
North Carolina Child Welfare strives to ensure safe, permanent, nurturing families for children. The goal is that every child in North Carolina grows up in a safe, permanent, self-sufficient family where well-being needs of all are met.

Child Protective services are legally mandated, non-voluntary services for families that encompass services for maltreated children (abused, neglected, and/or dependent) and those who are at imminent risk of harm due to the actions of, or lack of protection by, the child’s parent or caregiver. Child Protective Services, provided by county child welfare agencies, are designed to protect children from further harm and to support and improve parental/caregiver abilities to assure a safe and nurturing home for each child.


NC CHILD WELFARE MANUAL FRAMEWORK

- **Policy**: Formal, brief statement of requirements that tie directly to federal law and NC Statute and Rules
- **Protocol**: Mandatory actions to meet policy requirements; what you **must** do
- **Guidance**: Practice or process guidelines, includes preferred practice and recommended practice guidance; how you **should** do it
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**Cross Function Topics** provide definitions, protocol and guidance that is applicable to multiple functional areas. Providing this information in a separate section of the manual supports consistency across functional areas. Follow links within in a functional area to the appropriate cross functional topic for **additional protocol and guidance**.
**Intake Purpose**

In North Carolina, any person who has cause to suspect that a child is being abused or neglected, or is dependent, is required by law to report their concerns to a county child welfare agency. Child Protective Services (CPS) Intake is the first stage of the child welfare process and involves screening child protective services reports to determine what further action is required. Careful, detailed, and thorough work at Intake lays the foundation for making well-informed decisions throughout the life of the case. The quality and consistency of the information gathered at Intake directly impacts the safety of the alleged victim children and any subsequent intervention.

The goal of CPS Intake is to make consistent screening decisions through use of a structured intake process based on specific criteria. The steps of CPS Intake are:

2. Consult the Maltreatment Screening Tool(s) which corresponds to the allegations.
3. Determine the county responsible for completing the CPS Assessment.
4. Consult the Response Priority Decision Tree.
5. Determine the appropriate Assessment Response Type- Investigative vs. Family.

Following the steps above, CPS Intake determines if the reported information meets the statutory guidelines for child maltreatment. When the report is screened in (meets the statutory requirements), CPS Intake determines the county responsible for the assessment, the response time, the response type, and then the report is assigned for CPS Assessment.
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**Intake: Policy & Legal Basis**

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<td>North Carolina requires that anyone who suspects child abuse, neglect or dependency must report their concerns to the county child welfare agency. A person who makes a report of suspected child abuse, neglect, or dependency is immune from civil or criminal liability, if the report was made in good faith.</td>
<td>N.C.G.S. §7B-101 provides the definitions to determine a child welfare agency’s authority to intervene and includes the following sentence in the definition of neglected juvenile: &quot;In determining whether a juvenile is a neglected juvenile, it is relevant whether that juvenile lives in a home where another juvenile has died as a result of suspected abuse or neglect or lives in a home where another juvenile has been subjected to abuse or neglect by an adult who regularly lives in the home.&quot; Relevance in this instance is a legal term that means that the court can find a child neglected on the basis that he or she was living with a victim child.</td>
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<td>County child welfare agencies must receive and screen all reports of abuse, neglect, or dependency, regardless of residency. Each county child welfare agency must have written procedures for receiving Child Protective Services reports and for providing supervisory decision-making 24 hours a day.</td>
<td>N.C.G.S. §7B-300 Protective Services The director of the department of Social Services [county child welfare agency] in each county of the State shall establish protective services for juveniles alleged to be abused, neglected, or dependent. Protective services shall include: the screening of reports; the performance of an assessment using either a family assessment response or an investigative assessment response; casework; or other counseling services to parents, guardians, or other caretakers as provided by the director. These services will help: the parents, guardians, other caretakers, and the court to prevent abuse or neglect; to improve the quality of child care; to be more adequate parents, guardians, or caretakers; and to preserve and stabilize family life.</td>
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<td>The screening process requires knowledge of the statutory definitions of child abuse, neglect, dependency, and caretaker. The county child welfare agency has the authority to intervene only when the allegation, if true, would meet the legal definitions. Reports that are accepted for CPS Assessment must clearly invoke the statutory authority to provide Child Protective Services.</td>
<td>N.C.G.S. § 7B-301. Duty to report abuse, neglect, dependency, or death due to maltreatment. (a) Any person or institution who has cause to suspect that any juvenile is abused, neglected, or dependent, as defined N.C.G.S. §7B-101, or has died as the result of maltreatment, shall report the case of that juvenile to the director of the department of social services in the county where the juvenile resides or is found. The report may be made orally, by telephone, or in writing. The report shall include information as is known to the person making it including the name and address of the juvenile; the name and address of the juvenile's parent, guardian, or caretaker; the age of the juvenile; the names and ages of other juveniles in the home; the present whereabouts of the juvenile if not at the home address; the nature and extent of any injury or condition resulting from abuse, neglect, or dependency; and any other information which the person making the report believes might be helpful in establishing the need for protective services or court intervention. If the report is made orally or by telephone, the person making the report shall give the person's name, address, and telephone number. Refusal of the person making the report to give a name shall not preclude the department's assessment of the alleged abuse, neglect, dependency, or death as a result of maltreatment.</td>
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(b) Any person or institution who knowingly or wantonly fails to report the case of a juvenile as required by subsection (a) of this section, or who knowingly or wantonly prevents another person from making a report as required by subsection (a) of this section, is guilty of a Class 1 misdemeanor.

