ASPE ASSISTANT SECRETARY FOR PLANNING AND EVALUATION | OFFICE OF HUMAN SERVICES POLICY

BRIEF

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Citizen Review Panels After 30 Years: Current Activities and Unanswered Questions about Impact and Their Role in the Larger Oversight Ecosystem

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KEY POINTS

- Required by the Child Abuse Prevention and Treatment Act (CAPTA), citizen review panels (CRPs) examine child welfare policies, practices, and selected cases to evaluate whether child welfare agencies effectively protect children from maltreatment. The CRPs recommend ways to improve child protection systems, issue annual reports, and increase the accountability of and public involvement in child welfare services.
- There are at least 683 CRPs across the country, with 17 states having more CRPs than required (11 states are required to have at least one CRP, and 41 are required to have three).
- This brief found information on 119 CRPs. Fifty-six CRPs reported the use of an existing group (such as a child fatality review board, advisory group, or Children's Justice Act task force) to meet the requirement for a CRP.
- CRP membership varies by the focal topic of the panel. Members often include state or county social services administrators, legal or judicial representatives, community social services agencies, and medical care representatives. Of the 59 reports that included information about member roles, at least 14 states indicated their panels included foster care alumni.
- CRPs are required to meet quarterly. Thus, 683 CRPs meet at least 2,677 times in a year (equivalent to over 7 CRP meetings each day of the year), with costs covered by CAPTA grants or state funds.
- CRPs commonly collect information to guide their recommendations by reviewing child protection agencies' policies and practices and state child protection laws, holding meetings or interviews with child protection staff and administrators, and reviewing individual cases.
- CRPs often evaluate adherence to child protection standards, but no CRP reported assessing adherence to all parts of the state's CAPTA plan.
- Most CRPs' reports included recommendations for the state child welfare agency (98 CRPs, 82 percent). State responses suggested that states had already implemented or were planning to implement the majority of recommendations. The primary reason a state would not implement a recommendation was that legislation, policies, programs, or resources already existed to address the recommendation, making it somewhat unnecessary.
- After 30 years, there is limited information on the effectiveness of CRPs. Given the expense and time commitment of operating panels, and the presence of other oversight mechanisms, it is worth exploring whether the benefit justifies the continued cost.

BACKGROUND

The passage of the Child Abuse Prevention and Treatment Act (CAPTA) established a foundational framework to address child abuse and neglect. The CAPTA State Grant Program creates core federal expectations for state child protection systems and requires states to provide assurances they have laws, policies, and procedures in place to address a broad set of statutory requirements to receive formula grant funding, although this funding makes up less than one percent of child welfare spending.[1]

One of these requirements is for states to convene citizen review panels (CRPs), which are community-based groups that provide independent oversight of state child protection systems. CRPs are composed of voluntary members who broadly represent the community in which the panel is established and include those who have expertise in child abuse prevention and treatment; this may include adults who are former victims of child abuse and neglect. CRPs review child welfare policies, practices, and selected cases to assess whether the agencies effectively protect children from abuse and neglect. CRPs recommend ways that programs or practices can improve, issue annual reports, and increase the accountability of and public involvement in child welfare services.[2,3,i] Depending on the amount of CAPTA funds received, states must have one or three panels.

This brief was designed to assess the current state of CRPs. Findings indicate that while statute requires states to establish these panels, there is an evidence gap regarding their effectiveness. Future policy, program, and research efforts may wish to consider ways to reduce administrative burden, improve coordination, promote cost efficiency, prevent duplication, and emphasize outcome-focused measures in child welfare oversight.

METHODS

To collect data on the activities of CRPs in each state, the team searched for and reviewed recent (that is, from 2022 or later) publicly available annual reports from CRPs and state responses to CRP recommendations; additionally, the authors coordinated with the Children's Bureau to gather additional information on missing reports. The reviews included 50 states, the District of Columbia, and Puerto Rico (hereafter, 52 states). The team conducted a structured review of information found on 119 CRPs using the most recent reports and available response documents from state child welfare agencies.[ii] Occasionally, if information about several regional panels was combined in one report (for instance, North Carolina reported survey responses from 78 of 101 local panels), but information on specific panels in the report was not available, the team counted the information as only one CRP in the analysis.

