

SCAN Policies Database State Profile 2023: Washington

Overview of the SCAN Policies Database

The State Child Abuse and Neglect (SCAN) Policies Database compiles data on the definitions and policies that states use in their surveillance of child maltreatment, along with data on associated risk and protective factors. The SCAN Policies Database is funded by the Office of Planning, Research, and Evaluation in collaboration with the Children's Bureau in the Administration for Children and Families, U.S. Department of Health and Human Services. Mathematica leads this project in partnership with Child Trends.

The project's purpose is to review and compile information from states' definitions and policies to create a database of those definitions and policies that can be used for analysis. The SCAN Policies Database is a resource for researchers, analysts, child welfare agency staff, and others interested in examining differences between states in their definitions and policies on child maltreatment and how they change over time.

Content

The scope of the SCAN Policies Database includes information about state definitions and policies related to child abuse and neglect for all 50 states, the District of Columbia, and the Commonwealth of Puerto Rico. The SCAN Policies Database team gathered this information through a document collection, review, and coding process. The team obtained input from states on data collection through a confirmation and verification process. More information about these data collection procedures can be found in the data user's guide and data collection protocol, accessible at <https://www.scanpoliciesdatabase.com/data-use-resources>.

The SCAN Policies Database 2023 represents data collected, reviewed, and verified between June 2023 and July 2024. The data reflect the state definitions and policies for the calendar year 2023. The scope of topics in the database includes states' definitions of child abuse and neglect, as well as information about policies related to reporting, screening, and investigating child maltreatment. Key aspects of the child welfare systems' response and context are also included.

The content in the SCAN Policies Database is organized into six domains. The state profiles, codebook, data collection protocol, and data file are also organized by these domains. In the protocol, each question begins with a letter prefix identifying the domain for each variable. The six domains with the identifying protocol number prefix are listed below.

Domain	Question prefix
Definitions	D
Reporting	R
Screening	S
Investigation	I
Child welfare response	W
Child welfare system context	C

State profile

This SCAN Policies Database state profile is a summary of the information collected about the definitions and policies for the identified state. Each of the six domains contain a set of tables that depict the state's information for all variables within that domain.

The state profile presents data for each variable with “yes,” “no,” “unknown,” or other response, as appropriate. The response of “unknown” appears for topics that could not be located from the state's available resources or verified with that state. In some cases, “logical skip” appears when a question was not applicable to a particular state, given a related response on a preceding question. Some information was not included in the state profile to ensure alignment with Executive Orders or other Presidential Actions.

Data use resources

Several data use resources are available to support users of the SCAN Policies Database:

- **Data user's guide:** The guide has detailed information about the data set, including the process used to collect and review the data, the scope of information included in the data set, guidance on using the data, such as how to link the data with other data sources, and notes about specific topics. The data user's guide includes appendices, including information about changes to the data between 2021 and 2023 that reflect changes to state laws and policies during that time period. There is one data user's guide that is updated and applicable for all rounds of data collection for the SCAN Policies Database.
- **Codebook:** The codebook provides information about each variable in the data set, including variable names, labels, definitions, protocol number, variable type, and frequencies. There are separate codebooks to summarize the data from each round of data collection.
- **Errata statement:** The errata statement presents corrections applied to previous rounds of data for the SCAN Policies Database. Starting in 2023, there is one errata statement that is updated and applicable for all rounds of data collection for the SCAN Policies Database.
- **Data collection protocol:** The protocol has the questions used to collect information about states' laws and policies as part of the data review and coding process for each round of data collection. There are separate data collection protocols for each round of data collection for the SCAN Policies Database.

These data use resources can be found on the SCAN Policies Database website (<https://www.scanpoliciesdatabase.com/data-use-resources>) or from the National Data Archive for Child Abuse and Neglect (NDACAN) (<https://www.ndacan.acf.hhs.gov/>).

More information

More information about the SCAN Policies Database can be found at <https://www.scanpoliciesdatabase.com>. General inquiries can be submitted to SCANPoliciesDatabase@mathematica-mpr.com.

