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September 2026 | OAS-25-06-038

Arkansas Failed to Comply With the Immediate Screening, Risk and Safety Assessment, and Investigation Requirements for Responding to Reports of Child Abuse and Neglect

REPORT HIGHLIGHTS



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Arkansas Failed to Comply With the Immediate Screening, Risk and Safety Assessment, and Investigation Requirements for Responding to Reports of Child Abuse and Neglect

Why OIG Did This Audit

- Abuse and neglect against a child by a parent, caregiver, or another person can have a long-term impact on the child's health, opportunity, and well-being. Abuse can be physical, sexual, or emotional in nature. Neglect is a failure to meet the child's basic needs, such as housing, food, clothing, education, and access to medical care.
- This audit is part of a series that examines States' compliance with the Child Abuse Prevention and Treatment Act's requirements for the intake, screening, risk and safety assessment, and investigation of reports of child abuse and neglect. Based on our risk assessment, we selected Arkansas for one of our audits.

What OIG Found

Arkansas failed to meet requirements for the immediate screening, risk and safety assessment, and investigation of child abuse and neglect reports. Arkansas inappropriately screened out reports involving allegations of child rape and of children being watched by cameras in their bedrooms as they undressed. Arkansas also failed to notify law enforcement about determinations of severe maltreatment—which under State law can include sexual abuse or life-threatening harm to a child. In addition, Arkansas could not support that interviews with the alleged victims' custodial and noncustodial parents were completed as required.

Specifically, we found that 10 of the 70 screened out reports in our sample had been inappropriately screened out. In addition, 138 of the 140 accepted reports in our sample did not comply with requirements for immediate screening, risk and safety assessment, or investigation.

What OIG Recommends

We made six recommendations to Arkansas, including that it immediately review the inappropriately screened-out sample reports, update its guidance, strengthen its procedures, implement system enhancements, and reinforce existing requirements. Our full recommendations are in the report.

Arkansas concurred with three of our recommendations and partially concurred with the other three. It detailed steps it has taken and plans to take in response to our recommendations.

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INTRODUCTION

WHY WE DID THIS AUDIT

Abuse and neglect of a child under the age of 18 by a parent, caregiver, or another person in a custodial role can have a long-term impact on the child's health, opportunity, and well-being. Abuse can be physical, sexual, or emotional in nature. Neglect is a failure to meet the child's basic needs, such as housing, food, clothing, education, and access to medical care. Without effective State oversight to ensure that all reports of child abuse and neglect are responded to in accordance with policies and procedures, the safety of children cannot be assured.

The Child Abuse Prevention and Treatment Act (CAPTA) provides funds to assist States in child abuse and neglect prevention, assessment, investigation, prosecution, and treatment activities. In Federal fiscal year 2024, the Administration for Children and Families (ACF) awarded \$103.2 million in CAPTA State grant funding to 50 States, the District of Columbia, and Puerto Rico to improve their child protective services.

This audit is part of a series that examines States' compliance with CAPTA requirements for the intake, screening, assessment, and investigation of reports of child abuse and neglect. To identify high-risk States, we conducted a risk assessment and compared several factors, including the percentage of children who were victims, rate of child fatalities, and the average time the relevant State agency took to respond to a report of abuse.^{1, 2} As a result of our risk assessment—and after considering Arkansas news reports in which the abuse of a child had been reported to the State's child abuse hotline 29 times in 11 years before police intervened—we selected Arkansas for one of our audits.³ Our audit focused on reports of child abuse and neglect that occurred in a child's home. The OIG performed similar audits in Maine and West Virginia to determine whether those States' responses to abuse and neglect reports received through their respective child abuse intake channels complied with Federal and State requirements.⁴ We found noncompliance issues that increased the risk of harm to children.

¹ A victim is a child for whom the State determined at least one maltreatment was substantiated or indicated and a disposition of substantiated or indicated was assigned for a child in a report.

² The response time is measured from when the relevant agency first received a referral to the initial face-to-face contact with the alleged victim or with another person who could provide information on the allegation(s).

³ Lauren Inman, "[How 29 abuse calls stacked up against parents before Mountain Home police intervened](#)," Ozarks First (Nov. 8, 2024). Accessed on July 21, 2026.

⁴ OIG, [Maine Did Not Comply With Screening, Assessment, and Investigation Requirements for Responding to Reports of Child Abuse and Neglect \(A-01-23-02500\)](#), Nov. 7, 2024; and OIG, [West Virginia Did Not Comply With Intake, Screening, Assessment, and Investigation Requirements for Responding to Reports of Child Abuse and Neglect \(OAS-25-01-011\)](#), Sept. 26, 2025.

OBJECTIVE

Our objective was to determine whether the Arkansas Department of Human Services (DHS) complied with requirements for the immediate screening, risk and safety assessment, and investigation of reports of child abuse or neglect.

BACKGROUND

CAPTA Grants to States

CAPTA was enacted in 1974 at a time of growing awareness and concern about abuse of children in their homes. The law was reauthorized and amended several times, including a reauthorization in December 2010 and an amendment in December 2024.⁵ The American Rescue Plan Act of 2021 included \$100 million in supplemental CAPTA State grant funding with a 5-year project and expenditure period from October 1, 2020, to September 30, 2025.⁶ Within ACF, the Children's Bureau administers CAPTA State grants. To apply for CAPTA grant funding, a State must submit a plan describing the activities that the State will carry out using this funding. The plan must include an assurance signed by the State's Governor certifying that the State has in effect, and is enforcing, a law or statewide program on child abuse and neglect. The law or program must include procedures for the immediate screening, risk and safety assessment, and prompt investigation of reports.⁷ Arkansas's CAPTA Plan included the required certification, signed by the Governor on August 31, 2011.

Arkansas Department of Human Services, Division of Children & Family Services

The Division of Children and Family Services (DCFS) within DHS is the designated State agency for the CAPTA grant. DCFS is responsible for the safety of children and youth in the State, which includes investigating reports of child maltreatment. The *DCFS Policy and Procedure Manual (DCFS Manual)* outlines requirements for the investigation of child maltreatment reports.⁸ Specifically, DCFS must promptly investigate all reports of known or suspected child maltreatment of children under 18

Arkansas defines **child maltreatment** as abuse, sexual abuse, neglect, sexual exploitation, or abandonment.

⁵ CAPTA was originally enacted Jan. 31, 1974 (P.L. 93-247), and was last reauthorized on Dec. 20, 2010, by the CAPTA Reauthorization Act of 2010 (P.L. 111-320). The law was amended in 2015, 2016, 2018, 2019, 2023 and on Dec. 23, 2024, by the Jenna Quinn Law (P.L. 118-193). CAPTA is codified at 42 U.S.C. §§ 5101–5115.

⁶ P.L. 117-2 (Mar. 11, 2021), § 2205.

⁷ 42 U.S.C. § 5106a(b)(2)(B)(iv). State plans remain in effect for the duration of the State's participation in the CAPTA program. States are required to periodically review and revise the Plan as necessary to reflect changes in State strategies and programs. States are required to inform the Children's Bureau of any substantive changes to its laws or regulations related to child abuse and neglect that may affect their eligibility for CAPTA State funding (42 U.S.C. §§ 5106a(b)(1)(B) and (C)).

⁸ *DCFS Manual*, Policy II-D: Investigation of Child Maltreatment Reports.

and take immediate steps to protect a maltreated child and any other child under the care of the same alleged offender.

Arkansas State Police Crimes Against Children Division

Arkansas Code Annotated section 12-8-501 authorized the Department of Arkansas State Police to create the Crimes Against Children Division (CACD). CACD was created to conduct investigations into severe child maltreatment and to administer the statewide child abuse hotline. DCFS and CACD have an agreement in place outlining CACD's responsibilities for operating and maintaining the child abuse hotline, the types of reports that CACD will investigate, and procedural requirements that CACD must follow while conducting investigations.⁹ This agreement states that CACD shall follow relevant DHS rules and procedures and instructs CACD to work with DCFS to revise, as needed, the *Structured Decision-Making Hotline Assessment Procedures Manual (Hotline Manual)*. In addition, CACD developed a procedure guide for its investigators.

