Administrative Policies and Procedures: 14.26

Subject:	**Child Protective Services Assessment Track**
Authority:	TCA 37-5-105 (3); 37-5-106; 37-5-601, through 608
Standards:	**COA:** PA-CPS 3, PA-CPS 6, PA-CPS 7, PA-CPS 10, PA-FC 3; **DCS Practice Model Standards:** 12-300; 12-301
Application:	To All Department of Children's Services Assessment Employees
Active Memo:	This linked Memo supplements requirements in this policy: ***Settling of Appeals of Substantiations Memo.***

Policy Statement:

Through the Child Protective Services Assessment Track, DCS assesses risk and safety of children and when appropriate offers and provides services to safeguard and enhance the welfare of children and preserve family life by strengthening the ability of families to parent their children while keeping the children safe from neglect and abuse.

Purpose:

To provide guidelines and timeframes to support and direct staff in the assessment of risk and safety and the provision of services to children and families of the Child Protective Services Assessment Track.

Procedures:

A. Screening and assignment

Response Priorities are defined as:

1. **Priority-1 (P-1): Within twenty-four (24) hours or immediately at the supervisor's discretion. Investigations assigned this priority are initiated by a face-to-face contact with the victim(s) no later than twenty-four (24) hours but <u>immediately</u> if the supervisor deems an immediate response is necessary. Priority 1 reports allege that children may be in imminent danger.**
2. **Priority-2 (P-2): Two (2) Business Days: Investigations/assessments assigned this priority are initiated by face-to-face contact with the victim within two (2) business days. <u>Priority-2 reports allege injuries or risk of injuries that are not imminent, life threatening or do not require immediate medical care</u> where a two (2) business day delay will not compromise the investigative effort or reduce the chances for identifying the level of risk to the child.**
3. **Priority-3 (P-3): Three (3) business days: investigations/assessments given this priority are initiated by face-to-face contact with the victim within three (3) business days. <u>Priority-3 are reports that allege</u>**

	situations/incidents considered to pose low risk of harm to the child where three (3) business days will not compromise the investigative effort or reduce the chances for identifying the level of risk to the child. 4. If the alleged child victim is hospitalized, the CPS worker or supervisor will contact the hospital within 24 (twenty-four) hours of the intake (refer to ***Protocol for Working with Hospitals***). 5. The Child Protective Services Assessment (CPSA) caseworker refers to DCS policy ***14.5, CPS: Locating the Child and Family*** for initiating good faith attempts. 5. Each region works with local juvenile court judges to establish local protocols to notify juvenile court of every child abuse and neglect referral.
B. Assessment process	**Initial Assessment (First 30 days):** 1. A Child and Family Team Meeting (CFTM) must be held by the 30th day from the date of referral if services are needed. Participants at the FSTM will include caseworker, family and the family support team. Complete ***Family Permanency Plan***. Complete the Safety Assessment section of the FAST within 72 hours of contact with the child. (Refer to the Family Advocacy Support Tool Protocol referenced as the ***FAST Case Protocol***). 2. Complete **FAST** within ten (10) business days from date of referral. (Refer to ***FAST Case Protocol***). If a child comes into custody, the FAST is completed within two (2) business days of entering custody. 3. There is a minimum of two (2) face-to-face contacts with the victim. The face-to-face contact with the child to meet response time or a team meeting that included the child, may count toward meeting the required two (2) contacts. Each parent/caretaker(s)/significant other and sibling(s) residing in the home is seen at least one (1) time per month. At least one (1) visit is in the home. **Exception:** This is not required for classifications of "No Services Needed (NSN)". Refer to Section C.1, for NSN tasks. 4. A Child and Family Team Meeting (CFTM) is held by the 30th day from the date of referral if the FAST results indicate the need for services. Participants at the CFTM include the case worker, family, family support team, and service providers. Create a Family Permanency Plan. **Note**: If circumstances change and services are deemed necessary after day thirty (30) from the referral date, a CFTM is held immediately following the identification of the need for services. Create a Family Permanency Plan. 5. Ensure all required forms are completed and documents are reviewed with family/client as applicable. (See list of required forms and documents in the ***Forms*** and ***Collateral Documents*** sections of this policy). 6. If a child comes into DCS custody prior to thirty (30) days from the date of referral, CPS initiates a Family Functional Assessment within five (5) business days.