State identifying information

Table I. State Identifying information

	Response
State abbreviation	WA
State Federal Information Processing Standard (FIPS) code	53
Census region code	West
State verified coding of information	Yes
State confirmed documents reviewed	Yes
State definitions and policies for calendar year	2023
Data version	2023v1

Domain D: Definitions of child maltreatment

Table D.I. State's definition of child maltreatment

	Response
1. Types of maltreatment included in state definition	
a. Physical abuse	Yes
b. Excessive corporal punishment	Yes
c. Sexual abuse	Yes
d. Emotional maltreatment	Yes
e. Neglect	Yes
f. Inadequate clothing	Yes
g. Inadequate shelter	Yes
h. Malnourishment, inadequate food	Yes
i. Medical neglect, inadequate medical care	Yes
j. Failure to thrive	No
k. Educational neglect	No
l. Abandonment	Yes
m. Injurious environment. Likelihood of harm to child's health, physical well-being	Yes
n. Drug lab. Child present within structure where methamphetamine is being created	Yes
o. Inadequate supervision. Failure to meet parent or caretaker responsibilities	Yes
p. Drug or alcohol misuse. Parental drug or alcohol misuse causing harm to child	Yes
q. Prenatal exposure to drugs or alcohol	No
r. Illicit substance. Illegally providing a controlled substance to a child	Yes
s. Human trafficking, involuntary servitude, sexual servitude	Yes
t. Female genital mutilation	Yes
u. Shaken baby syndrome, abusive head trauma	Yes
v. Failure to protect. Failure to protect from harm	Yes
w. Domestic violence. Exposure to domestic violence	No
x. Factitious disorder by proxy	No
y. Institutional abuse/neglect	No
z. Other definition (specify)	No
2. Subtypes of maltreatment included in state definition	
a. Subtypes of maltreatment considered abuse	Abuse includes physical abuse, punishment, sexual abuse, and sex trafficking; Physical abuse includes shaken baby syndrome
b. Subtypes of maltreatment considered neglect	Neglect includes abandonment, emotional maltreatment, inadequate clothing, inadequate shelter, malnourishment, medical neglect, parent responsibilities, and failure to protect
c. Subtypes of maltreatment considered other than abuse or neglect	Not applicable

Table D.1 (*continued*)

	Response
3. Level of harm included in state's definition of child maltreatment	
a. Inflicts harm	Yes
b. Imminent danger or substantial risk of harm	Yes
4. Differences in level of harm included in state's definition of child maltreatment by type of maltreatment	Yes - Sexual abuse and sex trafficking definitions include inflicts harm only
5. Type of harm or injury specified in state's definition of child maltreatment	
a. Death, bodily injury, impairment of physical condition	Yes
b. Impairment of mental or emotional condition	Yes
c. Harmful environment, conditions	Yes
d. Type of harm or injury not specified	No
e. Other (specify)	No
6. Variation in extent of injury or harm by maltreatment type in the state's definition of child maltreatment	No
7. Perpetrator identified as part of state's definition of child maltreatment	Yes
8. Types of perpetrators specified as part of state's definition of child maltreatment	
a. Any person	No
b. Parent	Yes
c. Guardian	Yes
d. Caregiver/caretaker	Yes
e. Family member or parent's paramour	No
f. Household member	No
g. Person responsible for child	Yes
h. Other (specify)	No
9. Types of perpetrators vary by type of maltreatment	Yes
10. Explanation of variation in types of perpetrator by maltreatment type	For negligent treatment or maltreatment, the perpetrator is a child's parent, legal custodian, guardian, or caregiver; For abandonment, the perpetrator is a parent or guardian
11. Child age included in definition of child maltreatment	Yes
12. Specific child age in definition of child maltreatment	Under age 18
13. Variability of child age by type of maltreatment	No

Table D.II. Child maltreatment definition exemptions

	Response
1. Exemption included in state's definition of child maltreatment	
a. Financial issues, financial inability to provide for a child	Yes
b. Discipline; physical discipline, if it is reasonable and causes no bodily injury to the child	Yes
c. Safe haven exemption; newborn relinquished or abandoned in accordance with infant safe haven and safe surrender laws	Yes
d. Infant testing positive for drugs – medical; newborn with positive test for controlled substance due to parent's medical treatment	No
e. Religious observance; parent relies on spiritual or religious forms of medical treatment	No
f. Other exemption (specify)	No
2. Safe haven exemption included in state's definition of child maltreatment	
a. Must leave a child at specific safe haven locations or designated providers	Yes
b. Child must be left by parent or parent's agent	Yes
c. Child must be left by a certain age (specify)	Yes - 72 hours old or younger
d. No intent to return	No
e. Child must be left unharmed	No
f. Other (specify)	No