It is important to note that the information available in each report varied widely (at least partly because of flexibility in how recent and current reporting requirements are structured), with inconsistencies in length and level of detail provided. Variables were also not consistently reported across reports. Therefore, for each variable of interest described below, the team summarized the number of CRP reports that provided sufficient information to answer the question. Since this varied by question, the numbers and percentages are provided below for each item. Additional information on the brief's methods can be found in the appendix of this brief.

[i] Before Fiscal Year 2026 (FY26), states were asked to include the CRP reports and the state response as part of the CAPTA portion of their Annual Progress and Services Report submission. Now, the expectation is that states make CRP reports and state responses available through their website or upon request.

[ii] The team reviewed 68 annual CRP reports. From those reports, information was found on 119 CRPs.

FINDINGS

Characteristics of CRPs

There are at least 683 CRPs across the country, with 17 states having more CRPs than required

All 52 states have at least one CRP and have established their required number of panels.[iii] Seventeen states had more CRPs than required, typically because several regional panels fed into a larger state panel. Forty-nine CRPs reported start dates ranging from 1985 to 2025, two of which started in the fiscal year spanning calendar years 2024 and 2025. Seventy of the 119 CRP panels (59 percent) did not include information on when they were established. Table 1 shows the number of required CRPs compared with the number of established CRPs by state.

Table 1. Number of CRPs Required and Established, by State

State	Number of CRPs required	Number of CRPs established
Alabama	3	3
Alaska	1	1
Arizona	3	3
Arkansas	3	3
California	3	3
Colorado	3	3
Connecticut	3	6
Delaware	1	1
District of Columbia	1	1
Florida	3	>3[iv]
Georgia	3	4
Hawaii[v]	3	1
Idaho	3	6
Illinois	3	3
Indiana	3	3
Iowa	3	3
Kansas	3	3
Kentucky	3	169
Louisiana	3	3
Maine	1	3
Maryland	3	35
Massachusetts	3	3
Michigan	3	3
Minnesota	3	3
Mississippi	3	3

[iii] Until 2023, Hawaii received the minimal allotment of CAPTA funding, requiring the state to establish no less than one Citizen Review Panel. Their allotment increased recently to be slightly over the minimum threshold, and the Children's Bureau has been working with the state to verify that change, understand its impact on the required number of Citizen Review Panels, and support the state in meeting the CAPTA requirements.

[iv] The report reviewed from Florida referenced several CRPs in the state but did not provide an exact number.

[v] Until 2023, Hawaii received the minimal allotment of CAPTA funding, requiring the state to establish no less than one Citizen Review Panel. Their allotment increased recently to be slightly over the minimum threshold, and the Children's Bureau has been working with the state to verify that change, understand its impact on the required number of Citizen Review Panels, and support the state in meeting the CAPTA requirements.

State	Number of CRPs required	Number of CRPs established
Missouri	3	123
Montana	1	6
Nebraska	3	3
Nevada	3	3
New Hampshire	1	1
New Jersey	3	3
New Mexico	3	1*
New York	3	3
North Carolina	3	101
North Dakota	1	1
Ohio	3	5
Oklahoma	3	3
Oregon	3	111
Pennsylvania	3	4
Puerto Rico	3	3
Rhode Island	1	1
South Carolina	3	6
South Dakota	1	1
Tennessee	3	4
Texas	3	6
Utah	3	4
Vermont	1	1
Virginia	3	3
Washington	3	4
West Virginia	3	3
Wisconsin	3	7
Wyoming	1	1
Total panels	**134**	**>683**

Note: Not all 683 CRPs were reviewed because not all reports included information on all panels in the states. Thus, the total number of panels included in the overall analysis was 119.
*New Mexico has one statewide CRP structure that fulfills CAPTA requirements through its Substitute Care Review Boards and the Substitute Care Advisory Council, rather than operating three separately named CRPs. The review boards have been designated by the New Mexico Children, Youth and Families Department to meet the federal CAPTA CRP requirement.

Most CRPs meet at least quarterly, meaning there are likely thousands of panel meetings in a given year

Of the 117 CRPs that provided information on their locality, 59 percent operated statewide, 27 percent operated regionally, and 23 percent operated locally or at the county level (shown in Table 2). These categories were not mutually exclusive, as many statewide panels included regional representatives (and thus counted as both) or consisted of several regional panels. These 117 CRPs were located in 52 states. In 40 states, at least one CRP was operating statewide (these 40 states had 60 CRPs in total).

