



Child Maltreatment Report Once Again Casts Pennsylvania as an Outlier *Child victim rate, type of maltreatment, age of victims and role of parental drug use stand out*

March 2nd - Last month, the [Administration for Children and Families \(ACF\)](#) – a division within the U.S. Department of Health and Human Services (HHS) - issued its [27th Child Maltreatment report](#).¹

This Child Maltreatment report always presents a conundrum, because on one hand it serves as an important annual tool seeking to quantify and raise awareness about child abuse and neglect.

States, policymakers, advocates and the media utilize the annual federal Child Maltreatment report to create a narrative about how effective the United States is at keeping children safe from abuse and connected to stable and supported families.

On the other hand, this tool is built upon data and details that continuously invite questions diminishing its overall effectiveness.

The Child Maltreatment report relies on data that states voluntarily provide through the National Child Abuse and Neglect Data System (NCANDS). The federal Child Abuse Prevention and Treatment Act (CAPTA) directs states, “to the maximum extent practicable”, to provide data to ACF annually, including data related to:

- The “number of children who were reported to the State during the year as victims of child abuse or neglect.”
- The number of children who were the subject of a child abuse that were later “substantiated, unsubstantiated or determined to be false.”
- The number of “families that received preventive services, including use of differential response, from the State.”
- The number of deaths in the State during the year resulting from child abuse or neglect.

Throughout the 2016 Child Maltreatment Report, there are significant variations in the number of states that provide data essential to better understanding the magnitude and characteristics of child abuse in this country. For instance, ACF indicates that:

- 45 states reported data related to “both screened-in and screened-out referrals.”

¹ <https://www.acf.hhs.gov/cb/resource/child-maltreatment-2016>

- 39 states provided data about state policies about the timelines by which a child welfare agency responds to a child abuse report and to what degree the response times differ based on the type of allegation.
- 49 states provided data about child fatalities, but then only 44 states provided case-level data impacting the degree to which reliable insight (this year and from year-to-year) can be gained about key issues like the age of children involved in the fatalities. Even fewer states reported data about “selected caregiver risk factors.” Only about 60 percent (n=31) of the reporting states addressed the degree to which drug abuse by the child’s caregiver was a factor in the fatality, even less states (n=27) supplied data related to the role of alcohol abuse.
- 40 states provided data about the child welfare workforce.

Policymakers, advocates and the media often turn to this federal report promoting it as the measuring stick about the safety, well-being and outcomes for children from year to-year and across state lines.

Comparisons, however, are complicated in the year-to-year context, because each year different states (and a varied number of them) may or may not report certain data elements.

Next, when policymakers try to see how a state like Pennsylvania stacks up against Maryland or Michigan or Wisconsin or any other state (or group of states) seldom is it understood that the data inside of the Maltreatment Report does not lend itself to an *apple-to-apple* comparison.

Each state has its own definition of child abuse, list of who can be a perpetrator, evidentiary threshold that must be met to determine a child is a victim and even which child deaths will be referred to the child welfare agency to evaluate whether child abuse played a part in the lethal event.

In 2016, the Commission to Eliminate Child Abuse and Neglect Fatalities (CECANF) reinforced that their task (established by Congress) to “identify a national strategy for eliminating child abuse and neglect fatalities” was hampered by the voluntary nature of NCANDS. Also of impact: “There are multiple definitions of abuse or neglect in use by states, and thus counting varies from state to state and even within states. In some states, if the child was not known to the CPS agency, the death is not reported to NCANDS.”²

CAPTA establishes a floor of what constitutes child abuse and neglect:

“At a minimum, any recent act or failure to act on the part of a parent or caretaker, which results in death, serious physical or emotional harm, sexual abuse or exploitation, or an act or failure to act which presents an imminent risk of serious harm.”³

States then build upon that floor creating a web of definitions, strategies and statistics.

As a result, the picture and narrative that emerges from the Child Maltreatment Report may well be quite murky and requires detailed explanations about the many caveats within the data and state approaches.

² Commission to Eliminate Child Abuse and Neglect Fatalities. (2016). *Within our reach: A national strategy to eliminate child abuse and neglect fatalities*. Washington, DC: Government Printing Office.