Table D.III. Definitions and response for child fatalities and near-fatalities cases

	Response
1. State's definition of fatalities or deaths caused by child maltreatment	
a. Not specified or defined	No
b. Injury from abuse or neglect caused death	Yes
c. Abuse or neglect was contributing factor in death	Yes
d. Death of child who was in child welfare custody or foster care	Yes
e. Other (specify)	No
2. State conducts case reviews with a child fatality review team or a similar review process for fatalities caused by child abuse or neglect	Yes, reviews are required for all or some cases
3. State's definition of near-fatalities or near-deaths caused by child maltreatment	
a. Not specified or defined	No
b. General reference to a serious or critical condition or injury that is life threatening with a substantial risk of death	Yes
c. Specific injury or specific medical treatment or intervention (specify)	No
d. Other (specify)	No
4. State conducts case reviews with a review team or similar review process for near-fatalities caused by child abuse or neglect	Yes, reviews are required for all or some cases

Domain R: Reporting child abuse and neglect

Table R.I. Reporting policies

	Response
1. Statewide centralized reporting	No
2. Decentralized reporting	During some times of the day, counties/regions have own reporting hotline
3. Standard for reporting child maltreatment	
a. Known abuse and neglect	Yes
b. Reasonable cause to believe a child was abused or neglected	Yes
4. Universal mandated reporting	No
5. Required training for mandated reporters	Yes, some mandated reporters
6. Penalties for failure to report	Yes, all mandated reporters
7. Specific penalties for failure to report	
a. Criminal charges	Yes
b. Civil charges	No
c. Professional licensure suspended or revoked	No
d. Other (specify)	No
8. Penalties for false reporting	Yes
9. Specific penalties for false reporting	
a. Criminal charges	Yes
b. Civil charges	No
c. Professional license suspended or revoked	No
d. Other (specify)	No
10. Immunity for reporters of child abuse and neglect	Yes
11. Information requested at the time of report	
a. Identifying information of child	Yes
b. Location and contact information of child and family	Yes
c. Type and severity of suspected maltreatment	Yes
d. Date of suspected maltreatment	Yes
e. Identifying and other information of alleged perpetrator(s)	Yes
f. Identifying and other information of reporter	Yes
g. Identifying information of child's parents, guardian, or caregiver/caretaker	Yes
h. Identifying and other information of family or household members	Yes
i. Information on prior maltreatment	Yes
j. Other (specify)	No

Table R.I (continued)

	Response
12. Anonymity of reporter	All reporters can remain anonymous
13. Tribal involvement in state or local public child welfare agency's process to accept reports of Tribal cases	Yes, Tribes directly accept reports - Shoalwater Bay Tribe; Tulalip Tribes
14. State requires all notifications of substance-exposed newborns (SENs) to be submitted as reports of child maltreatment	
a. State does not require all cases of SENs to be reported for child maltreatment, but they could be reported if they meet certain criteria	Yes
b. State requires all SENs to be reported as child maltreatment	No
c. Other (specify)	No
15. Accepts reports of risk without an allegation of child maltreatment (risk-only reports)	Yes

Table R.II. Types of mandated reporters

	Response	Response	Response
1. Types of mandated reporters	Included in state's definition of mandated reporters	Training required ¹	Subject to penalties for failure to report ²
a. Foster parents	Yes	Yes	Yes
b. School staff - teachers	Yes	No	Yes
c. School bus drivers or other transportation staff	Yes	No	Yes
d. Before- /after-school program staff	No	Logical Skip	Logical Skip
e. Child care staff	Yes	No	Yes
f. Camp counselors, directors, or administrators	No	Logical Skip	Logical Skip
g. Athletic coaches or staff	Yes	No	Yes
h. Medical or dental professionals	Yes	No	Yes
i. Substance abuse disorder treatment providers	Yes	No	Yes
j. Mental health, counselors, or other social service professionals	Yes	No	Yes
k. Police or other law enforcement	Yes	No	Yes
l. Emergency medical technicians, firefighters, or other emergency personnel	No	Logical Skip	Logical Skip
m. Judges	No	Logical Skip	Logical Skip
n. District attorneys or other attorneys	No	Logical Skip	Logical Skip
o. Guardians ad litem or court-appointed special advocates	Yes	No	Yes
p. Other court personnel	Yes	No	Yes
q. Shelter staff	Yes	No	Yes
r. Those who work in fields processing or monitoring print, film, or computer images	No	Logical Skip	Logical Skip
s. Religious clergy	No	Logical Skip	Logical Skip
t. Volunteers	Yes	No	Yes