Of the 104 panels that provided information about meeting frequency, 98 percent met quarterly (as CAPTA requires) or more frequently – meaning that in a given year, there is evidence of at least 408 panel meetings. Extrapolating this 98 percent rate to the full population of panels, if 98 percent of the at least 683 panels met quarterly or more frequently, that would mean there would have been at least 2,677 panel meetings in a given year (equivalent to over 7 CRP meetings each day of the year). Given the lack of information for the other

panels, the true number may be either somewhat higher or lower, but this provides a general sense of potential scope.

Table 2. More Than Three-Quarters of States Had At Least One CRP That Operated Statewide, with Many CRPs Having Regional Representatives or CRPs

	Number (%) of CRPs
Statewide	69 (59%)
Regional	32 (27%)
Local or county	27 (23%)

Note: N = 117 CRPs. Categories are not mutually exclusive; for example, a statewide CRP may include regional representation and thus be counted in both categories.

At least fifty-six CRPs designated existing groups as panels

Of the 119 CRPs reviewed, 69 (58 percent) included information on whether they designated existing groups as CRPs. Of these 69 CRPs, 56 (81 percent) designated existing groups as panels: 20 designated child fatality, near fatality, or serious injury review boards as panels; 12 designated advisory groups as panels; 11 designated Children's Justice Act task forces as panels; 4 designated foster care review boards as panels; 3 designated Children's Trust Fund; and 1 designated a child protection team as the CRP. Seven designated other existing groups as panels (see Table 3). For example, Utah's Child Welfare Improvement councils and Regional Quality Improvement committees act as CRPs for the four panels in the state, and New Mexico's Substitute Care Review Boards act as a statewide CRP. Iowa's Community Initiative for Native American Families and Children also serves as a CRP, and one of Michigan's CRPs was also the Governor's Task Force. Thirteen of these 69 CRPs suggested they did not designate an existing group as a CRP.

Table 3. At Least 65 Percent of States Designate At Least One Existing Group as CRPs

Existing group	Number (%) CRPs	Number of states*
Designated group	56 (81%)	34
Child fatality/near fatality/serious injury review	*20 (29%)*	*19*
Advisory group	*12 (17%)*	*11*
Children's Justice Act task force	*11 (16%)*	*11*
Foster care review board	*4 (6%)*	*4*
Children's Trust Fund	*3 (4%)*	*3*
Child protection team	*1 (1%)*	*1*
Other	*7 (10%)*	*4*

Note: N = 69 CRPs.
* A CRP may designate more than one existing group as a panel.

CRP membership varied by the focal topic of the panel

Reports for 59 panels across 30 states included information about the roles of 1,910 CRP members. Of the 30 states, 14 (47 percent) reported including foster care alumni or adult former victims of child abuse in panels. One hundred and fifty-three (8 percent) members were state or county social services leads, 113 (6 percent) were legal or judicial representatives, 86 (5 percent) were community service agency representatives (such as nonprofit organizations, social services providers, and other local or regional organizations), and 73 (4 percent) were medical care representatives. Additional roles included medical (4 percent) or mental health service providers (4 percent), law enforcement staff (3 percent), and court-appointed special advocates or guardian ad litem (3 percent). Table 4 shows the affiliation of panel members and includes additional members. One

hundred and twenty-eight (7 percent) held "other" roles that, for example, included ombudsmen, local professors, or evaluators. Eight hundred and thirty (or 43 percent) held unknown roles.

Table 4. There is Variation in CRP Members' Professional or Agency Affiliation

Professional or agency affiliation	Number (%) members
State or county social services or child welfare leads	153 (8%)
Other profession or agency role	128 (7%)
Legal or judicial	113 (6%)
Foster care alumni or an adult former victim of child abuse	88 (5%)
Community services agency	86 (5%)
Medical care	73 (4%)
Mental health services	70 (4%)
Law enforcement	60 (3%)
Court-appointed special advocate or guardian ad litem	49 (3%)
Coalition, task force, or board member	43 (2%)
Placement agency	41 (2%)
Foster or adoptive parent	36 (2%)
Health department	31 (2%)
Education	34 (2%)
Medical examiner or coroner	28 (1%)
Elected official	21 (1%)
Parent with lived expertise	13 (<1%)
Juvenile justice services	10 (<1%)
Home visiting	2 (<1%)
Childcare provider	1 (<1%)

Note: N = 59 CRPs and 1910 CRP members.

