

- The number of child welfare referrals has increased by **29%** from 2004 to 2013.
- In 2013, **40%** of referrals were accepted for assessment.
- In 2013, **20%** of the assessments were determined to be founded for abuse or neglect.
- The number of assessments opened to an ongoing case for services has declined by **31%** from 2004 to 2013.

CHILD PROTECTION TRENDS IN COLORADO

This table shows the number of unduplicated referrals, assessments, founded assessments, and ongoing cases opened from assessment handled by child welfare for abuse, neglect, or children beyond the control of their parents or guardians from 2004 to 2013. These data represent children served due to abuse or neglect as well as youth beyond the control of their parents, the two primary populations served by the Colorado Child Welfare system.

Calendar Year	Referrals	Assessments	% Assessed	Founded Assessments	% Founded	Cases Opened*	% Opened
2004	64,527	33,864	52%	6,910	20%	10,127	30%
2005	66,804	34,098	51%	7,151	21%	10,405	31%
2006	69,524	35,603	51%	7,334	21%	9,924	28%
2007	72,505	37,245	51%	7,267	20%	9,614	26%
2008	76,524	38,540	50%	7,538	20%	9,238	24%
2009	74,706	38,273	51%	7,575	20%	8,230	22%
2010	80,118	37,859	47%	7,402	20%	7,684	20%
2011	80,472	34,752	43%	6,864	20%	7,164	21%
2012	83,086	34,181	41%	6,989	20%	7,313	21%
2013	83,504	33,234	40%	6,732	20%	7,033	21%

Source: Trails

* Cases opened represents new traditional child welfare cases being opened from assessments, closed cases re-opened as a result of an assessment, assessments connected to existing open cases, and Family Assessment Response (FAR) cases in which services were provided.

The number of referrals statewide has increased by **29%** from 2004 to 2013. The number of assessments decreased by **2%** from 2004 to 2013. In the last three years, there has been a decrease in assessments as a result of enhanced team-based screening practices and new prevention services.

The number of cases opened has declined from 2004 to 2013 by **31%**. The decline in opened cases over this span can be attributed to better screening and serving lower risk families through collaborative community efforts, family assessment response post services and preventative services, rather than through traditional ongoing child protection case services. This is consistent with best practice and other national trends.

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Referrals, Assessments, Founded Assessments and Cases Opened by Year