Arkansas defines **severe maltreatment** as sexual abuse or exploitation; acts or omissions that may or do result in death; abuse involving deadly weapons; serious physical injuries; abandonment; failure to thrive; and actions causing substantial, observable changes in a child's behavior or demeanor.

Screening and Investigation Process

Screening of a Report

The child abuse hotline is staffed by trained CACD hotline operators who receive reports of suspected child abuse and neglect statewide via a toll-free number 24 hours a day, 7 days a week.¹⁰ Reports can also be received via fax or online through the Arkansas mandated reporter portal, which is designed for individuals, such as doctors and teachers, who are legally required to notify the division if they suspect a child has been subjected to maltreatment.¹¹ Our audit included reports received through all these channels.

When a report of suspected child maltreatment is received, the hotline operator is responsible for determining whether the report meets the statutory criteria for child abuse and neglect. This process includes an initial screening, a search of prior reports, and collecting all the necessary information. This includes but is not limited to:

⁹ DHS, Agreement Between the Arkansas Department of Human Services (DHS) Division of Children and Family Services (DCFS) and the Department of Public Safety (DPS), Crimes Against Children Division (CACD), Remainder of State Fiscal Year 2024. Feb. 13, 2024.

¹⁰ The hotline has two numbers, 1-800-482-5964 and 1-844-SAVEACHILD, both of which are answered by hotline operators.

¹¹ The Mandated Reporter Portal can be found [here](#).

- Allegations that, if determined to be true, would meet the statutory definition of child maltreatment
- The child or child's family's presence in Arkansas, or the incident having occurred in Arkansas
- Sufficient information to identify and locate the child or the child's family¹²

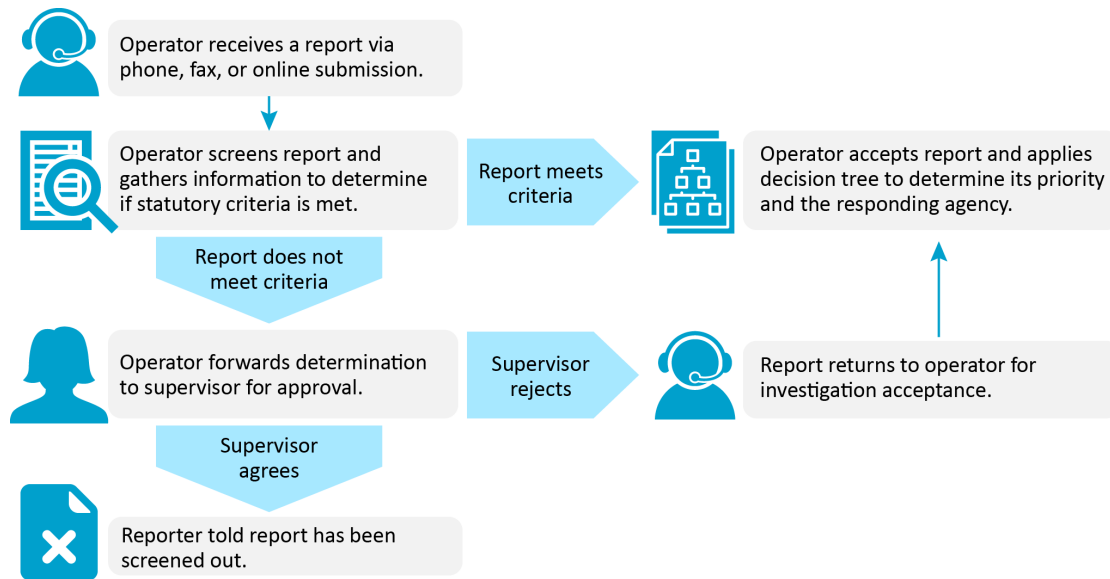
If the hotline operator believes the information provided does not meet the statutory criteria for child abuse and neglect, they forward the report to a supervisor for confirmation. If the supervisor agrees with the operator's finding, the reporter is notified that the report will be screened out and will not be investigated. However, if the hotline operator or supervisor believes the report meets the statutory criteria of suspected abuse or neglect, the report is accepted for investigation. Once a report is accepted, the hotline operator uses a decision tree to determine if the allegation is Priority 1 or 2 and the appropriate agency for response. Priority 1 reports generally involve severe maltreatment, unsafe living conditions, a child who is unsupervised for their age and circumstance, or a child who requires immediate medical or mental health care. Those investigations must begin within 24 hours of receipt of the report.¹³ Priority 2 reports involve minor injuries that do not indicate immediate danger, or neglect such as inadequate clothing or food. These investigations must begin within 72 hours of a report's receipt.¹⁴ This process is outlined in Figure 1.

¹² A.C.A. § 12-18-303 defines the minimum requirements for a report to be accepted by the child abuse hotline.

¹³ A 24-hour response does not apply when the abuse report is more than a year old, the alleged victim is in the custody of DHS or residing in a facility, or the alleged victim no longer has contact with the alleged offender.

¹⁴ Procedure II-D3(B) of the *DCFS Manual* states that child abuse and neglect investigations are considered initiated once the alleged victim is either interviewed or observed outside the presence of the alleged offender.

Figure 1: Arkansas Hotline Process



For allegations of severe maltreatment, the investigating agency must notify local law enforcement immediately by telephone and notify the prosecuting attorney's office of the investigation within 5 business days of receiving the report. These notifications ensure that the appropriate authorities are informed of the civil investigation and can coordinate with the investigating agency if a criminal investigation is pursued.

Investigation of Child Maltreatment Reports

After receiving a child maltreatment report, the investigating agency completes a Structured Decision-Making Safety Assessment, which it uses to determine whether any safety threats exist that could place children in imminent danger. If a threat is identified, DCFS is required to develop a protection plan that would allow the child or children to remain safe in their home or have them placed into protective custody.¹⁵

The investigation shall include interviews with the child or children, the parents (both custodial and noncustodial), the alleged offender (if neither parent is the alleged offender), healthcare providers, and any other relevant persons.¹⁶ The alleged offender is made aware that they are the target of the investigation and both they and the child's family are given an outline of the investigation process.

¹⁵ If CACD is assigned as the investigating agency, the CACD investigator must involve DCFS to further assess the safety of the children.

¹⁶ Current or past healthcare providers must be interviewed when a healthcare provider reported the allegation of child maltreatment.

Investigation Determination

The investigating agency must determine whether the allegation is unsubstantiated, true, or true but exempted, within 45 days of receiving the initial report.¹⁷ Notices of determination are sent out to the alleged offender, victim or alleged victim, and custodial and noncustodial parents. For true determinations, the notifications are also sent to the schools of the victim, the prosecuting attorney, and the local law enforcement agency.¹⁸

HOW WE CONDUCTED THIS AUDIT

We obtained and reviewed data from Arkansas' Children's Reporting Information System (CHRIS) consisting of 27,690 screened-out reports and 21,268 in-home reports accepted for investigation received by the Arkansas Child Abuse and Neglect Hotline between October 1, 2023, and September 30, 2024 (audit period).¹⁹ We then performed two separate samples. The first was a simple random sample of 70 screened-out reports. For each screened-out report, we assessed whether the determination met State requirements. The second sample was a stratified random sample of 140 in-home reports accepted for investigation, with 70 assigned to DCFS and 70 assigned to CACD. For each of those sample items, we determined whether DCFS or CACD complied with State requirements for the immediate screening, risk and safety assessment, and investigation of reports.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Appendix A contains the details of our audit scope and methodology. See Appendix B through E for our statistical sampling methodology and sample results and estimates.

¹⁷ A "true but exempted" determination means the allegations are supported by a preponderance of the evidence, but the offender's name is not entered into the Child Maltreatment Central Registry. This exemption applies in cases such as when a parent chooses to provide spiritual healing instead of medical treatment or when the offender is a juvenile.

¹⁸ Prosecuting attorneys and law enforcement are required by State law to be notified if the allegation is classified as severe maltreatment.

¹⁹ The investigation completion date may have occurred after Sept. 30, 2024.