Table R.II (*continued*)

	Response	Response	Response
u. Coroners or medical examiners	Yes	No	Yes
v. Staff or contractors of state and county agencies	Yes	No	Yes
w. Other type of mandated reporter (specify)	Yes - Licensed pathologists; Staff or volunteers in the Family and Children's Ombudsman Office; Any adult who resides with a child suspected to have suffered severe abuse	No	Yes - Licensed pathologists; Staff or volunteers in the Family and Children's Ombudsman Office; Any adult who resides with a child suspected to have suffered severe abuse

¹ Responses in this column can equal logical skip when the given type of mandated reporter is not included in the state's definition of mandated reporters or when no training is required for mandated reporters (Table R.II).

Responses in this column can be yes when a state has universal mandated reporting (Table R.I) and all mandated reporters require training (Table R.II).

² Responses in this column can equal logical skip when the given type of mandated reporter is not included in the state's definition of mandated reporters or when no mandated reporters are subject to penalties (Table R.I).

Responses in this column can be yes when a state has universal mandated reporting (Table R.I) and when all adults or all mandated reporters are subject to penalties (Table R.I).

Domain S: Screening reports of child abuse and neglect

Table S.I. Screening policies

	Response
1. Statewide centralized screening	No
2. How screening is decentralized	During certain times of the day, counties/regions have own screening unit
3. Information required to screen in report	
a. Identifying information of child	Yes
b. Location and contact information of child and family	No
c. Type and severity of suspected maltreatment	Yes
d. Date of suspected maltreatment	No
e. Identifying and other information of alleged perpetrator(s)	No
f. Other (specify)	No

Table S.II. Screening decision process and activities

	Response	Required cases	Conditions or types of cases
1. Decision processes used during screening			
a. Supervisory review	Yes	Required for all	—
b. Team-based decision	No	Logical Skip	—
c. Individual screener	No	Logical Skip	—
d. Other (specify)	No	Logical Skip	—
e. Unknown	No	—	—
2. Variability of decision process used for screening			
a. Consistent statewide	Yes	—	—
b. Varies locally	No	—	—
3. Certain activities or information are required as part of screening	Yes		
4. Activities or information required as part of screening			
a. Safety or risk assessment	Yes	Required for all	Not applicable
b. Review agency records for prior involvement with child protective services	Yes	Required for all	Not applicable
c. Other (specify)	Yes - Response decision tree	Required for all	Not applicable
5. Types of safety or risk assessment used during screening			
a. Structured decision making	Yes	—	—
b. Other (specify)	No	—	—
6. Consistency of screening activities/information			
a. Consistent statewide	Yes	—	—
b. Varies locally (specify)	No	—	—

Table S.III. Screeners

	Response
1. Screener of abuse and neglect reports	
a. Caseworkers (frontline staff)	No
b. Case managers (supervisors)	No
c. Staff in specialized screening unit	Yes
d. Other (specify)	No
2. Qualifications of screener	
a. Associate's degree	No
b. Bachelor's degree	Yes
c. Master's degree	Yes
d. Training for screening (specify)	Yes - Unspecified trainings at start of employment and Next Steps for Staff training between 6-12 months of employment
e. Years of experience (specify)	Yes - Social Services Specialist 3: 3 years with a bachelor's degree; 2 years of paid social service experience with a master's degree; Social Services Specialist 2: 1 year as a Social Services Specialist 1 and completion of Social Service Specialist training program with bachelor's degree; 1 year pf paid social services experience with master's degree; No experience required for Social Services Specialist 1
f. Other (specify)	No
3. Degree in social work or related field for screeners	Yes, required
4. Tribal involvement in state or local public child welfare agency's process to screen Tribal cases	Yes, Tribes directly conduct screening and collaborate with state/local public child welfare agency - Kalispel Tribe; Makah Tribe; Nisqually Tribe; Port Gamble S'Klallam Tribe; Shoalwater Bay Tribe; Suquamish Tribe; Tulalip Tribes conduct screening. Snoqualmie Tribe collaborates with state agency during screening process