CRPs often use states' financial and staff resources

Information from 36 states indicated that at least 24 states (67 percent) provided staff assistance to CRPs. At least 12 states (33 percent) provided financial assistance for panel activities, and seven states (19 percent) provided financial support for staff. Fifteen states (42 percent) provided or arranged for technical assistance for CRPs and seven states (19 percent) hosted annual meetings for CRP members. Some states provided more than one type of support. Table 5 shows the supports that states provided to CRPs. The Children's Bureau understands that many states may not use a significant portion of their CAPTA State Grant funds to support CRPs. To the extent states provide assistance to CRPs beyond CAPTA funding, that support may come from state or other non-federal resources.

Table 5. Many States Provide Support to CRPs

Supports to CRPs	Number (%) states
Provide staff liaisons or other staff support	24 (67%)
Provide financial support for panel activities	12 (33%)
Provide or arrange training and technical assistance	12 (33%)
Host annual meetings for panel members	7 (19%)
Provide financial support for staff	7 (19%)

Notes: N = 36 states. States and CRPs are not required to report information concerning staff assistance to CRPs.

Selecting and reviewing topics for CRPs

Many CRPs reported using more than one approach to select issues to focus on

Seventy-seven CRPs in 39 states described how they selected issues to focus on for the year (or for several years). Common approaches include selecting issues based on the CRPs' designated purpose (48 CRPs, 62 percent); following up on the previous year's recommendations (16 CRPs, 21 percent); discussing possible issues and deciding which ones to focus on (13 CRPs, 17 percent); and selecting issues from concerns identified through case reviews, including cases of child fatalities (10 CRPs, 13 percent). Some CRPs described using multiple approaches. States most commonly selected issues based on the designated purpose of the group (27 states; 69 percent). Table 6 shows how CRPs select topics by panel and by state.

Table 6. Most CRPs Select Topics by Focusing on Their Designated Purpose

Methods used to select topics/issues	Number (%) of CRPs using the method	Number (%) of states using the method	Number of states in which all the panels in the state used the method
Designated purpose of panel (e.g., child fatality, foster care review board)	48 (62%)	27 (69%)	20
Follow-ups of the previous years' recommendations	16 (21%)	9 (23%)	4
Discuss possible issues and decide which ones to focus on	13 (17%)	11 (28%)	5
Concerns identified through case review findings, including cases of child fatalities	10 (13%)	8 (21%)	5
Concerns about the findings reported in state child welfare outcome data reports	10 (13%)	6 (15%)	4
Policy or program reviews, including reviews of state training programs	9 (12%)	7 (18%)	4
Information, identified concerns from child protection staff, or both	8 (10%)	6 (15%)	3
Information obtained through outreach to the public using focus groups, surveys, stakeholder contacts, or some combination of these	5 (6%)	4 (10%)	2
Literature reviews, panel research, presentations made to the panel, or some combination of these	5 (6%)	4 (10%)	0
Review of CAPTA plan	3 (4%)	2 (5%)	1
Concerns identified in the Child and Family Services Review final report or the Program Improvement Plan	2 (3%)	1 (3%)	0

Notes: N = 77 CRPs and 39 states. Most panels use multiple processes and therefore may be included in more than one category.

Reviewing child protection agencies' policies and practices and state child protection laws was the most common way CRPs collected information to guide their decisions

One hundred and fifteen of the 119 CRPs reported on the sources of information they used to examine the policies, procedures, and practices of child protection agencies. Common methods included reviewing child protection agencies' policies and practices and state child protection laws (74, 64 percent); holding meetings and interviews with child protection staff and administrators (53, 46 percent); and reviewing case records, including child fatality reviews (48, 42 percent). In addition, some CRPs reviewed local, state, or national child welfare outcomes (43, 37 percent), while others collected information based on presentations from child protection staff or other stakeholders (42, 37 percent).

These 115 CRPs were located in 34 states. States most commonly reviewed child welfare outcomes from local sources, state sources, national sources, or some combination of these (29 states, 85 percent) and used presentations to the panels by child protection staff and other relevant stakeholders (25, 74 percent). Table 7 shows the methods CRPs use to collect information by CRP and state.