³ 42.U.S.C. 5101 – general definitions.

Pennsylvania's submitted data only tells part of the story, overlooks significance of GPS

Review the 2016 federal Child Maltreatment Report or, for that matter, any of the federal reports over the last decade (plus) and consistently the Pennsylvania data invites the question - 'why does Pennsylvania look so different?'

Cathy Utz, who for decades has served as the leader (or 2nd in command) for the Office of Children, Youth and Families (OCFY) within the Pennsylvania Department of Human Services, testified before the Pennsylvania Senate in June 2013 saying:

*"When reviewing national data regarding the number of children who have been victims of child abuse and neglect in other states, Pennsylvania is a statistical outlier."*⁴

Two years earlier, the Center for Children's Justice (C4CJ)⁵ mobilized dozens of diverse stakeholders urging Pennsylvania's Governor and General Assembly to create a Child Protection and Accountability Task Force.⁶ In the April 2011 call to action, these stakeholders wrote:

"Pennsylvania is a statistical outlier in the investigation and determination of child abuse, i.e., it investigates child abuse at a rate of 8.3 per 1,000 children versus 40.3 per 1,000 children nationally, and then determines a child is a victim of child abuse 1.4 per 1,000 children versus 9.3 per 1,000 nationally."



CHILD PROTECTION REPORT

Digging Deeper to Understand How Pennsylvania Defines Child Abuse

Pennsylvania has long been recognized as a statistical outlier for its rates of investigation and substantiation of child abuse when compared with other

C4CJ prepared a number of supporting documents intended to inform the Pennsylvania General Assembly about why such a Task Force was needed in order to facilitate a research-informed examination of how child abuse was defined, reported, investigated and treated.⁷

C4CJ relied on the federal Child Maltreatment Report to help illustrate the Commonwealth's outlier status was, in part, connected to Pennsylvania's differential response system known as General Protective Services (GPS).

In 2011, C4CJ asked the General Assembly to direct any created Task Force to address whether "any updates or improvements were needed to the state's differential response system (Child Protective Services versus General Protective Services) to improve child safety?" The Task Force was also asked to identify "what performance measurements are tracked to demonstrate effectiveness."

Pennsylvania is not alone in having created a *differential* or *alternative* response to calls of concern about a child's safety or well-being.

The vision was that when the child welfare agency is contacted about an at-risk child or family in need of services, but where there is not an allegation that meets the statutory definition of child abuse; there would still be a path to services and supports.

⁴ http://www.dhs.pa.gov/cs/groups/webcontent/documents/document/p_034653.pdf

⁵ Known at that time as the Protect Our Children Committee (POCC).

⁶ <https://www.prnewswire.com/news-releases/the-protect-our-children-committee-urge-governor-corbett-general-assembly-to-create-a-child-protection-and-accountability-task-force-133793703.html>

⁷ <http://www.protectpchildren.org/files/Child-Protection-Report-On-Defining.pdf>

This non-child abuse investigative pathway was expected to be less intrusive, to actively engage community-based partners, to provide connector tissue so that families could access services they needed to keep a child safe and at home like housing assistance or substance abuse treatment. And finally it was intended to recognize and build upon the protective factors in the family.

The 2016 Child Maltreatment document underscores, “In some states, reports of maltreatment may not be investigated, but are instead assigned to an alternative track, called alternative response, family assessment response, or differential response. Cases assigned to this response often include early determinations that the children have a low or moderate risk of maltreatment.”

Child Maltreatment 2016 frames a child abuse investigation as having a two-fold purpose:

1. Determine whether the child was maltreated or is at-risk of being maltreated; and
2. Determine if services are needed and which services will be provided.

Meanwhile, “the primary purpose of the alternative response” is about focusing “on the service needs of the family.”

As Table 1 illustrates, nationally the rate of children receiving an investigation or alternative response was 46.7 (per 1,000 children). By comparison, the rate reported for Pennsylvania was 15.0.