Domain I: Investigations of child abuse and neglect

Table I.I. Investigations policies

	Response
1. Findings from child maltreatment investigations can lead to criminal penalties	Yes
2. Investigator for reports	
a. Caseworkers (frontline staff)	Yes
b. Case managers (supervisors)	No
c. Staff in specialized investigations unit	Yes
d. Law enforcement	No
e. Other (specify)	No
3. Qualifications of investigator	
a. Associate's degree	No
b. Bachelor's degree	Yes
c. Master's degree	Yes
d. Training for conducting investigations (specify)	Yes - Child Abuse Interviewing & Assessment training for physical and sexual abuse case investigations; Initial Core training for investigations with a specialized track or FAR
e. Years of experience (specify)	Yes - Social Services Specialist 3: 3 years with a bachelor's degree; 2 years of paid social service experience with a master's degree; Social Services Specialist 2: 1 year as a Social Services Specialist 1 and completion of Social Service Specialist training program with bachelor's degree; 1 year of paid social service experience with master's degree; No experience required for Social Services Specialist 1
f. Other (specify)	No
4. Degree in social work or related field for investigators	Yes, required
5. Level of evidence required for substantiation (founded/indicated/confirmed)	Preponderance of evidence
6. Investigation determination can result in an "inconclusive" finding	No

Table I.II. Required activities/information for investigation

	Response	Required cases	Conditions or types of cases
1. Certain activities or information required for the investigation process	Yes		
2. Specific activities or information required for investigation			
a. Review agency records for prior involvement with child protective services	Yes	Required for all	Not applicable
b. Visit to child's home	No	Logical Skip	Not applicable
c. Interview or observation of child victim	Yes	Required for all	Not applicable
d. Interview or observation of other children living in child's home	No	Logical Skip	Not applicable
e. Risk or safety assessment	Yes	Required for all	Not applicable
f. Evaluation of home environment or home study	Yes	Required for some	Issues that may pose a child safety threat or risk of imminent harm, e.g., housing inspector, health department or other local authority
g. Interviews with child's parents, caregivers, or other adults residing in child's home	Yes	Required for all	Not applicable
h. Check of criminal records for adults in home	No	Logical Skip	Not applicable
i. Check of child welfare or central registry for prior child maltreatment allegations against adults in home	Yes	Required for some	If applicable

Table I.II (continued)

	Response	Required cases	Conditions or types of cases
j. Medical evaluation	Yes	Required for some	If indicators of serious child abuse or neglect exist; If a child is 3 or younger with a physical abuse allegation; If the alleged child abuse and neglect cannot be reasonably attributed to the explanation and a diagnostic finding would clarify the assessment of risk or determine the need for medical treatment; If the alleged neglect includes concerns that children are deprived of food, underweight, or are starved; Consultation with the Child Protection Medical Consultation Network (CP Med-Con) or with a Child Advocacy Center (CAC) physician is required to (1) determine if a child alleged to be sexually abused needs a medical examination, (2) when there is an allegation of sexual abuse that includes physical injury to the child or the potential for the child to have a sexually transmitted disease, (3) when the child is seriously injured, and (4) when there is a pattern of injury to a young child because of alleged child abuse or neglect
k. Mental health evaluation	No	Logical Skip	Not applicable
l. Interview alleged perpetrator	Yes	Required for all	Not applicable
m. Interview reporter or collateral source	Yes	Required for all	Not applicable

Table I.II (continued)

	Response	Required cases	Conditions or types of cases
n. Other (specify)	Yes - If a child is believed to be unsafe and the child's whereabouts out-of-state are known, make a Child Protective Services (CPS) report in that state; If the investigation involves a military parent or guardian, notify the Department of Defense Family Advocacy Program, per the military Memorandum of Understanding; Provide infant safety education and intervention for all children in the household age birth to one year; Conduct a universal domestic violence (DV) screening; Complete the Investigative Assessment (IA); Refer a child or youth with complex behavioral health needs for a Wraparound Intensive Services (WiSe) screen; Make a referral to Early Support for Infants and Toddlers (ESIT) services if a child younger than three years old is identified with a possible developmental delay; Conduct monthly health and safety visits with children and youth and monthly visits with parents or guardians when cases are open longer than 60 calendar days	Required for some	These activities are generally case-specific as noted in the descriptions; however, conducting a universal domestic violence (DV) screening and completing the Investigative Assessment (IA) are required for all reports