Table 7. A Variety of Methods Are Used by CRPs to Collect Information

Methods used to collect information	Number (%) CRPs using the method	Number (%) of states using the method	Number of states in which all panels in the state used this method
Review of child protection agency policy and practice and state child protection laws	74 (64%)	24 (71%)	19
Meetings and interviews with child protection staff and administration	53 (46%)	16 (47%)	11
Case record reviews, including child fatality reviews	48 (42%)	24 (71%)	14
Review of child welfare outcomes from local sources, state sources, national sources, or some combination of these	43 (37%)	29 (85%)	13
Presentations to the panels by child protection staff and other relevant stakeholders	42 (37%)	25 (74%)	10
Public outreach, including focus groups, surveys, and stakeholder feedback	40 (35%)	15 (44%)	10
Program updates provided by child protection staff and program evaluations conducted by panels	31 (27%)	22 (65%)	20
Evaluation of existing child protection training	26 (23%)	20 (59%)	7
Review of federal reports, including Child and Family Services Review final reports and federal monitoring reports	21 (18%)	12 (35%)	5

Methods used to collect information	Number (%) CRPs using the method	Number (%) of states using the method	Number of states in which all panels in the state used this method
Review of state reports, including quarterly Program Improvement Plan updates, compliance reports, and child fatality reports	18 (16%)	15 (44%)	6
Child protection–related literature reviews	15 (13%)	11 (32%)	3
Site visits to child protection–related programs and courts	2 (2%)	2 (6%)	2

Notes: N = 115 CRPs and N = 34 states. Most panels use multiple processes and therefore may be included in more than one category.

CRPs most commonly evaluated adherence to child protection standards

One hundred and seven (90 percent) CRPs provided information about the extent to which they evaluate child protection standards. Of these CRPs, 87 (81 percent) examined some of the policies, procedures, and practices of the state or local child protection agency (and not the state CAPTA plan), 12 (11 percent) examined both parts of the state CAPTA plan and some of the child protection standards, and 3 (3 percent) assessed adherence to parts of the state CAPTA plan. Five CRPs (5 percent) did not report reviewing child protection standards policies, procedures, and practices during the period under review (for example, one had a planning year in which it did not review any standards, one was focused on raising funds, and others did not mention specifically reviewing policies or practices, as they focused mostly on outreach or education to the general public). Table 8 shows the number and percentage of panels that evaluated adherence to child protection standards or the state CAPTA plan. Most CRPs used multiple processes and could be included in more than one category.

Table 8. Most CRPs Reported Evaluating Some Child Protection Standards, With a Few CRPs Also Evaluating Adherence to Components of Their States' CAPTA Plan

Evaluation of child protection responsibilities	Number (%) of CRPs
Evaluation of adherence to both parts of the state CAPTA plan and some of the child protection standards	12 (11%)
Evaluation of adherence to some of the child protection standards only	87 (81%)
Evaluation of adherence to parts of the state CAPTA plan only	3 (3%)
No evidence of evaluation of state fulfillment of responsibilities for either the state CAPTA plan or child protection standards	5 (5%)

Note: N = 107 CRPs.

State child welfare agencies' responses to CRP reports

In many cases, CRP recommendations are already being implemented by states

Information about recommendations was available for 99 CRPs (83 percent), and 98 CRPs collectively made 760 recommendations across 36 states (one CRP noted that it planned to make recommendations the following year). For 75 of these 98 CRPs that made recommendations, we found responses from state child welfare agencies (across 30 states) to 504 recommendations. The team did not locate responses to all the recommendations, but state responses suggested that states had already implemented or were planning to implement the majority of recommendations (~428).

States provided reasons for not implementing 76 recommendations. The primary reason for not implementing a recommendation was that state or federal legislation already existed or that child protection policies, procedures, programs, or resources were already in place to address the panel's recommendations or concerns (41 recommendations; 54 percent). Other reasons include that the recommendation did not fall under the purview of the child protection agency (15 recommendations; 20 percent); or that current processes, policies, or procedures were required by law (11 recommendations; 14 percent). Table 9 includes reasons why states noted they would not implement a particular recommendation. These findings indicate that recommendations from CRPs may at times not reflect a state's current context or recent child welfare efforts and may at times highlight a concern that a state is already aware of and working to address.