FINDINGS

DCFS and CACD failed to meet requirements for the immediate screening, risk and safety assessment, and investigation of child abuse and neglect reports. CACD inappropriately screened out reports involving allegations of child rape and of children being watched by cameras in their bedrooms as they undressed. Both DCFS and CACD failed to notify law enforcement about true determinations of severe maltreatment, which under Arkansas law can include sexual abuse or life-threatening harm to a child. In addition, the agencies could not support that interviews with the alleged victims' custodial and noncustodial parents were completed as required.

Specifically, we found that 10 of the 70 screened-out reports in our sample had been inappropriately screened out. In addition, 138 of the 140 accepted reports in our sample did not comply with requirements for immediate screening, risk and safety assessment, or investigation. As a result of our sample results, we estimated that 14 percent (3,956) of the 27,690 screened-out reports were not handled in accordance with State requirements.²⁰ We also estimated that 99 percent (20,964) of the 21,268 accepted reports were noncompliant with one or more requirements related to screening, assessment, or investigation.²¹

Noncompliance occurred for several reasons, including investigators not following policies and procedures, and procedures that did not fully reflect current practices. In addition, DCFS officials said that staffing challenges played a role. These issues reflect systemic weaknesses in DCFS and CACD's intake and investigative processes and increase the risk of harm to children.

REPORTS OF CHILD ABUSE AND NEGLECT WERE NOT SCREENED OUT APPROPRIATELY

When a report of child maltreatment comes into the hotline, State law requires that it be accepted if it meets certain criteria, including: (1) the allegations, if true, would constitute child maltreatment; (2) the child or the child's family must be present in Arkansas, or the incident must have occurred in Arkansas; and (3) sufficient identifying information must have been provided to identify and locate the child or the child's family (A.C.A. § 12-18-303 (a)).

If a report is screened out, the hotline worker must indicate the basis for its rejection. One reason for screen-out is that the report is a duplicate referral. This indicates that the same incident was previously received and accepted. Any additional information from the duplicate referral would be forwarded to the appropriate investigator (*Hotline Manual* Section 1).

For 10 of the 70 screened-out reports in our sample, the hotline report was inappropriately screened out. DCFS officials agreed that nine of those reports should have been accepted and

²⁰ The 90 percent confidence interval for this estimate ranges from 7.97 percent to 23.02 percent.

²¹ The 90 percent confidence interval for this estimate ranges from 96.56 percent to 100 percent.

referred for investigation because the allegations met the criteria for initiating a child maltreatment investigation. They included the following:

- One report stated that an 11-year-old child disclosed being raped by a family member when she was 6 years old. Hotline operators screened it out because they believed that a young child might not have a clear understanding of the word “rape.”
- One report stated that two children were allegedly being watched via security cameras while they undressed in their bedroom. This report was screened out because the operators’ *Hotline Manual* did not include protocols for addressing allegations of voyeurism. However, the *Child Maltreatment Investigation Determination Guide*, used by investigators to identify elements of child maltreatment, includes voyeurism in the statutory definition of sexual abuse.²²
- One report from a mandated reporter stated that a 7-year-old had missed 16 days of school, that the family had given conflicting reasons for the absence, and that the child was failing most subjects. Hotline staff screened out this report because they did not believe the allegations met the threshold for this type of abuse.
- Two reports were screened out because hotline staff said they were unable to locate a person central to the report. In one case, hotline staff said they could not locate the alleged victim. However, no documentation was provided indicating that they attempted to locate the individual, such as by searching databases of children in foster care or those receiving state aid. The other report was screened out because staff said they could not locate the alleged offender, despite DCFS policy requiring staff to attempt to locate only the alleged victim or the alleged victim’s family—not the alleged perpetrator.
- Four reports were screened out because the hotline inappropriately determined there was not sufficient information to warrant an investigation. For example, a mandated reporter stated that a child disclosed being molested by a half-sibling when she was younger. However, the report was screened out because of a lack of specific details, and the hotline did not conduct a follow-up to obtain clarifying information.

DCFS reviewed the nine reports that we found were inappropriately screened out. It said that six of them had concurrent or subsequent DCFS involvement in which the safety of the child or children was assessed, and that one involved an alleged victim who is now an adult and does not have younger siblings in the home. For two reports, DCFS said the safety of the children had not been assessed. The agency provided no other details.

²² DCFS, *Child Maltreatment Investigation Determination Guide*, PUB-357, Revised August 2023.

For the remaining screened-out report, the hotline operator selected the wrong reason for screen-out. The report should have been classified as a duplicate referral, but it was instead labeled as “not child abuse or neglect.” Because the report was incorrectly classified, the additional information within it was not forwarded to the investigator assigned to the previously accepted report. If a report is inappropriately screened out, the child or children are at risk of continued abuse and neglect.

TWO STATE AGENCIES FAILED TO COMPLY WITH REQUIREMENTS FOR RESPONDING TO REPORTS OF CHILD ABUSE AND NEGLECT

DCFS, the designated State agency in DHS for the CAPTA grant, and CACD failed to comply with all requirements for the immediate screening, risk and safety assessment, and investigation of reports of child abuse and neglect for 138 of the 140 accepted reports in our sample.²³ See Appendix F for a summary of deficiencies for each sampled accepted report. See Appendix G for the different requirements with which Arkansas did not comply and the associated number of reports.

Notifications of Investigative Determinations Were Not Sent as Required

Notifications of investigative determinations are required to be sent when an investigation is closed. State laws require that these notifications be sent to the subject of the report, the alleged offender, and the alleged victims’ or alleged victims’ parents (custodial and noncustodial).²⁴ If a determination is made that the report is true, the victims’ school must also be notified (A.C.A. § 12-18-708 (b)). For reports involving severe maltreatment, investigative determinations must also be sent to law enforcement and the prosecuting attorney. However, those agencies may waive this requirement by submitting written notice to DCFS and CACD (A.C.A. § 12-18-709 (d)).

For 132 of 140 accepted reports in our sample, DCFS and CACD did not maintain documentation showing that notifications of investigative determinations were issued as required. Missing notifications included those that should have been given to:

- Victims or alleged victims (132 reports)
- Custodial and noncustodial parents (59 reports)
- Law enforcement, in severe maltreatment cases (48 reports)
- Alleged offenders (43 reports)

²³ A single report may be noncompliant with one or more requirements.

²⁴ A.C.A. § 12-18-709 (e), A.C.A. § 12-18-703 (a), and DCFS manual XIV-A4 and XIV-A5.

- Prosecuting attorneys, in severe maltreatment cases (40 reports)
- The victim's school following a true determination (27 reports)

Of the reports involving severe maltreatment, which could include sexual and physical abuse, 18 reports that had true determinations did not include documentation that notices of investigative determinations were sent to law enforcement or the prosecuting attorney. DCFS officials said they could not determine why these notifications were not documented. However, CACD stated that some investigators provided verbal notifications to law enforcement and prosecuting attorneys instead of the required written notice.

In instances where determination notifications to the victims, alleged victims, and alleged offenders were not documented as sent, investigators from DCFS and CACD were not following their agencies' policies and procedures and could not provide a reason why. DCFS stated that it did not send determination notifications to parents because it was following direction from its Office of Chief Counsel, which told them that these notifications were not required.²⁵

Regarding notifications of true determinations not being given to schools, DCFS stated that it was unaware of the State requirement to send such notices and that its policy had not been updated since the regulation went into effect.

Failure to notify the victims, alleged victims, parents, and the child's school about these determinations increases the risk of recurrence of abuse or neglect. Not informing the alleged offender prevents them from being informed of their right to due process, including their right to appeal a true determination. In cases of severe maltreatment, the absence of notifications to law enforcement and prosecuting attorneys reduces the assurance that appropriate protective or legal actions have been taken to protect children from further harm.

Notifications During Investigations Were Not Sent as Required

At the beginning of an Arkansas child abuse investigation, the investigator must advise the alleged offender of the allegations (A.C.A. § 12-18-602(c)). To meet this requirement, DCFS policies require the investigator to provide a guide that explains the investigation process (*Child Protective Services: A Caretaker's Guide*, PUB-052) and an official notice of allegations to the alleged offender (Form 212-A, Notice of Child Maltreatment Allegation). If a 72-hour hold has been placed on the child, the agency must notify the child's school as well (A.C.A. § 12-18-505).²⁶ In addition, if the allegation involves severe maltreatment, the investigator must notify local law enforcement and the prosecuting attorney, unless those agencies have provided written notice to DCFS and CACD that they do not require such notifications (A.C.A. § 12-18-504).