Domain W: Child welfare response

Table W.I. Differential or alternative response

	Response
1. Differential/alternative response	Yes--implemented statewide
2. Types of maltreatment eligible for differential/alternative response	Only certain types of maltreatment are eligible
3. Types of maltreatment <u>not</u> eligible for differential/alternative response	
a. Cases involving child fatalities and near-fatalities	Yes
b. Substance-exposed infants	No
c. Physical abuse	No
d. Sexual abuse	Yes
e. Neglect	No
f. Abandoned infants	Yes
g. Other (specify)	Yes - Severe maltreatment or abuse by a parent or caregiver; Injury to non-mobile infant; Allegation of commercial sexual exploitation; Child-on-child sexualized contact; Medical abuse reported on behalf of medical professional
4. Eligibility for differential/alternative response determined by a risk determination	Yes
5. Tools used to determine risk for differential/alternative response	Yes - Structured Decision Making (SDM) Screening Tool
6. Risk level eligible for differential/alternative response	
a. No risk	No
b. Low risk	Yes
c. Moderate risk	Yes
d. Other (specify)	No
e. Unknown	No
7. Other types of cases or conditions eligible for differential/alternative response	
a. No other cases or conditions	No
b. No immediate safety concerns	Yes
c. No or few prior reports of child abuse or neglect	Yes
d. Other (specify)	Yes - Does not have previous shelter care or dependency in the home closed in the last 12 months; Is not alleged victim already in out-of-home care
8. When is determination made for differential/alternative response	
a. At the time of screening to assign to differential response	Yes
b. After a report is screened in	No
c. Other (specify)	No

Table W.I (continued)

	Response
9. Referrals to community services for cases engaged in differential response	
a. No	No
b. Yes - for all cases	No
c. Yes - when families express interest	Yes
d. Yes - when there is a determination of risk	Yes
e. Yes - other (specify)	No

Table W.II. In-home services, foster care, and permanency

	Response
1. In-home services provided for unsubstantiated cases to maintain intact families	Yes--implemented statewide
2. In-home services provided post reunification	Yes--implemented statewide
3. Permanency	
a. Kinship guardianship as a permanency option	Yes
b. Subsidized guardianship	Yes
c. Subsidized kinship guardianship	Yes
d. Subsidized adoption	Yes
4. Foster care case management staff	
a. State/county public agency staff	Yes
b. Contracted provider staff	No
c. Tribal agency staff	Yes
5. Qualifications of foster care case managers	
a. Associate degree	No
b. Bachelor's degree	Yes
c. Master's degree	Yes
d. Training for case management (specify)	No
e. Years of experience (specify)	Yes - Social Services Specialist 3: 3 years with a bachelor's degree; 2 years of paid social service experience with a master's degree; Social Services Specialist 2: 1 year as a Social Services Specialist 1 and completion of Social Service Specialist training program with bachelor's degree; 1 year of paid social service experience with master's degree; No experience required for Social Services Specialist 1
f. Other (specify)	No
6. Degree in social work or related field for foster care case managers	Yes, required

Table W.III. Tribal foster care and Tribes that directly operate Title IV-E programs through an agreement with HHS

	Response
1. Tribal involvement in foster care for Tribal cases	Yes, Tribes within state provide foster care - Chehalis Confederated Tribes; Colville Confederated Tribes; Lummi Nation; Muckleshoot Tribe; Port Gamble S'Klallam Tribe; Puyallup Tribe; Quinault Nation; Shoalwater Bay Tribe; Snoqualmie Tribe; Spokane Tribe; Tulalip Tribes; Yakama Nation Confederated Tribes
2. Tribes directly operate a Title IV-E program through an agreement with US HHS	Yes
3. Number of Tribes that directly operate a Title IV-E program through an agreement with US HHS	1
4. Specify Tribes that directly operate a Title IV-E program through an agreement with US HHS	Port Gamble S'Klallam Tribe