Table 9. States Often Noted that Legislation, Policies, or Resources Were Already in Place to Address the Recommendation

Reasons why states would not implement CRP recommendations	Number of recommendations (% of recommendations that were not implemented)
The recommendation is not warranted because state or federal legislation already exists or child protection policies, procedures, programs, and resources are in place to address the panels' particular recommendations and concerns	41 (54%)
The recommendation does not fall under the purview of the child protection agency	15 (20%)
The current processes, policies, or procedures are required by law	11 (14%)
The state cannot implement the recommendation without legislative approval or a change in state statute	4 (5%)
The staff members necessary to implement the recommendation are not available	3 (4%)
The funds to implement the recommendation are not available	2 (3%)

Note: N = 76 recommendations where the state indicated they would not implement the recommendation.

Of the 119 CRPs reviewed, less than 40 percent mentioned coordination with other child welfare oversight stakeholders

Information on how CRPs coordinated with other entities was available for 46 CRPs (39 percent). The team did not assume that CRP membership indicated coordination, so these counts do not reflect entities with representatives who served as CRP members.

Across these 46 CRPs, the stakeholders they coordinated with were not mutually exclusive, and many CRPs described coordinating with more than one entity. As shown in Table 10, only six of the 46 CRPs (13 percent) reported coordinating with state ombudsmen, only four (9 percent) coordinated with court-appointed special advocates or guardians ad litem, and only six (13 percent) coordinated with legislatures. Forty-five CRPs (98 percent) described coordinating with other entities (for example, the other category in Table 10 includes 18 CRPs that coordinated with other panels in the state, 12 that coordinated with state or local public agencies or offices, and 10 that coordinated with child fatality review boards or offices).

Table 10. CRPs Engaged in Coordination Efforts with Varying Child Welfare Oversight Stakeholders

Entities coordinating with CRP	Number (%) of CRPs
Ombudsman	6 (13%)
Legislatures	6 (13%)
Guardian ad litem or court-appointed special advocate	4 (9%)
Other	45 (98%)

Note: N = 46 CRPs.

CRPs bring together child welfare agencies, courts, law enforcement, public health, education, behavioral health providers, community organizations, caregivers, and people with lived experience. For example, a Maryland CRP report showed that local CRPs interview social services staff, parents, youth, caregivers, providers, court-appointed special advocate volunteers, and therapists, and then send recommendations on safety, permanency, placement, education, and health to juvenile courts and local departments of social services. A Kentucky CRP report showed that CRPs bring caseworkers, caregivers, legal representatives, and others together in real time to identify barriers and develop practical solutions.

CRPs also coordinate with courts, legal partners, and other advisory groups to address issues identified through review. One of Louisiana's CRPs works with the child welfare agency, judges, attorneys, court-appointed special advocate programs, universities, and parent and child representation programs on multidisciplinary training, bench books (reference manuals used by judges and court personnel), model court documents, alternatives to removal, and improved legal representation. In Indiana, members of the Foster Parent CRP participated with former birth parents and agency staff on a shared advisory board focused on improving collaboration between foster and birth parents during reunification. Panel members also worked with the agency's policy team to review proposed changes to foster home licensing and out-of-home care policies.

Several states have created formal structures to keep CRP work connected to broader agency improvement efforts. Illinois uses a steering committee and monthly stakeholder meetings to share updates, reduce duplication, track recommendations, and engage policy, child protection, and quality assurance staff. Kansas's CRPs hold joint planning retreats and maintain regular communication with the Department for Children and Families on major planning and improvement processes.

These examples show that states are using recurring mechanisms such as joint case reviews, shared data, multidisciplinary training, agency liaisons, and legislative briefings to strengthen coordination. Future research could assess the impact of CRP coordination with other child welfare stakeholders; it could also consider how this coordination compares and relates to other child welfare coordination efforts, to determine if there are ways to reduce administrative burden and prevent duplication.

CONCLUSION

CRPs are one mechanism for public oversight and community engagement in child welfare systems, among others (e.g., Child and Family Services Plan, Program Improvement Plan). Findings from this review indicate that CRPs continue to operate in every state and generally fulfill their core functions of examining child protection policies, practices, and outcomes; identifying areas for improvement; and providing recommendations to state agencies. Panels employ a wide range of approaches to gather information, including reviews of policies and case records, analysis of child welfare outcomes, engagement with agency staff and stakeholders, and public outreach activities. These activities typically align with CRPs' stated purposes.

