the specific requirements for CERAP assessment at the close of the investigation, examination of CERAP data reveal that in 2008 only 38% of investigations that require a re-assessment at closing received one.

Since 1997, the Children and Family Research Center has examined the impact of the CERAP on child safety outcomes in Illinois. Recent evaluation has examined the association between CERAP use in the field and child maltreatment recurrence, i.e., whether or not a child experiences a second maltreatment report within a given period of time following an initial report. The goal of this research is to determine which practices are associated with future child safety. The most recent CERAP evaluation sought to answer the following questions:

• Of those investigations that required a CERAP re-assessment at their conclusion, what percentage received one?

• Among the investigations that required one, was CERAP re-assessment at the conclusion of an investigation associated with lower risk of future maltreatment?

• Even though it is not required by policy, is CERAP re-assessment at the conclusion of an investigation associated with lower risk of future maltreatment among investigations closed within 30 days?
Figure 1 presents the percentage of indicated children with CERAP assessments completed at the conclusion of the investigation (of those that required one per policy). It should be noted that only those households with an initial safety determination of “unsafe” require additional safety assessment; those with a safety determination of “safe” do not require additional safety assessment. The percentage of households with a re-assessment has increased steadily from 2003 to 2009 for both safe and unsafe households, although the majority of indicated households are not re-assessed at the conclusion of the investigation.

**FIGURE 1:** Indicated children with CERAP re-assessment at investigation close
Figure 2 shows the rates of 6-month maltreatment recurrence among children who were considered unsafe during the initial safety assessment and compares those that either did or did not have a CERAP re-assessment at the conclusion of the investigation. The results show a consistent relationship between the CERAP re-assessment at investigation conclusion and decreased risk of maltreatment. Interestingly, this finding was significant both for children deemed unsafe at the initial safety assessment (Figure 2) and those considered initially safe (Figure 3), even though current policy does not require CERAP re-assessment for these initially safe cases.

**FIGURE 2:** 6-month recurrence rates among initially unsafe cases with and without CERAP assessment at investigation closing

![Graph showing 6-month recurrence rates among initially unsafe cases with and without CERAP assessment at investigation closing.](image)

**FIGURE 3:** 6-month recurrence rates among initially safe cases with and without CERAP assessment at investigation closing

![Graph showing 6-month recurrence rates among initially safe cases with and without CERAP assessment at investigation closing.](image)
These analyses excluded investigations completed within 30 days of report date, because such cases do not require a safety re-assessment at the conclusion of the investigation. Since CERAP re-assessment has been shown to have a consistent and significant relationship with decreased recurrence in investigations completed over 30 days, it is possible that this relationship holds true for investigations closed within 30 days or less. Additional analyses examined this question.

Recurrence rates for unsafe children in investigations closed within 30 days are presented in Figure 4 – examined by initial safety determination and CERAP re-assessment at investigation conclusion. Although the actual number of children experiencing recurrence is small, the recurrence rates among those in unsafe households without additional safety assessment (orange bars) are usually higher than those with additional safety assessment (purple bars).

The results of the CERAP evaluations suggest that safety re-assessment in general, and at the conclusion of the investigation in particular, decreases the risk of maltreatment recurrence following a Child Protective Services (CPS) investigation. This relationship is robust – it remains significant whether the recurrence time-frame is short-term (60 days) or 6 months, and whether the families were investigated for the first time or had previous maltreatment reports. The exact mechanism through which CERAP re-assessment exerts an influence on later child safety is still unknown. There may be factors related to either the workers or the families that influence whether or not additional safety assessment is completed. It is also quite possible that the systematic evidence collection and critical thinking required to complete a safety assessment helps investigators make better judgments about child safety.
Whatever the mechanism, requiring CERAP re-assessment policy above its current level of 40% may lead to a decrease in maltreatment recurrence rates in Illinois. In addition, since the protective effect of CERAP re-assessment extends to those cases initially assessed as “safe,” and these cases comprise around 85-90% of indicated investigations each year, increasing compliance with CERAP reassessment in these cases as well could make an even bigger impact on overall recurrence rates. A renewed emphasis on CERAP re-assessment could be coupled with the changes in practice that will occur when the enhanced CERAP model is implemented.

Recommended Citation

Related Publications
For the full report, see Fuller, T.L., & Nieto, M. (2010). Illinois Child Endangerment Risk Assessment Protocol: FY10 Annual Evaluation. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign. This report is available on the Center website: cfrc.illinois.edu

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