# Administrative Policies and Procedures: 14.7

### Subject:
Child Protective Services Investigation Track

### Authority:
TCA 37-1-401 et seq; 37-1-601 et seq; 37-5-105 (3); 37-5-106; 37-5-107; 37-1-413; 39-13-301; 39-13-309; 37-1-413

### Standards:
**COA:** PA-CFS 2.02, PA-CFS 3, PA-CFS 5, PA-CFS 7, PA-CFS 8, PA-CFS 9.01-9.03, PA-CFS 10, PA-CFS 11; **DCS Practice Standards:** 11-300A; 11-301A; 11-302A; 11-303A; 11-304A; 11-309A

### Application:
All Department of Children’s Services Child Protective Services Employees and Special Investigations Unit Employees

## Policy Statement:

A Child Protective Services (CPS) investigation case must be classified within thirty (30) calendar days of the Child Abuse Hotline (CAH) receiving a report. An investigation is concluded within sixty (60) calendar days with a decision to close the case, provide or refer to community services or transition to a Family Service Worker (FSW).

## Purpose:
To ensure that CPS cases are properly classified and closed by completing critical investigative tasks, maximizing resources, and making consistent decisions to ensure the safety of the child.

## Procedures:

### A. Investigative Responsibilities

- The following investigative responsibilities must be completed within sixty (60) calendar days from the CAH receiving the report and prior to case closure (refer to **Work Aid 3-Child Protective Services Investigative Tasks and Activities** and **Work Aid 2-Child Protective Services Tasks by Allegations**):
  
  1. Make contact with the hospital within twenty-four (24) hours of the intake, if the alleged child victim (ACV) is hospitalized
  2. Meet priority response within the assigned time frame (refer to Section D of DCS Policy **14.3 Screening, Response Priority and Assignment of Child Protective Services Cases**). The CPS Investigator (CPSI) conducts the required Good Faith Efforts (GFE) to locate the ACV and family and documents those efforts in **TFACTS**.
  3. Convene the Child Protective Investigative Team (CPIT) (refer to Section B of DCS Policy **14.6 Child Protective Investigative Team**) when:
     a) The CAH identifies the allegation to be severe abuse.
     b) Additional information is gathered during the investigation to identify the allegation(s) as severe abuse.
  4. Document opening case summary in **TFACTS**.
5. Review DCS family history and other external historical and case relevant documents, as available. Refer to Safety Notice: Conducting an Efficient and Effective History Search for additional information.

6. Conduct interviews:
   a) Interview/observation of the ACV;
   b) Interview with non-offending parent or caregiver;
   c) Interview/observe other children in the home and/or interview other persons living in the home; and
   d) Interview the Alleged Perpetrator (AP).

**Note:** The AP must be interviewed even when the ACV does not disclose.

   e) Interview(s) witness(es).
      ♦ When conducting interviews, refer to Safety Notice: Beyond the Minimal Facts Interview and Safety Notice: Domestic Violence-Facts and Strategies for Response, for additional information.

7. Notify all judicial entities and licensing facilities of case initiation and closure.

8. Conduct a home visit.

9. Conduct a site visit, if the abuse occurred at a location other than the home.

10. Complete assessment tools.

11. Contact referent, when identified.

12. Request and arrange medical exams or psychological evaluations, if applicable.

13. Case Consultations.

14. Complete other CPS investigative activities or tasks as necessary:
   a) Consult with Regional General Counsel (RGC) when required (refer to DCS Policy 14.9 Child Protective Services Immediate Protection Agreements and DCS Policy 14.12 Removal: Safety and Permanency Considerations);
   b) Conduct Child and Family Team Meeting (CFTM);
   c) Develop service plans, such as the Family Permanency Plan (FPP) or Plan of Safe Care;
      ♦ Maintain regular contact with community partners or service providers for status updates (refer to the Protocol for Working with Hospitals);
      ♦ Interview/Observe each ACV at least once per calendar month when a service plan is in effect until case closure or transition.
   d) Complete required forms; and
   e) Refer to the Tennessee Early Intervention Services (TEIS) for substantiated cases involving children ages three (3) and under.

**Note:** If one (1) or more investigative responsibilities cannot be completed within sixty (60) calendar days and prior to case closure, justification detailing why the responsibility could not be completed must be documented in TFACTS and supervisor approval must be provided.
### B. New Referrals on Open Cases

1. When an additional allegation(s) has been reported and added to an already open investigation, the CPSI conducts investigative activities in accordance with this policy in an effort to address the additional concerns. The CPSI documents the addition of the new allegation(s) in TFACTS and consults with the Lead Investigator (LI) regarding next steps (refer to DCS Policy 14.3, Screening, Priority Response and Assignment of Child Protective Services Cases).

### C. Classification

Within thirty (30) calendar days from the intake date, allegations as defined in Work Aid 1, Categories and Definitions of Child Abuse/Neglect, are classified at the discretion of DCS according to one of the following options:

**Note:** Exceptions to classifying cases within thirty (30) calendar days may include child death investigations awaiting an autopsy report and CPS investigations which are marked as “severe”.