Table1: Children who received an investigation or alternative response⁸

State	2012 <i>(rate per 1,000 children)</i>	2013 <i>(rate per 1,000 children)</i>	2014 <i>(rate per 1,000 children)</i>	2015 <i>(rate per 1,000 children)</i>	2016 <i>(rate per 1,000 children)</i>
National	42.5	42.8	43.9	45.2	46.7
Delaware	72.4	65.3	65.1	68.5	67.9
Maryland	23.3	21.9	23.3	22.9	23.7
New Jersey	37.4	37.5	37.5	37.3	37.2
New York	50.9	48.3	47.5	49.1	50.1
Ohio	38.5	39.0	38.8	38.8	39.8
Pennsylvania	8.6	8.6	9.3	13.7	15.0
West Virginia	96.5	102.9	104.2	120.0	139.8

In the commentary Pennsylvania submits to offer fuller context to its submitted data, state officials acknowledged the “comprehensive package of child welfare legislative reforms” enacted between 2013 and 2015. Pennsylvania also underscores that the data submitted by the Commonwealth to the federal government does not yet include data related to Pennsylvania’s version of an “alternative response.”

While Pennsylvania statute has set forth the concept of GPS since the mid-1990s, the Commonwealth did not require its 67 county children and youth agencies to submit GPS data to the state. This guaranteed that for nearly 20 years there was no uniformly collected, analyzed and publicly reported GPS data.

The Task Force on Child Protection, created by the Pennsylvania General Assembly in 2011, recommended that Pennsylvania begin to require counties provide GPS data to the Pennsylvania Department of Human Services. This data would then be collected and retained to provide data about the scope and nature of GPS

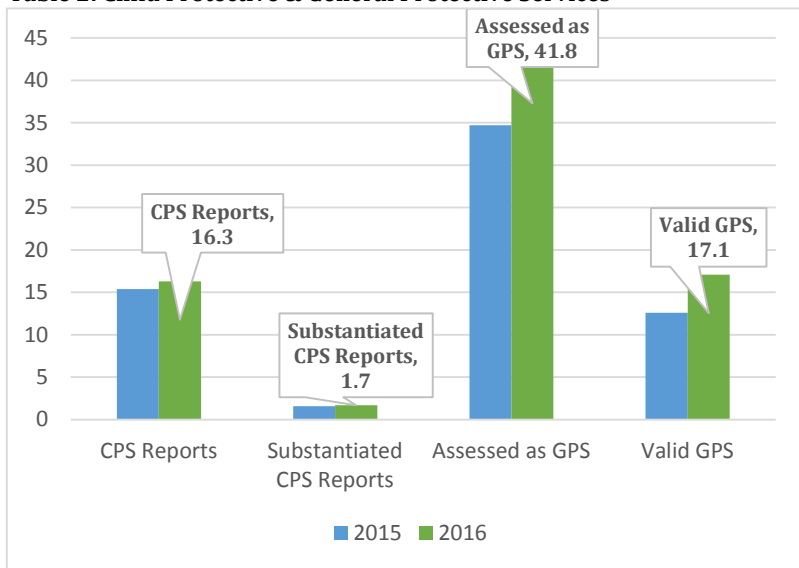
⁸ Created based on data in Table 3-1 Children Who Received an Investigation or Alternative Response, 2012-2016 included in Child Maltreatment 2016, page 29.

reports, but also to inform future assessments or investigations that involve the same child regardless of whether the child/family had moved from one county to another.

Pennsylvania statute – effective December 31, 2014 – now requires counties to submit GPS data to the Pennsylvania Department of Human Services (PA DHS).

In the 2016 Child Maltreatment Report, Pennsylvania officials acknowledged that the state is not yet submitting this data to the federal government. Pennsylvania assured that the state “plans on reporting on that data in the future.”⁹

Table 2: Child Protective & General Protective Services



Pennsylvania publishes its own annual Child Protective Services Report.

Unlike, the data Pennsylvania submits for inclusion in the federal annual report, the state’s own annual reports address the degree to which Pennsylvania children experienced a child abuse investigation or received a GPS assessment.¹⁰

Review of the 2015 and 2016 Pennsylvania Child Protective Services Reports undercuts the impression (when only the federal report is reviewed) that Pennsylvania is a statistical outlier in terms of how many children (based on a per 1,000 child rate) were reported to

ChildLine or a county agency for a child abuse investigation or a GPS assessment.