²⁵ DCFS *Manual*, XIV-A4 P and XIV-A5 K, state that custodial and noncustodial parents are to be notified of both true and unsubstantiated investigative determinations.

²⁶ A 72-hour hold is a temporary emergency custody action that allows DCFS to remove a child from the home for up to 72 hours without the consent of a parent or guardian when the child is believed to be in immediate danger.

For 85 of 140 accepted reports in our sample, DCFS and CACD did not maintain documentation to support that notifications of an investigation were made. Specifically, we found the following:

- Sixty Form 212-As were not documented as being given to the alleged offender notifying them of the allegations made against them.
- Thirty-five notices of investigations of severe maltreatment were not documented as having been reported to law enforcement and prosecuting attorneys.
- Two notifications for investigations conducted by DCFS were not sent to the child's school when a 72-hour protective custody hold was placed on the child.

DCFS stated that the 212-A was not always given because Pub-052 contains all information required by 212-A, including the nature of the investigation, due process rights, and appeal procedures. However, Pub-052 does not explicitly state that the person is the alleged offender and what allegations have been made against them. Failure to appropriately notify the alleged offender could result in them being unaware of the allegations against them and of their rights to due process.

DCFS could not explain why its investigators did not document contacts with law enforcement and prosecuting attorneys. CACD investigators said they used verbal notice instead of the required written notice. DCFS also stated that schools were not notified because investigators were unaware of this State requirement. These gaps in communication reduce confidence that appropriate actions are being taken by DCFS in response to severe maltreatment.

Interviews With Children and Adults Were Not Always Completed as Required

To initiate an investigation, the investigator must either interview the alleged victim face-to-face outside the presence of the alleged offender, observe the alleged victim outside the presence of the alleged offender, or have demonstrated due diligence in locating and conducting the interview or observation with the alleged victim (*DCFS Policy & Procedure Manual*, II-D3(B)).²⁷ Priority 1 reports must be initiated within 24 hours, and Priority 2 reports must be initiated within 72 hours (A.C.A. § 12-18-602(b)).

²⁷ *DCFS Manual* II-D3 states that due diligence includes but is not limited to: (1) making an unannounced visit to the child's home at least three times at different times of the day or on different days (provided the three visits are within the appropriate investigation initiation timeframe) in an attempt to interview the child; (2) visiting or contacting the child's school, child care facility, and all other places where the child is said to be located; (3) contacting appropriate local Division of County Operations staff and requesting research of their information systems and other files to obtain another address.

During an investigation, investigators are required to interview the alleged victim, the parents (both custodial and noncustodial), and the alleged offender.²⁸ If an investigator cannot locate the subject or the subject is unable to communicate, the investigator must document their efforts to contact the subject and proceed with the investigation (A.C.A. § 12-18-605). DCFS investigators must document interviews, or their attempts to conduct them, in CHRIS within 48 hours (*DCFS Policy & Procedure Manual*, II-D4(K)). CACD investigators must document all investigative activities within 2 business days (DCFS CACD Agreement III-C(6)).

For 134 of 140 accepted reports in our sample, DCFS and CACD could not support that interviews were completed as required. Specifically, we found:

- No documentation existed in 84 reports showing that all required interviews were conducted or that the investigator exercised due diligence in attempting to conduct them.
- In 127 reports, at least one interview was not documented within the required time.
- Eleven interviews with the alleged victim were not conducted within the required time frame.

We could not determine within the CHRIS system whether interviews with custodial and noncustodial parents had been conducted because the system does not provide an option for investigators to select those roles.²⁹ Neither DCFS nor CACD explained why documentation showing that all required interviews were conducted or that due diligence was exercised to complete them was missing. Failure to conduct interviews as required reduces the investigator's ability to accurately investigate the reported allegation, increasing risk to children.

Regarding interviews not documented within the required timeframe, we found that neither agency followed the required timelines. Although the agreement between DCFS and CACD requires documentation of interviews within 2 business days—as does DCFS's internal policies—CACD's policy allows for 5 days. Regardless, both agencies failed to meet either standard, with 118 reports containing interviews entered after 7 days and 70 reports containing interviews not documented until the day the investigation was closed. DCFS cited high workloads and staffing issues as the primary factors. These delays in documentation may place children at risk of continued abuse or neglect.

²⁸ Interviews must also be held with current or past healthcare providers if a healthcare provider reported the allegation.

²⁹ The system's interviewee options are victim; sibling; reporter; person responsible for care (which can include a parent, stepparent, or other caregiver); other persons in the home; alleged offender; or collateral, which includes teachers, neighbors, and witnesses.

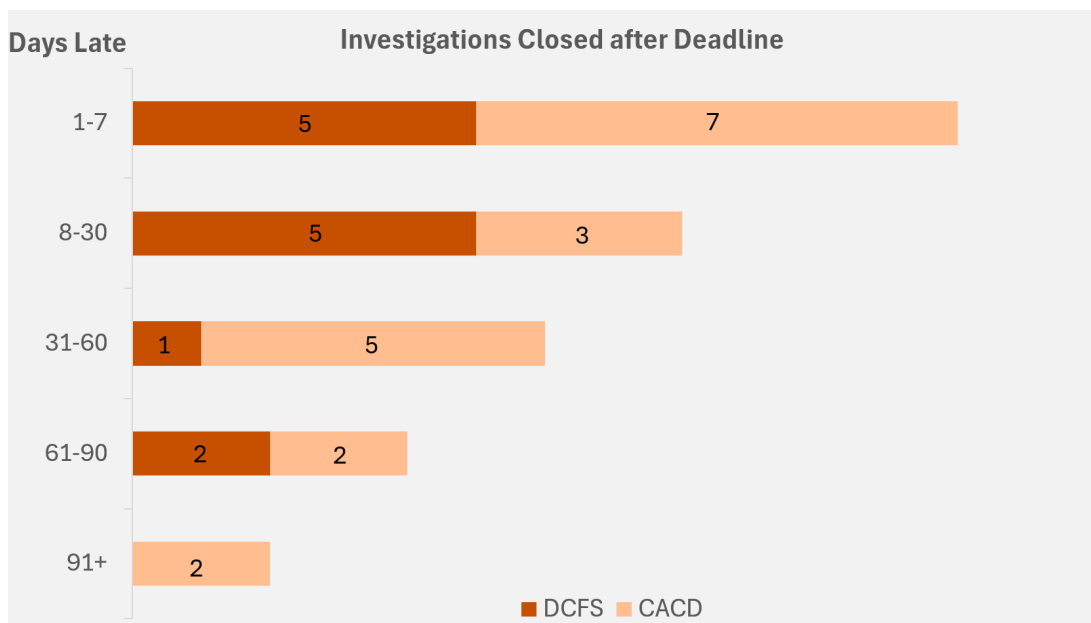
DCFS did not indicate why interviews were not conducted with the child within the designated response time. CACD stated that the delays in two reports for which they were the primary investigating agency were due to a language barrier in one case and the alleged victim being out of the area in the other. Failure to initiate investigations within required timeframes places children at risk of continued child abuse or neglect.

Investigations Were Not Completed Timely

A determination must be made for each child abuse investigation in Arkansas within 45 days. An extension may be requested for an additional 15 days (A.C.A. § 12-18-616(a)).

For 32 of 140 accepted reports in our sample, DCFS and CACD did not complete investigations within the required time frame. These reports ranged from 1 day late to more than 200 days late (see Figure 2). DCFS and CACD cited heavy workloads, staffing shortages, and delays from case transfers or reassignments as contributing factors. Failure to complete investigations within the required time frame may result in continued abuse or neglect of the victim.