1. **Allegation Substantiated, Perpetrator Substantiated**
   
   This classification is applicable when there is a preponderance of evidence to validate an allegation occurred, occurred and the AP identified in the report is found to be responsible for the alleged acts.

2. **Allegation Substantiated, Perpetrator Unsubstantiated**
   
   This classification is applicable when there is a preponderance of evidence to validate an allegation occurred, however, there is insufficient evidence to substantiate the identified AP.

3. **Allegation Substantiated, Perpetrator Unknown**
   
   This classification is applicable when there is a preponderance of evidence to support that an allegation of abuse or neglect occurred, however, an AP cannot be identified.

4. **Allegation Unsubstantiated, Perpetrator Unsubstantiated**
   
   This classification is applicable when there is not a preponderance of evidence to support the allegation occurred and the AP identified in the report was not found to be responsible for any abuse or neglect.

5. **Allegation Unsubstantiated, Child with Sexual Behavior Problems**
   
   This classification is applicable when there is sufficient information and evidence which supports sexual contact did occur with the ACV, however the AP is twelve (12) years old or younger. This may also include children under age eighteen (18) who clinically function at an age of twelve (12) or younger (due to an intellectual or development disability).

6. **Unable to Complete**
   
   a) This classification is applicable when the ACV or family are unable to be located after GFEs have been completed (refer to DCS Policy 14.5 CPS: Locating the Child and Family); or

   b) The incident occurred in another state and DCS participated in investigative activities or offered services, but was unable to gather sufficient evidence to formally classify the allegation(s).
Note: Approval to classify a case as unable to complete must be given by the Director of Investigations, or designee.

7. Administrative Closure
   a) This classification is applicable when a courtesy interview(s) has been conducted (refer to Work Aid 7, CPS Courtesy Interviews); or
   b) There are other circumstances which are approved at the discretion of the Director of Investigations, or designee.

Note: When using the classification of Administrative Closure, the CPS Supervisor must include a justification on form CS-0740, Child Protective Services Case Summary and Classification Decision of Child Abuse/Neglect Referral, which includes who approved the classification and a reference to any cases that are or have addressed the issues contained in this case.

D. Case Transition
Case transition occurs when it is determined that a service need is identified for a non-custodial case or when custodial services are required (refer to Work Aid 3, Child Protective Services Investigative Tasks and Activities). Also review the Protocol for Safe Sleep Education and Delivery of Safe Sleep Furniture for additional safety information, if applicable.

E. Case Closure
To properly close a CPS investigation, all CPS investigative responsibilities referred to in section A of this policy must be completed, in addition to the following tasks within sixty (60) calendar days:
   a) Case recordings must be entered within thirty (30) calendar days of completing the investigative activity or before case closure, whichever is sooner.
   b) Form CS-0740, Child Protective Services Case Summary and Classification Decision of Child Abuse/Neglect Referrals.
   c) Closing case summary in TFACTS.
   d) Approvals from the LI, as necessary.
   e) For child death/near death cases refer to DCS Policy 20.27, Child Death/Near Death Rapid Response.

Note: If an investigation is open beyond sixty (60) calendar days, the LI documents an administrative review in TFACTS, including an explanation for the delay and a plan for completing the case.

F. Local Protocols/Procedures
All requirements for local procedures or protocols, as documented on CS-0251, Local Administrative Procedures and Protocols, are followed.

G. False Allegations
   1. At the conclusion of an investigation, the CPSI consults with the RGC to discuss whether:
      a) The reporter’s allegation was false.
      b) It was more likely than not that the reporter knew, at the time of making the allegation, that the allegation was false.
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1. The reporter has knowingly made a false allegation about the same ACV or AP.
2. After a determination has been made whether malicious false allegations of abuse or neglect have been reported, the CPSI or RGC may refer to the local District Attorney’s office.

H. Commercial Exploitation of a Minor (CSEM) Cases

In addition to investigative tasks associated with a child sexual abuse allegation and listed in Section A of this policy, the following is completed when the case involves Commercial Sexual Exploitation of a Minor (refer to Work Aid 9, Conducting Investigations on the Commercial Sexual Exploitation of a Minor):

1. The CPSI notifies the CPS supervisor immediately.
2. The CPSI reports the allegation to the Tennessee Bureau of Investigation's (TBI) Tennessee Human Trafficking Hotline (855-55-TNHTH) within twenty-four (24) hours or immediately if the CPS supervisor deems necessary.
3. The CPSI contacts a local non-government organization that specializes in commercial sexual exploitation within twenty-four (24) hours or immediately if the CPS supervisor deems necessary (refer to Protocol for Medical Evaluations for Runaways or Commercial Sexual Exploitation of Minor (CSEM) and Protocol for Health Services for Trafficked Youth).
4. In collaboration with CPIT, determine the need for a medical exam. In collaboration with CPIT, determine the need for a victim interview.
5. If at any point during an open case it is determined CSEM is present, the CPSI confers with the CPS supervisor to determine whether to add an allegation of sexual abuse (if not already alleged) and to select the CSEM indicator on the allegations tab in TFACTS.
6. Allegations of CSEM are always treated as severe abuse and are always worked in conjunction with a child sexual abuse allegation.