Review of commentary from states contiguous to Pennsylvania reinforces that many of these states are providing more comprehensive data to inform the Child Maltreatment Report. States are supplying data that reflects both children reported to the child welfare agency that then experienced a child abuse investigation and those that received an “alternative response”.

For example, Ohio notes it submitted data for both the “traditional response” as well as that state’s “differential response.”¹¹ Maryland’s commentary stipulates that its state statutes provide for an “investigative response” or an “alternative response” with AR reports related to “low risk reports of child neglect and abuse.”

As a consequence then, the number and rate of children captured in the Child Maltreatment report for these states may be a number larger (if not much larger) than the number Pennsylvania supplies.

It is Pennsylvania’s absent data that plants the seeds that the Commonwealth is an outlier and that far fewer children are subjected to a child abuse investigation or alternative response assessment.

⁹ Child Maltreatment 2016, page 214.

¹⁰ <http://www.dhs.pa.gov/publications/childabusereports/>

¹¹ Child Maltreatment 2016, page 204.

Child victim rate in Pennsylvania is 1.6, nationally it is 9.1

Child Maltreatment 2016 indicates that an estimated 676,000 children in the United States were victims of abuse and neglect – a rate of 9.1 victims per 1,000 children in the population.

In FFY 2016, Pennsylvania’s child victim rate (per 1,000 children) was 1.6.

Review of the data for states contiguous to Pennsylvania reveals the Keystone state (once again) recorded the lowest rate of child victims. Rates ranged from Pennsylvania’s 1.6 to 4.2 in New Jersey to 9.0 in Ohio and 15.8 in West Virginia (Table 3).

Table 3: Child Victims¹²

State	2012 (rate per 1,000 children)	2013 (rate per 1,000 children)	2014 (rate per 1,000 children)	2015 (rate per 1,000 children)	2016 (rate per 1,000 children)
National	8.8	8.8	9.1	9.2	9.1
Delaware	11.4	9.4	7.3	7.5	7.7
Maryland	9.7	9.0	6.8	5.0	5.2
New Jersey	4.4	4.7	5.8	4.9	4.2
New York	16.0	15.2	15.4	15.9	15.6
Ohio	11.0	10.4	9.4	8.8	9.0
Pennsylvania	1.2	1.2	1.2	1.3	1.6
West Virginia	11.9	12.3	13.0	12.8	15.8

In the 2016 Child Maltreatment Report, Pennsylvania stipulates that when ChildLine receives a report that “does not suggest suspected child abuse, but does suggest a need for social services or other services or assessment” these “allegations or concerns are referred to as General Protective Services (GPS) and are not classified as child abuse in Pennsylvania.”¹³

Separately in its Pennsylvania 2015-2019 Child and Family Services Plan (also submitted ACF), Pennsylvania wrote:

“The majority of the cases that come to the attention of the CCYA are those involving non-serious injury or neglect. These cases are treated by the agency as GPS. GPS assessments are conducted for those incidents that do not rise to the level of child abuse.”¹⁴

While county children and youth agencies cannot screen out child protective services (CPS) reports, they have flexibility and discretion in how to handle GPS reports.

A county children and youth agency can screen the report in and assess whether a child(ren) are in need of “services to prevent abuse or neglect” or other services that can “safeguard and ensure the child’s well-being and development” or to “preserve and stabilize family life whenever appropriate.” A county agency has time frames by which they have to respond to screened in GPS reports from immediately to upwards of 10 days.

¹² Created based on data in Table 3-3 Child Victims, 2012-2016 included in Child Maltreatment 2016, page 33.

¹³ Child Maltreatment 2016 published February 1, 2018, Appendix D: State Commentary, page 214 retrieved at <https://www.acf.hhs.gov/cb/resource/child-maltreatment-2016>.

¹⁴ http://www.dhs.pa.gov/cs/groups/webcontent/documents/document/c_149645.pdf

A GPS thread is woven into the lives of many Pennsylvania children who die or nearly die from suspected child abuse.