	7. When it appears that the case is moving toward a removal of a child five (5) years and older, the CPS caseworker initiates a *Child and Adolescent Needs and Strengths (CANS)* assessment prior to the potential removal CFTM. 9. Whenever there is an imminent risk of a child(ren) coming into custody a Pre-custodial CFTM with a skilled facilitator is convened to explore all alternatives to placing the child into custody. 10. When an emergency removal takes place before a CFTM can be convened, the CFTM occurs prior to the preliminary hearing. In any event, a CFTM occurs no later than seven (7) days after the date of custody. Team Coordinators (TC) and Regional Legal Counsel or designee approves the decision to petition for custody. The Team Leader (TL) attends the CFTM. 11. Each region establishes a written local protocol to consult with a Master's Level Social Worker (MSW) in the removal process. **Note:** A removal does not always require substantiation. Program staff and Regional Legal Counsel or designee discusses the program's classification and any circumstances that may warrant substantiation. 12. All assessment cases are classified by 30 days from the date of referral. Any cases not classified by 30 days require an administrative review, documented in TFACTS, detailing the reason for the delay. 13. There is an initial administrative review held within the first 30 days and an entry in TFACTS providing case direction, classification approval and an indication that a face- to-face contact or good faith attempt with the alleged victim and/or family has occurred. 14. The caseworker documents all forms of consultation (MSW, Well-Being, legal etc.).
C. Assessment classifications and tasks	1. **<u>No Services Needed</u>** – An assessment is completed and no risk or service needs are identified. Safety of a child(ren) is not an issue and risk of harm is not a concern. a) Cases are classified as "no services needed" by thirty (30) days from the date of referral, and the case is closed immediately following classification approval. b) One (1) visit is in the home. Each parent/caretaker(s)/ significant other and sibling(s) residing in the home are seen. c) If a supervisor has reviewed and declared that there are no safety/risk concerns, no additional visit is required before case closure. The supervisor documents this review in TFACTS. 2. **<u>Services Recommended (Day 31 thru 90)</u>** - There is a need for services, but there is no immediate threat of harm to the child or family safety. These encouraged and voluntary services may be new services or existing services the family is recommended to continue. a) There is a minimum of one (1) monthly face-to-face contact with the victim. If the contact is not in the home, there is a visit at the home where the child

resides. Each parent/caretaker(s)/significant other and sibling(s) residing in the home is also seen at least one (1) time per month.

b) If the child or family is receiving paid DCS services or if the closing **FAST** warrants ongoing DCS involvement, a CFTM may be held to evaluate progress, determine the continued need for services, or to close the case. The Family Permanency Plan is revised if there are any changes to the original plan.

c) The FFA is initiated if the child or family is receiving paid DCS services or if ongoing DCS involvement is warranted to address concerns or service needs.

d) Upon initiation of services, CPS makes monthly contact with service providers for the life of the CPS case. Contact may be made by telephone, e-mail or face-to-face.

3. **Services Required (Day 31 thru 90)** - There is an immediate threat of harm, and without services the safety of the child or family is at question. Safety issues and future risk of harm is so great that the agency provides involuntary services.

a) There is a minimum of two (2) monthly face- to-face contacts with the victim. If the contact is not in the home, there is a visit at the home where the child resides. Each parent/caretaker(s)/ significant other and sibling(s) residing in the home is seen at least one (1) time per month.

b) If, after day 60, the risk of harm has lessened and the case is on track to be closed with no additional services, the face-to-face contacts can decrease to a minimum of one (1) monthly face-to-face contact with the victim.

c) If the child or family is receiving paid DCS services or if the closing **FAST** warrants ongoing DCS involvement, a CFTM may be held to evaluate progress, determine the continued need for services, or to close the case. The Family Permanency Plan is revised if there are any changes to the original plan.

d) FFA is initiated for all cases classified as services required.

e) Upon initiation of services, CPS makes monthly contact with service providers for the life of the case. Contact may be made by telephone, e-mail or face-to-face.

4. **Family Not Willing to Accept Services (Required)**

a) The caseworker and Team Leader consult to determine whether risk/safety factors exist. The results of the FAST are considered during the consultation.

b) In accordance with TCA 37-5-604 (d), if the family does not cooperate with the provision of community-based public or contract services or provide alternative services of its own to meet such needs, then the department assesses whether further steps are necessary to assess needed services. All documentation is entered in TFACTS.

c) If the court does order services, there is a minimum of two (2) monthly face-to-face contacts per month with the victim from date of the court order.