I. Safety Considerations

Accurately and expediently assessing immediate safety and the potential for unsafe recurrences are a primary function of CPS' work with families. The following are Safety Notices designed to support knowledge in specific safety-related domains:

a) Safety Notice: Significance and Supports for Interviewing Children
b) Safety Notice: Domestic Violence-Facts and Strategies for Response
c) Safety Notice: Understanding the Difference between Subutex and Suboxone
d) Safety Notice: Utilizing Medical Records as part of Substance Abuse Assessment
e) Safety Notice: Assessing a Newborn’s Drug Exposure
f) Safety Notice: Creating a Safe Environment for Youth Survivors of Exploitation
### Forms:

<table>
<thead>
<tr>
<th>CS-0251 Local Administrative Procedures and Protocols</th>
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<tbody>
<tr>
<td>CS-0740, Child Protective Services Case Summary and Classification Decision of Child Abuse/Neglect Referral</td>
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</table>

### Collateral documents:

- **Policy 14.3 Screening, Response Priority and Assignment of Child Protective Services Cases**
- **Policy 14.5 CPS: Locating the Child and Family**
- **Policy 14.6 Child Protective Investigative Team**
- **Policy 14.9 Child Protective Services Immediate Protection Agreements**
- **Policy 14.12 Removal: Safety and Permanency Considerations**
- **Policy 20.27 Child Death/Near Death Rapid Response**
- **Work Aid 1-Categories and Definitions of Child Abuse/Neglect**
- **Work Aid 2- Child Protective Services Tasks by Allegations**
- **Work Aid 3-Child Protective Services Investigative Tasks and Activities**
- **Work Aid 7- CPS Courtesy Interviews**
- **Work Aid 9- Conducting Investigations on the Commercial Sexual Exploitation of a Minor**
- **Protocol for Completion of the Family Advocacy and Support Tool (FAST)**
- **Protocol for Safe Sleep Education and Delivery of Safe Sleep Furniture**
- **Protocol for Working with Hospitals**
- **Protocol for Medical Evaluations for Runaways or Commercial Sexual Exploitation of Minor (CSEM)**
- **Protocol for Health Services for Trafficked Youth**
- **Safety Notice: Significance and Supports for Interviewing Children**
- **Safety Notice: Domestic Violence-Facts and Strategies for Response**
- **Safety Notice: Understanding the Difference between Subutex and Suboxone**
- **Safety Notice: Utilizing Medical Records as part of Substance Abuse Assessment**
- **Safety Notice: Assessing a Newborn’s Drug Exposure**
- **Safety Notice: Beyond the Minimal Facts Interview**
- **Safety Notice: Conducting an Efficient and Effective History Search**
- **Safety Notice: Creating Safe Environments for Youth Survivors of Exploitation**
### Glossary:

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<thead>
<tr>
<th>Definition</th>
<th>Description</th>
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<tr>
<td><strong>Classify/Classification Decision (CPS):</strong></td>
<td>The decision whether child maltreatment has occurred and who is responsible.</td>
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<td><strong>Preponderance of evidence:</strong></td>
<td>The greater weight of the evidence required in a civil (non-criminal) lawsuit for the trier of fact (jury or judge without a jury) to decide in favor of one side or the other. This preponderance is based on the more convincing evidence and its probable truth or accuracy, and not on the amount of evidence. Thus, one clearly knowledgeable witness may provide a preponderance of evidence over a dozen witnesses with hazy testimony, or a signed agreement with definite terms may outweigh opinions or speculation about what the parties intended. Preponderance of the evidence is required in a civil case and is contrasted with “beyond a reasonable doubt,” which is the more severe test of evidence required to convict in a criminal trial. No matter what the definition stated in various legal opinions, the meaning is somewhat subjective.</td>
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<td><strong>Children with Sexual Behavior Problems:</strong></td>
<td>Sexual behavior problems in children twelve (12) years and under which are developmentally inappropriate or intrusive acts of a sexual nature that typically involve coercion or distress. This may also include children under eighteen (18) who clinically function at an age of twelve (12) or younger (due to an intellectual or developmental disability).</td>
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<td><strong>Commercial Sexual Exploitation of a Minor (CSEM):</strong></td>
<td>The use of any person under the age of eighteen (18) as defined in Work Aid 1, CPS Categories and Definitions of Abuse/Neglect, Section C, numbers one (1) and two (2): Child Sexual Abuse - in exchange for anything of value either directly or indirectly. Force, threat or coercion is not a factor for CSEM.</td>
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