Many of the situations children are experiencing might not be seen by the public (or policymakers) as benign or “non-abuse” particularly when a child can be the subject of multiple GPS reports before a lethal or near lethal event. Examples from 2017 quarterly child abuse fatality and near fatality summaries include:¹⁵

- “In February 2017, the agency received four general protective services referrals for parental substance use and imminent risk due to domestic violence concerns.”
- “From November 2010 to November 2016, the agency received seven general protective services (GPS) referrals with concerns that included inadequate food, inadequate physical care and medical concerns.”
- “Three general protective services (GPS) reports were received in October 2016 regarding the overall care of the children, medical care of the children, parental substance use, and domestic violence.”
- “There were seven prior general protective services referrals beginning in 2013 that involved allegations of substance use by the parents.”
- “From 2012 to 2015, FCCYS received four general protective services (GPS) reports regarding alleged domestic violence, drug use by the parents and inadequate housing.”
- “GCCYS has a history with the family from August 2011 to present, with seven general protective services referrals due to truancy, housing conditions and mother’s substance use.”
- “In January 2015 and again in June 2016, there were allegations of domestic violence and unsuitable home conditions with the father and the mother of the victim child. These were unsubstantiated and closed. In March 2017, concerns were reported regarding allegations of substance use, verbal abuse of the children, and the victim child withdrawing from Suboxone at birth.”

Returning to Pennsylvania’s own annual child abuse reports, one discovers that Pennsylvania recorded 151,087 GPS reports in 2016. Approximately 50 percent (n=74,703) of these GPS reports received in 2016 were “screened out.”

76,384 GPS reports were assessed impacting 113,786 children. After assessment, approximately 41 percent (n=31,649) were validated and 46,525 children were represented within those validated GPS reports.

The 46,525 children who were part of a validated GPS report would not be recorded by Pennsylvania as a victim of child abuse or discovered in the Child Maltreatment Report. As a result the federal report invites a narrative that suggests far fewer Pennsylvania children come into contact with the child welfare system than other states.

Sexual abuse and neglect in Pennsylvania deviate (dramatically) from national data

Pennsylvania’s approach to defining abuse and establishing a differential response is also apparent when reviewing state and federal data about the types of child maltreatment.

As reflected in Table 4, nationally nearly 75 percent of all child victims experienced neglect, 18.2 percent physical abuse and 8.5 percent sexual abuse.

¹⁵ http://www.dhs.pa.gov/cs/groups/webcontent/documents/document/c_269573.pdf

Meanwhile, Pennsylvania reported 4,355 child victims in FFY 2016 with 48 percent (n=2,092) having experienced sexual abuse, 42 percent (n=1,831) physical abuse and 6 percent (n=256) neglect.

It is important to note that child victims could have experienced more than one type of maltreatment.

Table 4 Percentage of Maltreatment Types

State	Child Victims	% Sexual	% Physical	% Neglect	% Psychological
National ¹⁶	671,622	8.5% (n=57,329)	18.1% (n=122,067)	74.8% (n=502,615)	5.6% (n=37,859)
Delaware	1,572	8.9% (n=141)	19.2% (n=302)	28.6% (n=451)	38.4% (n=605)
Maryland	6,993	24.2% (n=1,697)	22.8% (n=1,597)	59.8% (n=4,187)	Under 1 % (n=14)
New Jersey	8,264	9.9% (n=824)	13.4% (n=1,113)	79.7% (n=6,587)	Under 1 % (n=46)
New York	65,123	3.2% (n=2,087)	9.5% (n=6,246)	95.4% (n=62,150)	Under 1 % (n=470)
Ohio	23,635	19.0% (n=4,501)	45.4% (n=10,733)	44.3% (n=10,481)	3.3% (n=796)
Pennsylvania	4,355	48.0% (n=2,092)	42.0% (n=1,831)	5.8% (n=256)	1.6% (n=71)
West Virginia	5,938	4.3% (n=257)	77.8% (n=4,624)	42.6% (n=2,535)	62.8% (n=3,731)

The Child Maltreatment 2016 report reinforces that those children “most vulnerable to maltreatment” are very young children (3 years of age or younger). Nationally, the child victim rate (per 1,000 children) for infants was 24.8, in Pennsylvania it was 2.2. Pennsylvania’s highest child victim (by age) rate was recorded for victims ages 14 (n=2.3) and 13 (n=2.0). Even in those age categories, Pennsylvania was an outlier as the national rate was 6.7 for both 13 and 14 year olds.