Figure 2: Number of Days Reports Were Completed After the Required Timeframe



Safety Assessments Were Not Always Completed as Required

After an investigator receives an accepted child maltreatment report, they must assess the child's safety (A.C.A. § 12-18-601(d)). DCFS's procedure manual instructs investigators to complete a health and safety checklist for each child in the family by identifying the presence or

absence of any safety factors (*DCFS Policy & Procedure Manual II-D8 B*).³⁰ The manual also requires that this checklist be completed in the health and safety checklist screen in CHRIS. However, in January 2023, DCFS replaced this checklist with a new safety assessment process. The new process requires the assessment to be completed and documented in a system outside of CHRIS. The policies and procedures manual has not been updated to reflect this change.

For 16 of 140 accepted reports, DCFS was unable to provide documentation to support that the safety assessment had been completed. DCFS did not indicate why this occurred; however, investigators may have been unaware of how to document their assessment because the manual had not been updated. Failure to ensure the documentation of safety assessments could affect the investigator's ability to thoroughly assess whether a child can remain safely in their home.

Appropriate Agency Did Not Conduct Investigation

CACD is required to investigate reports of maltreatment within the DCFS-managed foster care program, including any allegations where the foster child is the victim.^{31, 32} However, for 1 of the 140 accepted reports, DCFS conducted the investigation. The report alleged that a child in foster care was left bruised after their biological father became physical with them during an argument. The report was assigned to DCFS for investigation rather than CACD, however DCFS officials did not take action to have the report reassigned. DCFS's policies and procedures do not require staff to verify whether a report was assigned to the appropriate agency or to address when an investigator should request a case be transferred. Failure to assign investigations to the appropriate agency may result in conflicts of interest that affect the accuracy and impartiality of investigative determinations.

RECOMMENDATIONS

- We recommend that DHS work with DCFS and CACD to immediately review the nine inappropriately screened-out reports in our sample and act as appropriate.
- We recommend that DHS work with DCFS and CACD to update the *Hotline Manual* to (1) ensure that all maltreatment types—consistent with the *Child Maltreatment Investigation Determination Guide* and other relevant guidance—are clearly defined and include instructions for hotline workers on how to respond to them; (2) include details

³⁰ *DCFS Manual II-D* states that safety factors include, but are not limited to, the following: (1) the caretaker's behavior toward child is violent or out of control; (2) the caretaker caused serious physical injury to child or made plausible threat to cause severe physical injury; (3) the caretaker's explanation for injury is unconvincing; and (4) the caretaker's emotional stability seriously affects current ability to supervise, protect, or care for child.

³¹ A.C.A. § 12-18-601; DCFS CACD Agreement III(B)(1).

³² A.C.A. § 12-18-601 uses the term "substitute care" to refer to foster care.

on how searches can be conducted to identify and locate families; and (3) develop procedures for when hotline workers should call reporters back to obtain necessary additional information.

- We recommend that DHS work with DCFS to strengthen its procedures to ensure that notifications to law enforcement, the prosecuting attorneys' offices, school officials, and any other relevant parties are made and documented in CHRIS.
- We recommend that DHS work with DCFS to review current processes and update policies and procedures to align with State regulations and review CACD's procedures to ensure they comply with all applicable State and DCFS requirements.
- We recommend that DHS work with DCFS to update the CHRIS system to identify custodial and noncustodial parents of the alleged victim as interview roles.
- We recommend that DHS work with DCFS to provide additional guidance or training to reinforce requirements for investigators to consistently conduct and document interviews, complete and record required notifications, and meet investigation completion timelines.

STATE AGENCY COMMENTS AND OFFICE OF INSPECTOR GENERAL RESPONSE

In written comments on our draft report, the State agency concurred with our second, third and fourth recommendations and concurred in part with our first, fifth and sixth recommendations. The State agency stated that it takes the audit findings seriously and described steps taken to strengthen investigative practice, policy, training, supervision, and technology.

The State asked that the final report distinguish between specific compliance findings and broader statements describing the potential risk that the statutory requirements are intended to prevent. The State also asked that the report distinguish, where possible, between required activities that did not occur, occurred but were not sufficiently documented, or were documented in a location other than the one reviewed in CHRIS.

The State agency's comments are included in their entirety as Appendix H.

STATE AGENCY COMMENTS

Regarding our second, third, and fourth recommendations, the State agency stated that it will revise the *Hotline Manual* to ensure maltreatment definitions and response instructions, guidance for searches to identify and locate children, and procedures for recontacting reporters when additional information is needed are aligned with applicable law and practice. In addition, it will strengthen documentation of required notifications and evaluate whether additional system controls or supervisory review are needed to support consistent completion

and documentation of required notifications. Finally, it will jointly review with CACD their respective policies and procedures to ensure they are consistent with applicable Arkansas law and with one another.

Regarding our first recommendation, the State agency agreed that the screened-out reports identified by OIG required review to determine whether additional action was warranted. However, the State agency disagreed that initiation of an investigation based on the original report was necessary given the passage of time. The State agency reviewed the current circumstances of the children and families involved and concluded that five of the sample reports should have been accepted, four should have included callbacks to obtain additional information, and one should have been classified as a duplicate. In addition, CACD described steps taken to reinforce expectations for staff to conduct thorough searches and complete callbacks.

Regarding our fifth recommendation, the State agency concurred that CHRIS should more clearly distinguish between custodial and noncustodial parents and agreed that enhancing the system would improve documentation and the ability to verify compliance with investigative requirements. The State agency stated that until enhancements to CHRIS can be implemented, it is reinforcing expectations that staff clearly document the role of each parent within the investigative record. However, it did not concur with any implication that the current CHRIS configuration demonstrates that required parent interviews were not conducted.

Regarding our sixth recommendation, the State agency concurred that continued training and reinforcement are important to ensure consistent investigative practice and stated that it has continued to provide training and guidance related to investigative requirements, including required interviews, notifications, investigative time frames, and documentation expectations. It did not concur, however, that the deficiencies identified in our audit are attributable solely to a lack of training. The State agency pointed out that the audit findings also demonstrated the need for consistent supervisory oversight, clear expectations, accountability, and system supports that help staff apply those requirements and practice. As a result, the State agency indicated it plans to address the deficiencies through a combination of training, supervisory review, policy and procedure clarification, and technology improvements.

OIG RESPONSE

After reviewing the State agency's comments, we maintain that our findings and recommendations are valid. We also commend the State agency for the actions described in its response to strengthen its child protection system.

Regarding the first recommendation, we acknowledge DCFS's position that initiating an investigation based solely on the original reports may not be appropriate given the amount of time that has elapsed. Our recommendation did not require the State to initiate investigations based on the initial reports; rather, it required the State to review each inappropriately screened-out report and act as appropriate based on current circumstances and available

information. The purpose of the recommendation is to ensure that the State evaluates whether any safety concerns remain and determines whether additional action is warranted. We believe the actions taken by the State fulfill this recommendation.

Regarding the fifth recommendation, we understand DCFS's position that the current CHRIS configuration does not, on its own, demonstrate that required parent interviews were not conducted. Our findings do not rely solely on the CHRIS configuration. While onsite, OIG and State officials reviewed the documentation in CHRIS at the same time to identify the custodial and non-custodial parents to document compliance for the required interviews. However, state officials were not always able to identify the custodial and non-custodial parents to show that all required parent interviews occurred. Because verification of compliance depends on complete and accurate documentation, we were unable to confirm that the interviews were conducted as required, and thus, we reported those instances as noncompliance.

Regarding the sixth recommendation, we acknowledge DCFS's position that the deficiencies identified are not attributable solely to a lack of training. Our findings do not conclude that training alone caused the noncompliance. Rather, the audit identified gaps across multiple areas, including documentation practices, adherence to established procedures, and system limitations.

With respect to the State agency's request that we distinguish between specific compliance findings and broad contextual statements, we acknowledge that our work did not include determining whether any child experienced actual harm. However, phrases such as *"increases the risk of harm"* or *"may place children at risk"* are intended to describe the potential consequences when critical compliance requirements are not followed.

With respect to the State agency's request that we clarify how we assessed instances in which required activities were not documented, we note that we reviewed all evidence available in CHRIS as well as the additional records and supporting information the State provided outside of CHRIS. Our findings show that we were unable to substantiate that the requirement was met, rather than concluding that the action definitively did not occur.