Yet, after 30 years, evidence on their effectiveness remains limited. CRPs reported inconsistent coordination with other forms of child welfare oversight. Since their launch, other forms of oversight have emerged, such as greater reliance on ombudsman offices.[4] CRPs should be reviewed, not just for their activities, but also for the unique value they add beyond other forms of similar or duplicative oversight mechanisms.

Variability in how CRP reports are published makes it difficult to locate recent reports and state responses, suggesting that public transparency and accessibility could be strengthened. This review identified substantial variation across states in panel structure, membership, reporting practices, and the extent to which publicly available reports document activities. Many reports lacked the information needed to assess panel functionality, including panel membership composition, review of child protection standards and certain CAPTA requirements, and the support that states provide to panels.

This review also revealed that in many cases, CRP recommendations are already being implemented by states. Additional information is needed to determine whether recommendations that are taken up are implemented because they are a meaningful source of feedback for agency improvement efforts or whether they are redundant with existing state efforts that would have happened even absent the CRP. Other CRP recommendations are not implemented due to existing legislation or being outside the purview of the child welfare system. Perhaps, as one former state social service director argued, CRPs "have become largely symbolic and often reinforce the very delays and disparities they were meant to fix."[5] Policymakers could benefit from efforts to understand the administrative burden, costs, and potential duplication of multiple oversight efforts, as well as the unique value that CRPs may add in improving outcomes for children and families.

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APPENDIX. RESEARCH QUESTIONS AND METHODS

Research questions

The brief aimed to answer the following research questions:

1. What are the characteristics of CRPs, and how do they vary within and across states?
2. To what extent do CRPs examine the policies, procedures, and practices of state and local child protection agencies? Is this done annually?
3. To what extent do CRPs evaluate how well state and local child protection agencies fulfill their responsibilities with regard to adherence to the state plan, adherence to child protection standards, and other criteria (including fatality reviews, if relevant)?
4. To what extent are CRPs complying with federal reporting requirements?
5. To what extent are states complying with federal reporting requirements with regard to responding to CRP reports?
6. What actions do states take in response to CRP recommendations, either immediately or in subsequent years?
7. To what extent do CRPs coordinate with other child welfare oversight stakeholders (such as ombudsmen, guardians ad litem, court-appointed special advocates, and legislatures)?

Searching for reports

To collect data on the activities of CRPs in each state, we searched for and reviewed recent (2022 or later) publicly available annual reports from CRPs and state responses to CRP recommendations. The reviews included 50 states, the District of Columbia, and Puerto Rico (hereafter, 52 states).

When unable to locate a CRP report, we searched for other sources, such as Annual Progress and Services Reports, CAPTA reports, and Child and Family Services Plans. We also coordinated with the Children's Bureau in the Administration for Children and Families to locate additional reports and responses. Through these searches, the team found information on 119 CRPs. Although some reports had full detail on one or more panels, other reports described the activities of panels that coordinated several local panels. Some states issued separate reports for each of their panels. For example, Arizona provided detailed information on the activities of three panels in one report, whereas Kansas had three separate reports for its three panels.

Reviewing reports

The team reviewed 68 annual CRP reports. From those reports, information was found on 119 CRPs. We conducted a structured review in Excel based on information found on those 119 CRPs, using the most recent reports and available response documents from state child welfare agencies. There were 37 cases in which information from several CRPs was combined into one annual report. For some of these cases (24), it was clear within the report how responses corresponded to each CRP. However, there were 13 instances when information on specific CRPs was not in the report (for example, North Carolina reported survey responses from 78 of 101 local panels). In these cases, the team counted the information as only one CRP in the analysis. Team members modeled their standardized coding template on the tables in the 2013 Report to Congress, and they searched for information on a range of topics, including the role of panel members, how panels selected topics, and how panels collected information to inform decisions.

Conducting analysis

For each variable of interest, the team summarized the number of CRP reports that provided sufficient information to answer the question. Of those reports, team members summarized the number of responses per question (and the percentage of the total available responses). They used binary variables (such as yes/no indicators) and count variables to facilitate the analysis.

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