Table 5: Child Victims, 0 to 3 years old

State	< 1 year of Age (rate per 1,000 children)	1 year (rate per 1,000 children)	2 years (rate per 1,000 children)	3 years (rate per 1,000 children)
National	24.8	11.9	11.2	10.6
Delaware	16.5	9.4	8.3	9.8
Maryland	8.1	5.8	5.5	6.3
New Jersey	10.4	5.1	4.9	5.0
New York	27.2	17.3	16.6	16.0
Ohio	23.8	10.4	10.3	10.0
Pennsylvania	2.2	1.4	1.2	1.4
West Virginia	46.2	22.1	20.0	18.3

Federal Report suggests parental drug abuse is rare risk factor in Pennsylvania

In December, Pennsylvania’s Auditor General Eugene DePasquale testified before a committee of the Pennsylvania House of Representatives saying:

“Without exception, caseworkers and others told me that the opioid crisis has dramatically increased caseloads and increasingly jeopardized child safety and well-being. This is in urban, suburban and rural Pennsylvania. If you think ‘oh that is not my district’, it is your district too. We cannot and should not ignore the opioid scourge as we work to improve the child-welfare system in Pennsylvania.”

The number of child welfare referrals with adult substance use allegations rose 48.8% from FY14-15 to FY15-16 – and then an additional 23.3% from FY 15-16 to FY 16-17. Parent substance abuse is an allegation in 35% of allegations accepted for service involving young children, and it is an allegation in 30% of all cases accepted for service (2016).

-Excerpts from Allegheny County Needs Based Plan and Budget for 2018-19; and for Implementation Year 2017-2018

The 2018-2019 Needs Based Plan and Budgets submitted by Pennsylvania’s 67 county children and youth agencies reveal that these agencies are under pressure from increased number of reports (CPS and GPS) related to substance abuse.

Review of the 2016 Child Maltreatment Report, however, doesn’t tell the same story (*Table 6*).

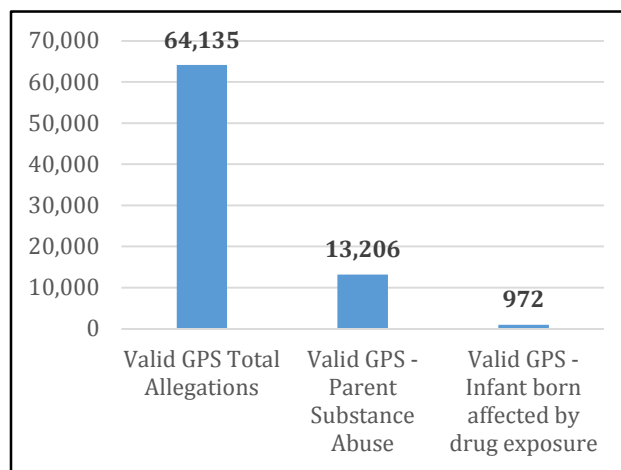
In 2016, Pennsylvania submitted data indicating that 3 percent (n=135) child victims had a “drug abuse caregiver risk factor.” By comparison the national rate was 28.4 percent.

Meanwhile, Pennsylvania’s own 2016 Child Protective Services Report, specifically data about valid General Protective Services reports, reveals that 20.5 percent (n=13,206) of the total valid GPS allegations by type (n=64,135) are linked to “parent substance abuse.” Another 972 allegations were related to infants (under the age of 1) who had “withdrawal symptoms” or were “born affected by drug exposure.” A number well in excess of the 135 figure in the federal Child Maltreatment report.

Again this reflects what falls into the CPS versus GPS bucket. Neglect associated with parental drug abuse that impacts a Pennsylvania child or a report about a Pennsylvania infant born affected by prenatal drug exposure will regularly fall outside the state definition of child abuse so they become GPS reports. As a result, data associated with these children and their parents won’t be captured inside the federal Maltreatment Report as “victims.”