APPENDIX A: AUDIT SCOPE AND METHODOLOGY

SCOPE

We obtained and reviewed data from CHRIS consisting of 27,690 screened-out reports and 21,268 in-home reports accepted for investigation between October 1, 2023, and September 30, 2024, with an investigation closure date.³³ We performed two separate samples. The first was a simple random sample of 70 screened-out reports. For each screened-out report, we assessed whether the determination met State requirements. The second sample was a stratified random sample of 140 reports accepted for investigation, with 70 investigations assigned to DCFS and 70 investigations assigned to CACD. For each of those sample items, we determined whether DCFS or CACD complied with State requirements for the immediate screening, risk and safety assessment, and investigation of reports of child abuse or neglect.

We did not assess DCFS's overall internal control structure. Rather, we limited our review to DCFS's internal controls related to our objective. Specifically, we assessed DCFS's policies and procedures applicable to the immediate screening, risk and safety assessment, and investigation of reports of child abuse and neglect.

We conducted our audit from December 2024 through July 2026.

METHODOLOGY

We took the following steps to accomplish our objective:

- Reviewed applicable requirements related to the immediate screening, risk and safety assessment, and investigation of reports of child abuse and neglect
- Interviewed DCFS and CACD officials to gain an understanding of the process for intake and investigation of reports of child abuse and neglect
- Obtained data from the DCFS's CHRIS system representing the 27,690 screened-out reports received during our audit period
- Obtained from the DCFS's CHRIS system 21,268 in-home reports of child abuse and neglect accepted for investigation with an investigation closure date received during our audit period
- Selected for review a simple random sample of 70 screened-out reports (Appendix B)

³³ The investigation closure date may have occurred after September 30, 2024.

- Selected for review a stratified random sample of 140 in-home reports of child abuse and neglect accepted for investigation with an investigation closure date (Appendix D)
- Evaluated and tested procedures for the screening out of reports for the selected screened-out reports
- Evaluated and tested procedures for the immediate screening, risk and safety assessment and investigation of reports by reviewing case files for the selected accepted reports
- Estimated the number and percentage of screened-out reports in the sampling frame not reported in accordance with requirements (Appendix C)
- Estimated the number and percentage of accepted reports in the sampling frame not reported in accordance with requirements (Appendix E)
- Discussed the results of our audit with DCFS and CACD officials

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

APPENDIX B: SCREENED-OUT REPORTS STATISTICAL SAMPLING METHODOLOGY

SAMPLING FRAME

The sampling frame consisted of 27,690 screened-out reports received during the audit period.

SAMPLE UNIT

The sample unit was a screened-out report.

SAMPLE DESIGN AND SAMPLE SIZE

We used a simple random sample of 70 sample units.

SOURCE OF RANDOM NUMBERS

We generated the random numbers using the Office of Inspector General, Office of Audit Services (OIG/OAS), statistical software.

METHOD OF SELECTING SAMPLE UNITS

We sorted the items by the Referral ID number in ascending order and then consecutively numbered the items in the sampling frame.³⁴ A statistical specialist generated the random numbers in accordance with our sample design, and we then selected the corresponding frame items for review.

ESTIMATION METHODOLOGY

We used the OIG/OAS statistical software to estimate the number and percentage of screened-out reports within the sampling frame that were not in compliance with requirements. We calculated the point estimate and the corresponding two-sided 90-percent confidence interval.

³⁴ Referral ID is the unique identifier for all reports received by the Hotline.

APPENDIX C: SCREENED-OUT REPORTS SAMPLE RESULTS AND ESTIMATES

Table 1: Sample Results

Frame Size	Sample Size	DCFS Did Not Comply With Screening Requirements
27,690	70	10

**Table 2: Estimated Number and Percentage of Screened-Out Reports in the Sampling Frame Not in Compliance with Requirements
(Limits Calculated at the 90-Percent Confidence Level)**

	Number of Screened-Out Reports Not in Compliance with Requirements	Percentage of Screened-Out Reports Not in Compliance With Requirements
Point Estimate	3,956	14.29%
Lower Limit	2,206	7.97%
Upper Limit	6,373	23.02%

APPENDIX D: ACCEPTED REPORTS STATISTICAL SAMPLING METHODOLOGY

SAMPLING FRAME

The sampling frame consisted of 21,268 in-home reports accepted during our audit period with an investigation closure date.

SAMPLE UNIT

The sample unit was an in-home report accepted for investigation.

SAMPLE DESIGN AND SAMPLE SIZE

We used a stratified random sample as follows:

Table 3: Sample Design

Stratum	Assigned Agency	Number of Frame Units	Sample Size
1	CACD	3,371	70
2	DCFS	17,897	70
Total		21,268	140

SOURCE OF RANDOM NUMBERS

We generated the random numbers using the Office of Inspector General, Office of Audit Services (OIG/OAS), statistical software.

METHOD OF SELECTING SAMPLE UNITS

We sorted the items in each stratum by the Referral ID number in ascending order and then consecutively numbered the items in each stratum in the sampling frame.³⁵ A statistical specialist generated the random numbers in accordance with our sample design, and we then selected the corresponding frame items for review.

ESTIMATION METHODOLOGY

We used the OIG/OAS statistical software to estimate the number and percentage of accepted reports within the sampling frame that were not in compliance with requirements. We calculated the point estimate and the corresponding two-sided 90-percent confidence interval.

³⁵ Referral ID is the unique identifier for all reports received by the Hotline.

APPENDIX E: ACCEPTED REPORTS SAMPLE RESULTS AND ESTIMATES

Table 4: Sample Results

Stratum (Agency)	Frame Size	Sample Size	Did Not Comply With Screening Requirements	Did Not Comply With Risk & Safety Assessment Requirements	Did Not Comply With Investigation Requirements	Did Not Comply With One or More Requirements
1 (CACD)	3,371	70	0	12	69	69
2 (DCFS)	17,897	70	1	4	69	69
Total	21,268	140	1	16	138	138

**Table 5: Overall Estimated Number and Percentage of Accepted Reports in the
Sampling Frame Not in Compliance with Requirements
(Limits Calculated at the 90-Percent Confidence Level)**

	Number of Accepted Reports Not in Compliance with Requirements	Percentage of Accepted Reports Not in Compliance With Requirements
Point Estimate	20,964	98.57%
Lower Limit	20,537	96.56%
Upper Limit	21,268*	100%

* The computed upper limit of the 90-percent confidence interval for the number of reports not in compliance with requirements is greater than the total number of reports in the sampling frame. Therefore, the upper limit is being reported as the sampling frame total.

**Table 6: Estimated Number and Percentage of CACD Accepted Reports (Stratum 1) in the
Sampling Frame Not in Compliance with Requirements
(Limits Calculated at the 90-Percent Confidence Level)**

	Number of Accepted Reports Not in Compliance with Requirements	Percentage of Accepted Reports Not in Compliance With Requirements
Point Estimate	3,323	98.57%
Lower Limit	3,151	93.47%
Upper Limit	3,368	99.91%

**Table 7: Estimated Number and Percentage of DCFS Accepted Reports (Stratum 2) in the Sampling Frame Not in Compliance with Requirements
(Limits Calculated at the 90-Percent Confidence Level)**

	Number of Reports Not in Compliance with Requirements	Percentage of Reports Not in Compliance With Requirements
Point Estimate	17,641	98.57%
Lower Limit	16,718	93.41%
Upper Limit	17,883	99.92%

APPENDIX F: SUMMARY OF DEFICIENCIES FOR EACH SAMPLED ACCEPTED REPORT

Sample Number	Stratum	Did Not Comply With Screening Requirements	Did Not Comply With Risk & Safety Assessment Requirements	Did Not Comply With Investigation Requirements	Did Not Comply With One or More Requirements
1	1			X	X
2	1			X	X
3	1			X	X
4	1			X	X
5	1		X	X	X
6	1		X	X	X
7	1		X	X	X
8	1			X	X
9	1			X	X
10	1			X	X
11	1			X	X
12	1			X	X
13	1			X	X
14	1			X	X
15	1			X	X
16	1			X	X
17	1		X	X	X
18	1			X	X
19	1			X	X
20	1			X	X
21	1		X	X	X
22	1			X	X
23	1			X	X
24	1			X	X
25	1				
26	1		X	X	X
27	1			X	X
28	1			X	X
29	1			X	X
30	1		X	X	X
31	1			X	X
32	1			X	X
33	1			X	X
34	1			X	X