	(Refer to the above section "C, 3- Services Required" to complete tasks for these cases). If after day (sixty) 60 of the court order, the risk of harm has lessened and the case is on track to be closed with no additional services, face-to- face contacts can decrease to a minimum of once (1) monthly with the victim. d) If the Court does not order services, the case is closed after consultation with Regional Legal Counsel or designee and TC for other options. Document in TFACTS.
D. Case Transition and closure	1. **Case Transition to FSW** a) If services are needed beyond seventy-five (75) calendar days and will not be completed by ninety (90) calendar days, the CPS A and TL schedule a pre-conference with the FSW TL and the FSW (if already identified). The pre-conference addresses the reason for involvement; results of interventions provided and attempted; the level of cooperation from the family; and any results from formal and informal assessments. Efforts made toward completing the requirements on ***CS-1031, CPS Case Transition Checklist*** are also discussed. b) CPS schedules a Child and Family Team Meeting (CFTM) after day 75 with the family, the Family Service Worker (FSW), any providers working with the family, and any support persons identified by the family to transition case to the FSW unit. A supervisor is also present at this transfer CFTM. c) At the transfer CFTM, the Family Permanency Plan is reviewed and revised with input from all participants to ensure that any safety issues and the continued need for services are addressed in the plan. d) Family and agency partners are invited to the transfer CFTM, and given adequate notice of meetings, preferably ten (10) calendar days in advance for written notification or seven (7) calendar days if notified by telephone, email or face-to-face. Method of notification and invitees are documented in TFACTS. e) Form ***CS-1031, CPS Assessment Case Transition Checklist***, is completed by the CPS Assessment worker and accompanies the CPS case file at the time of transfer. (Refer to DCS form ***CS-1031***, ***CPS Assessment Case Transition Checklist,*** for tasks required at the transfer CFTM). f) The transfer CFTM is documented in the closing administrative review. 2. **Case Closure -** To properly close a CPSA case, all CPS assessment tasks, tools, decisions and notifications are completed, documented, and approved within ninety (90) days from the receipt of the report. a) Additional Face-to-Face contact with the alleged child victim is recommended at case closure if the child has not been seen within the last thirty (30) business days. If a supervisor has reviewed and declared that there are no safety/risk concerns, no follow-up visit is required before case closure. The supervisor documents this review in TFACTS. b) Complete closing FAST as applicable. (Refer to ***FAST Case Protocol***).

	c) A Closing Summary is created to include: ♦ A narrative description of the reason for opening; ♦ Current safety, risk and well-being status of child and family; ♦ Classification decision and the justification; ♦ Notification to any service providers of CPS case closure; and ♦ Case plan including any referrals made and the family's reaction to case closure. d) There is an administrative review held prior to case closure with the TL's entry into TFACTS indicating entry of sufficient documentation, completion of tasks, and the approval for closure. e) If an assessment goes beyond ninety (90) days, the team leader documents in TFACTS an explanation for the delay, including the next steps to complete the case. f) Each region works with local juvenile court judges to establish written local protocols to notify juvenile court with a summary of the results of every child abuse and neglect case.
E. Assessment referral received on open cases	If new assessment referrals are screened in on an open assessment case that has been open thirty (30) days or less of the initial report and the classification has yet to be approved, a screen out request is made to the Child Abuse Hotline (CAH), and the open case absorbs the new allegations. (Refer to Policy ***14.3 Screening, Priority Response and Assignment***).
F. New referrals on open assessment cases	1. When an assessment case has been opened for less than thirty (30) days and does not have an approved classification and new allegations are received but have been assigned to a different track (subsequently causing two cases to be opened at the same time), both CPS supervisors discuss the allegations and jointly decide if it is appropriate for two (2) separate cases to remain open or if the open case absorbs the new allegations. (Refer to Policy ***14.3 Screening, Priority Response and Assignment*** and ***Work Aid 8 Child Protective Services Requests for Reconsiderations***). 2. If the decision leads to two (2) separate cases, the Supervisors may choose for the CPS units to collaborate. If the decision is to absorb the new allegations into the open case, information from the case to be closed shall be provided to the CM who will continue to work the case.
G. Data System documentation	Unless other requirements are specified in policy for documentation, or events not documented elsewhere, or requiring a broader explanation, all information required to be documented in case recordings or appropriate screens in ***TFACTS*** must be entered within thirty (30) days from the date of the contact or occurrence.
H. Case File documentation and organization	Case file documentation and organization for CPS Assessment cases is uniform as outlined on form ***CS-0726, Child Protective Services/Non-Custodial Case File Documentation and Organization Checklist***.

Forms:	***CS-0158, Notification of Equal Access to Programs*** ***CS-0050, Case Intake Packet Documents Verification*** ***CS- 0668, Authorization for Release of Information to the Department of Children's Services and Notification of Release*** ***CS-0699, Notices of Privacy Practices*** ***CS-0726, Child Protective Services/Non-Custodial Case File Documentation and Organization Checklist*** ***CS-0740, CPS Investigation Summary and Classification Decision of Child Abuse/Neglect Referral*** ***CS-0827, Non-Custodial Consent for Transportation*** ***CS-1031 CPS Case Transition Checklist***

Collateral documents:	***Child and Adolescent Needs and Strengths (CANS) Assessment*** ***Client's Rights Handbook*** ***Pamphlet – The Multiple Response Approach to Child Maltreatment Concerns*** ***Priority Response Definitions-Examples*** ***Family Permanency Plan*** ***FAST Case Protocol*** ***Protocol for Working with Hospitals***

Glossary:	
Term	***Definition***
	None