Table W.IV. Indian Child Welfare Act (ICWA)

	Response
1. Federal ICWA requirements codified in state law	Yes
2. Federal ICWA requirements that are codified in state law	
a. Identifying a child's Tribal status	Yes
b. Use of active efforts to prevent removal/reunite families	Yes
c. Notification of child's parents and Tribe for child custody proceedings	Yes
d. Actively working to involve a child's parents and Tribe during the custody proceedings	No
e. Identifying a foster care or pre-adoptive placement using ICWA preferences provisions	Yes
f. Use of qualified expert witnesses	Yes
3. State law codifying ICWA includes state-recognized Tribes	No

Table W.V. Extended foster care

	Response
1. Foster care extension for youth older than age 18	Yes
2. Age youth are allowed to remain in extended foster care	Up to age 21 (until 21st birthday)
3. Youth must proactively request, provide consent, or opt-in to receive extended foster care	Yes
4. Criteria for youth to remain in extended foster care	
a. There are no criteria to remain in extended foster care	No
b. Enrolled in school	Yes
c. Employed	Yes
d. Participating in workforce development/training program	Yes
e. Comply with independent living/self-sufficiency plan	No
f. Receive independent living or other services	No
g. Medical condition exemption	Yes
h. Other (specify)	No
5. Reentry to extended foster care allowed for youth older than age 18 who aged out or left foster care	Yes
6. Conditions for youth to reenter extended foster care	
a. Youth consent or sign a voluntary placement agreement	Yes
b. Youth develop an independent living plan	No
c. It is in the best interest of the youth	No
d. Other (specify)	Yes - Meet extended foster care eligibility criteria

Domain C: Child welfare system context

Table C.I. Child welfare system context

	Response
1. State- or county-administered child welfare system	State-administered
2. State operates under legal consent decree or other court-ordered monitoring	No

Supplemental Notes on State

Definitions

Prenatal exposure to drugs or alcohol is not considered maltreatment if there is no child abuse or neglect allegation or imminent risk of serious harm regarding children in the mother's care.

Reports involving factitious disorder by proxy may be accepted under the statutory definition of neglect.

According to state law, the department investigates all child fatalities or near fatalities when there is or was an open case in the past 12 months.

Reporting

There is a single centralized statewide reporting hotline on all state holidays and at all hours other than Monday through Friday, 8 am–4:30 pm.

Although all reporters can remain anonymous, mandated reporters will not satisfy their mandatory reporting requirement if they do remain anonymous.

Training is required only for the foster parent who is the primary caregiver.

Homeless shelter staff are mandated reporters if the shelter is licensed as an overnight youth shelter.

Instances of substance-exposed newborns that do not meet the criterion for a CPS intervention are referred for a plan of safe care.

Screening

Central Intake is the centralized statewide screening unit on all state holidays and at all hours other than Monday through Friday, 8 am–4:30 pm.

Investigations

Beginning October 1, 2008, the department no longer makes inconclusive findings but retains such findings made before that date.

Child welfare response

Cases not eligible for differential response include the following:

1. Severe maltreatment or abuse by a parent or caregiver,
2. Previous shelter care or dependency in the home closed in the past 12 months,
3. Alleged victim is already in out-of-home care,
4. Alleged victim or subject was involved in three or more previous intakes screened in for CPS in past 12 months,
5. Physical abuse to a child age 3 or younger,
6. Physical abuse to children younger than age 5 reported on behalf of a medical professional,

7. Injury to non-mobile infant,
8. Allegation of commercial sexual exploitation,
9. Child-on-child sexualized contact,
10. Medical abuse reported on behalf of a medical professional,
11. Law enforcement report of parent arrested for criminal mistreatment of a child,
12. Child victim of a criminal offense,
13. Serious physical abuse or serious neglect,
14. The parent or caregiver declines to participate in Family Assessment Response (FAR),
15. The parent or caregiver refuses to allow the FAR caseworker to complete an initial face-to-face encounter or interview the identified children.

Effective June 6, 2024, extended foster care is an opt-out-only program with no requirements.

In-home services aren't provided based on being unsubstantiated, but rather determined by family needs and requests.

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