Sample Number	Stratum	Did Not Comply With Screening Requirements	Did Not Comply With Risk & Safety Assessment Requirements	Did Not Comply With Investigation Requirements	Did Not Comply With One or More Requirements
35	1			X	X
36	1			X	X
37	1			X	X
38	1			X	X
39	1			X	X
40	1			X	X
41	1			X	X
42	1			X	X
43	1			X	X
44	1			X	X
45	1			X	X
46	1			X	X
47	1		X	X	X
48	1		X	X	X
49	1			X	X
50	1			X	X
51	1			X	X
52	1			X	X
53	1			X	X
54	1			X	X
55	1			X	X
56	1		X	X	X
57	1		X	X	X
58	1			X	X
59	1			X	X
60	1		X	X	X
61	1			X	X
62	1			X	X
63	1			X	X
64	1			X	X
65	1			X	X
66	1			X	X
67	1			X	X
68	1			X	X
69	1			X	X
70	1			X	X

Sample Number	Stratum	Did Not Comply With Screening Requirements	Did Not Comply With Risk & Safety Assessment Requirements	Did Not Comply With Investigation Requirements	Did Not Comply With One or More Requirements
71	2		X	X	X
72	2			X	X
73	2			X	X
74	2			X	X
75	2			X	X
76	2			X	X
77	2			X	X
78	2			X	X
79	2			X	X
80	2			X	X
81	2			X	X
82	2			X	X
83	2			X	X
84	2			X	X
85	2			X	X
86	2			X	X
87	2			X	X
88	2			X	X
89	2			X	X
90	2			X	X
91	2			X	X
92	2			X	X
93	2			X	X
94	2			X	X
95	2			X	X
96	2			X	X
97	2			X	X
98	2			X	X
99	2			X	X
100	2			X	X
101	2			X	X
102	2			X	X
103	2				
104	2			X	X
105	2			X	X
106	2			X	X

Sample Number	Stratum	Did Not Comply With Screening Requirements	Did Not Comply With Risk & Safety Assessment Requirements	Did Not Comply With Investigation Requirements	Did Not Comply With One or More Requirements
107	2			X	X
108	2		X	X	X
109	2			X	X
110	2		X	X	X
111	2			X	X
112	2			X	X
113	2			X	X
114	2	X		X	X
115	2			X	X
116	2			X	X
117	2			X	X
118	2			X	X
119	2			X	X
120	2			X	X
121	2			X	X
122	2			X	X
123	2			X	X
124	2			X	X
125	2			X	X
126	2			X	X
127	2			X	X
128	2			X	X
129	2			X	X
130	2			X	X
131	2			X	X
132	2			X	X
133	2			X	X
134	2			X	X
135	2			X	X
136	2		X	X	X
137	2			X	X
138	2			X	X
139	2			X	X
140	2			X	X
	Total	1	16	138	138

APPENDIX G: SUMMARY OF DEFICIENCIES BY INVESTIGATIVE AGENCY FOR ACCEPTED REPORTS

Issue	Investigative Agency		TOTAL
	DCFS	CACD	
Notifications of Investigative Determinations Were Not Sent as Required			
Victims or alleged victims	68	64	132
Custodial and noncustodial parents	59	0	59
Law Enforcement, in severe maltreatment cases	3	45	48
Alleged offenders	6	37	43
Prosecuting attorneys, in severe maltreatment cases	3	37	40
The victim's school following a true determination	11	16	27
Notifications During Investigations Were Not Sent as Required			
Alleged Offender	37	23	60
Law Enforcement and Prosecuting Attorneys, in severe maltreatment cases	3	32	35
School when a 72-hour protective custody hold was taken	2	0	2
Interviews with Children and Adults Were Not Always Completed as Required			
No documentation showing all required interviews were conducted or that investigator exercised due diligence	40	44	84
At least one interview was not documented timely	62	65	127
Interviews with the child were not conducted timely	9	2	11
Investigations Were Not Completed Timely	13	19	32
Safety Assessments Not Completed as Required	4	12	16
Investigation Was Not Conducted by Appropriate Agency	1	0	1

APPENDIX H: STATE AGENCY COMMENTS



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August 21, 2026

Patricia Wheeler
Regional Inspector General for Audit Services
Office of Audit Services, Region VI
U.S. Department of Health and Human Services
1100 Commerce Street, Room 632
Dallas, TX 75242

RE: Report Number OAS-25-06-038

Dear Ms. Wheeler:

Thank you for the opportunity to review and respond to the Office of Inspector General's draft report, *Arkansas Failed to Comply With the Immediate Screening, Risk and Safety Assessment, and Investigation Requirements for Responding to Reports of Child Abuse and Neglect* (OAS-25-06-038).

The Arkansas Department of Human Services, Division of Children and Family Services (DCFS), takes the findings of this audit seriously. DCFS has policies and procedures in place to support the timely screening, assessment, and investigation of reports of child maltreatment; however, the audit identified instances in which practice did not meet established requirements or the case record did not sufficiently demonstrate that required work occurred. DCFS has reviewed the individual findings and is using them to strengthen practice, documentation, supervisory oversight, and system supports. DCFS concurs in whole or in part with recommendations and provides its response to each below.

The Findings and the Conclusions Drawn from Them

DCFS asks that the final report distinguish between two different kinds of statements it currently contains. The first are specific compliance findings identifying instances in which particular requirements were not met or could not be demonstrated in the case record. DCFS does not dispute most of those findings, and the corrective actions described below are intended to address them.

The second are broader statements regarding potential impact of those deficiencies on child safety. For example, the report states that identified deficiencies "increase the risk of harm to children", that delays in documenting interviews "may place children at risk of continued abuse or neglect", and that a "Failure to initiate investigations within required timeframes places children at risk of continued child abuse or neglect."

DCFS recognizes the critical importance of timely screening, assessment, and investigation and the role these requirements play in protecting children from harm. However, the stated objective and methodology of the audit, as described in Appendix A, do not appear to include an assessment of

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whether any child in the sample experienced harm or an increased risk of harm as a result of an identified deficiency. DCFS therefore respectfully requests that the final report distinguish between the compliance findings established through the audit and statements describing the potential risks the requirements are intended to prevent.

CHRIS And Evidence Available to the Audit Team

At the onset of the audit, DCFS provided the audit team with instruction on the structure, navigation, and use of CHRIS, the Division's system of record. DCFS raises this point not as a criticism of the audit team, but because several findings depend on whether particular activity could be located or verified in the system.

Where the report concludes that required activity could not be evidenced in CHRIS, DCFS asks that the final report distinguish, where possible, between activity that did not occur, activity that occurred but was not sufficiently documented, and activity that may have been documented in a location other than the one reviewed. Each represents a different practice or documentation issue and may require a different corrective response.

Work Completed Since the Audit Period

The audit reviewed reports received between October 1, 2023, and September 30, 2024, and audit fieldwork was conducted from December 2024 through July 2026. Since the period reviewed, DCFS has undertaken significant work to strengthen investigative practice, policy, training, supervision, and technology. Many of those efforts are directly responsive to the issues identified in the audit and are described in greater detail in the responses to the individual recommendations below.

OIG Recommendations

1. Immediately review the nine inappropriately screened-out reports in the sample and act as appropriate.

DCFS concurs in part with this recommendation.

DCFS concurs that the screened-out reports identified by OIG required review to determine whether additional action was warranted. DCFS does not concur, however, that the appropriate response is necessary to initiate an investigation based on the original report. The reports were received between October 1, 2023, and September 30, 2024, and are now approximately 23 and 34 months old. Given the passage of time, DCFS believes the appropriate response is to review the current circumstances of the children and families involved and determine whether any present safety concerns exist.

DCFS has reviewed the current circumstances associated with the reports identified by OIG. Six had concurrent or subsequent DCFS involvement in which the safety of the child or children was assessed, and one involved an alleged victim who is now an adult and who has no younger siblings in the home.