Table 6: Child Victims with Drug Abuse Caregiver Risk Factor¹⁷

State	Total Child Victims	2016 Drug Abuse
National	361,985	28.4% (n=103,095)
Delaware	1,572	37.1% (n=584)
Maryland	6,993	5.3% (n=377)
New Jersey	8,264	30.6% (n=2,531)
New York	----	----
Ohio	23,635	46.9% (n=11,104)
Pennsylvania	4,355	3.0% (n=135)
West Virginia	5,938	52.3% (n=3,107)



Auditor General DePasquale recommends less paperwork for GPS cases

[The State of the Child report](#) released last September by Auditor General Eugene DePasquale didn’t include any in-depth discussion or review of the nature and scope of GPS reports in Pennsylvania.

¹⁷ Compiled from data in Table 3-11 within the 2016 Child Maltreatment Report, page 47.

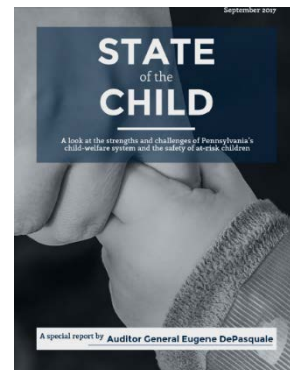
The State of the Child Report furthered the narrative that GPS cases are always more benign non-abuse cases “such as inappropriate discipline.”¹⁸

The Auditor General’s report also indicated that the response time for GPS cases can vary from traditional child abuse reports because what is embodied inside a GPS report does “not allege immediate danger to a child.”¹⁹

This framing, however, overlooks that the Pennsylvania Department of Human Services issued a 2012 bulletin (3490-12-01) related to response times for GPS cases. This bulletin took effect July 1, 2012 and set forth GPS response times that range from immediate to ten days.²⁰

The immediate response is linked to when a “present danger exists” that “meets the Safety Threshold.” To meet that “safety threshold” the situation must “meet all of the following criteria:²¹”

- “Have potential to cause serious harm to a child;
- Be specific and observable;
- Be out-of-control;
- Affect a vulnerable child;
- And be imminent”



A response, by the child welfare agency, can be delayed for 10 calendar days if the information reported “indicates that overall risk factors rated as low exist, which may place the child in danger of future harm.” The bulletin continues, “The information reported does not indicate that Present or Impending Danger exists and does not meet the safety threshold.”

This bulletin reflects the challenge and conflict that has underpinned the Commonwealth’s GPS approach for years.

Far too many situations coded as GPS are far from benign and many in the public would reasonably ask, ‘how is this not child abuse or neglect?’

Yet, so much of what is called a GPS report doesn’t suggest anything close to child abuse rather it reveals how significantly frayed the safety net is leaving children and families vulnerable struggling with unstable housing or lack of access to behavioral health or substance abuse treatment.

By default then community members, including mandated reporters, concerned about the child and their family see the only remaining *safety net* being a report to, connection with the formal child welfare system.

In his State of the Child Report, DePasquale recommended that the Pennsylvania Department of Human Services reduce paperwork that is prohibiting children and youth caseworkers from spending more time engaged with children and families.

¹⁸ State of the Child — A special report by Auditor General Eugene DePasquale, page 13.

¹⁹ State of the Child — A special report by Auditor General Eugene DePasquale, page 15.

²⁰ http://www.dhs.pa.gov/cs/groups/webcontent/documents/bulletin_admin/d_005995.pdf

²¹ Ibid.

The Auditor General specifically recommended that PA DHS “work with the General Assembly to eliminate the requirement that CY-48 forms must be filled out for all GPS referrals.”

Pennsylvania’s continued outlier status and the conflicting illustration of what is and is not inside GPS reports should be an invitation to defer on the Auditor General’s recommendation about eliminating any attempt to collect GPS data and details. This deferral could last until the Pennsylvania General Assembly has examined, with intention, the scope of GPS and the outcomes being secured for children and families.