The Arkansas State Police Crimes Against Children Division (CACD) also conducted an additional review of the screened-out reports identified by OIG. Based on their review, CACD determined that five of the ten sampled reports should have been accepted. Of the remaining reports, CACD determined that one was appropriately screened out but should have been coded as a duplicate, and that four should have included a callback to obtain additional information before a screening decision was made.

In response, CACD met with Hotline supervisors and reinforced expectations regarding callbacks when additional information is needed to clarify allegations, as well as the use of the Mandated Reporter Portal to obtain additional locator information. CACD has also provided additional training regarding thorough and accurate CHRIS searches and use of the Central Registry query. Secondary review continues to be required to verify the basis for screened out reports.

DCFS is also addressing the broader screening issues identified through the audit through the corrective actions in the recommendations below.

2. Update the Hotline Manual to define all maltreatment types with response instructions, add guidance on searches to identify and locate families, and develop procedures for calling reporters back.

DCFS concurs with this recommendation.

DCFS agrees that the *Structured Decision-Making Hotline Assessment Procedures Manual* should clearly address the elements identified by OIG, including maltreatment definitions and response instructions, guidance for searches used to identify and locate children and families, and procedures for recontacting reporters when additional information is needed. In the interim, CACD has reinforced expectations with Hotline staff regarding callbacks when additional information is needed and has provided additional training regarding CHRIS searches and use of the Central Registry query.

DCFS and CACD will jointly revise the manual to ensure these areas are clearly addressed and aligned with applicable law and practice.

DCFS is also participating in a child maltreatment workgroup that is developing statutory changes for consideration during the 2027 Regular Session of the Arkansas General Assembly. Because the Hotline Manual is structured around the Child Maltreatment Act, including its definitions and acceptance criteria, DCFS believes the most effective approach is to complete the comprehensive revision after the statutory framework is finalized rather than make duplicative revisions in close succession.

3. Strengthen procedures to ensure that notifications to law enforcement, prosecuting attorneys' offices, school officials, and other relevant parties are made and documented in CHRIS.

DCFS concurs with this recommendation.

Work to strengthen required notifications in their documentation is underway, and several components have already been implemented.

DCFS implemented the notification of an unsubstantiated report to the alleged victim (CFS-245-U1), which constitutes the largest number of reports, on June 4, 2026.

The notifications of an unsubstantiated report to the alleged victims custodial/non-custodial parents/guardians/legal custodians as well as Notifications of true reports to the alleged victim and their custodial/non-custodial parents/guardians/legal custodians (CFS-225-T1) will be implemented by mid-September.

The policy requirement governing Form 212-A is complete, and the requirement was reviewed with staff at training held in July of this year.

For the remaining notice types, DCFS will revise its procedures so that each required notice is both issued and documented in CHRIS, including notice to law enforcement and the prosecuting attorney in severe maltreatment cases under Ark. Code Ann. § 12-18-504, and notice to the school in which a victim child is enrolled following a true determination under Ark. Code Ann. § 12-18-708(b), which also provides that the name of the alleged offender shall not be identified.

For notification requirements not addressed through the current process, DCFS will revise procedures to clearly identify the required notification, the responsible party, applicable timeframes, and where completion must be documented. These revisions will address notifications required by Arkansas law and ensure that staff have clear and consistent direction for both completing and documenting the required action.

DCFS will also evaluate whether additional system controls or supervisory review are needed to support consistent completion and documentation of required notifications.

CACD's review also identified instances in which required notifications had been made by letter, email, or telephone but were not entered in the Document Tracking section of CHRIS. In some instances, notifications were documented elsewhere in the record, including collateral contacts.

CACD has instructed investigative staff to use the appropriate forms for required notifications and to document those notifications in the Document Tracking section of CHRIS. CACD has also revised its File Review Guide and reinforced with supervisory staff the expectation that required notifications are verified as part of the supervisory review.

CACD was unable to verify that the required 212-A notifications were provided to alleged offenders in the cases identified by OIG. CACD also identified instances in which notifications to prosecuting attorneys and law enforcement were made by telephone or email, but the required forms were not used, or the contact was not entered in Document Tracking.

4. Review current processes and update policies and procedures to align with State requirements, and review CACD's procedures for compliance.

DCFS concurs with this recommendation.

DCFS and CACD will jointly review their respective policies and procedures related to child maltreatment investigations to ensure they are consistent with applicable Arkansas law and with one another.

The review will specifically address the differences identified by OIG between DCFS and CACD procedures regarding investigative requirements. Where a policy or procedure is inconsistent with statutory requirements, it will be revised accordingly. DCFS and CACD will also work to ensure that their respective procedures provide clear and consistent direction to staff when the agencies share responsibility for an investigation.

CACD revised its File Review Guide as of June 17, 2026, in response to issues identified through the audit. DCFS and CACD will build upon those corrective actions through the joint review described above.

5. Update the CHRIS system to identify custodial and noncustodial parents of the alleged victim as interview roles.

DCFS concurs in part with this recommendation.

DCFS concurs that CHRIS should more clearly distinguish between custodial and noncustodial parents and agrees that enhancing the system would improve documentation and the ability to verify compliance with investigative requirements.

DCFS does not concur, however, with any implication that the current CHRIS configuration demonstrates that required parent interviews were not conducted. DCFS policy requires investigators to interview both custodial and non-custodial parents, when applicable. The issue identified through the audit is that CHRIS does not currently provide a clear mechanism to distinguish the parental role of the individual interviewed. As a result, the record may not allow a reviewer to determine from the interview documentation alone whether the individual was the custodial or non-custodial parent.

DCFS is evaluating a CHRIS enhancement that would allow the system to more clearly identify and document the role of each parent. Until that enhancement can be implemented, DCFS will reinforce expectations that staff clearly document the role of each parent within the investigative record.

6. Provide additional guidance or training to reinforce requirements for conducting and documenting interviews, completing and recording required notifications, and meeting investigation completion timelines.

DCFS concurs in part with this recommendation.

DCFS concurs that continued training and reinforcement are important to ensure consistent investigative practice. Since the audit period, DCFS has continued to provide training and guidance related to investigative requirements, including required interviews, notifications, investigative time frames, and documentation expectations.

DCFS does not concur, however, that the deficiencies identified by OIG are attributable solely to a lack of training. The requirements identified in the audit were established in DCFS policy and included in staff training during the audit period. The findings demonstrate the need not only for continued training and reinforcement, but also for consistent supervisory oversight, clear expectations, accountability, system supports that help staff apply those requirements and practice.

DCFS will therefore continue to address the findings through a combination of training, supervisory review, policy and procedure clarification, and technology improvements. This approach is intended to support consistent practice statewide and ensure that staff have both the knowledge and the tools necessary to meet investigative requirements.

CACS also reviewed the two interviews identified by OIG as not completed as required. CACD determined that one involved a language barrier and the other involved difficulty locating the individual. CACD does not dispute the findings associated with those interviews.

CACD has revised its policy to clarify the timeframe for documenting interviews. DCFS will also address the difference between the CACD documentation requirement, and the timeframe currently reflected in DCFS policy so that staff have clear and consistent expectations.

CACD also acknowledges the findings related to investigations not being completed timely. Supervisors have been directed to more closely monitor investigator workloads and the timely completion of investigations and to use available supervisory tools to identify cases approaching required timeframes.

CACD has revised its File Review Guide to specifically include verification that required safety assessments are completed and documented.

DCFS appreciates the opportunity to respond to the audit and takes seriously both the specific findings identified by OIG and the broader responsibility to continually strengthen the child protection practice. The corrective actions outlined above are intended not simply to address individual findings, but to strengthen expectations, supervisory oversight, system supports, and consistency in practice statewide.

DCFS remains committed to a child protection system in which reports are assessed timely, investigations are thorough and well documented, staff have the guidance and tools necessary to do their work effectively, and children and families are treated fairly throughout the process.

Sincerely,



Tiffany Wright

Director, Division of Children and Family Services



Major Jeffrey L. Drew

Commander, Crimes Against Children Division, Arkansas State Police

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