N.C.G.S. §7B 302(b) states: "When a report of a juvenile's death as a result of suspected maltreatment or a report of suspected abuse, neglect, or dependency of a juvenile in a non-institutional setting is received the director of the department of social services shall immediately ascertain if other juveniles remain in the home, and, if so, initiate an assessment in order to determine whether they require protective services or whether immediate removal of the juveniles from the home is necessary for their protection."

N.C.G.S. § 7B-309. Immunity of persons reporting and cooperating in an assessment. Anyone who makes a report pursuant to this Article, cooperates with the county department of social services in a protective services assessment, testifies in any judicial proceeding resulting from a protective services report or assessment, or otherwise participates in the program authorized by this Article, is immune from any civil or criminal liability that might otherwise be incurred or imposed for that action provided that the person was acting in good faith.

Child Abuse Prevention and Treatment Act (CAPTA) requires health care providers involved in the delivery and care of infants born with and identified as being affected by substance abuse, withdrawal symptoms resulting from prenatal drug exposure or a Fetal Alcohol Spectrum Disorder to notify the child protective services system of the occurrence.

**Definitions**

**Juvenile** - A person who has not reached the person's eighteenth birthday and is not married, emancipated, or a member of the Armed Forces of the United States.

**Caretaker** - Any person other than a parent, guardian, or custodian who has responsibility for the health and welfare of a juvenile in a residential setting. A person responsible for a juvenile's health and welfare means a stepparent, foster parent, potential adoptive parent when a juvenile is visiting or as a trial placement, an adult member of the juvenile's household, an adult relative entrusted with the juvenile's care, or any person such as a house parent or cottage parent who has primary responsibility for supervising a juvenile's health and welfare in a residential child care facility or residential educational facility, or any employee or volunteer of a division, institution, or school operated by the Department of Health and Human Services. Nothing in this subdivision shall be construed to impose a legal duty of support under Chapter 50 or Chapter 110 of the General Statutes. The duty imposed upon a caretaker as defined in this subdivision shall be for the purpose of this Subchapter only (see further clarification from NC DSS in Standards and Protocol). See [Caretaker Definition Decision Tool](#).
Abused Juveniles - Any juvenile less than 18 years of age whose parent, guardian, custodian, or caretaker:
(a.) Inflicts or allows to be inflicted upon the juvenile a serious physical injury by other than accidental means;
(b.) Creates or allows to be created a substantial risk of serious physical injury to the juvenile by other than accidental means;
(c.) Uses or allows to be used upon the juvenile cruel or grossly inappropriate procedures or cruel or grossly inappropriate devices to modify behavior;
(d.) Commits, permits, or encourages the commission of a violation of the following laws by, with, or upon the juvenile; first degree rape, as provided in N.C.G.S. §14-27.2; rape of a child by an adult offender, as provided in N.C.G.S. §14-27.2A; second degree rape as provided in N.C.G.S. §14-27.3; first degree sexual offense, as provided in N.C.G.S. §14-27.4; sexual offense with a child by an adult offender, as provided in N.C.G.S. §14-27.4A; second degree sexual offense, as provided in N.C.G.S. §14-27.5; intercourse and sexual offenses with certain victims; consent no defense, as provided in N.C.G.S. §14-27.31 and N.C.G.S. §14-27.32; unlawful sale, surrender, or purchase of a minor, as provided in N.C.G.S. §14-43.14; crime against nature, as provided in N.C.G.S. §14-177; incest, as provided in N.C.G.S. §14-178 and N.C.G.S. §14-179; preparation of obscene photographs, slides or motion pictures of the juvenile, as provided in N.C.G.S. §14-190.5; employing or permitting the juvenile to assist in a violation of the obscenity laws as provided in N.C.G.S. §14-190.6; dissemination of obscene material to the juvenile as provided in N.C.G.S. §14-190.7 and N.C.G.S. §14-190.8; displaying or disseminating material harmful to the juvenile as provided in N.C.G.S. §14-190.14 and N.C.G.S. §14-190.15; first and second degree sexual exploitation of the juvenile as provided in N.C.G.S. §14-190.16 and N.C.G.S. §14-190.17; promoting the prostitution of the juvenile as provided in N.C.G.S. §14-205.3(b); and taking indecent liberties with the juvenile, as provided in N.C.G.S. §14-202.1, regardless of the age of the parties; or
(e.) Creates or allows to be created serious emotional damage to the juvenile. Serious emotional damage is evidenced by a juvenile's severe anxiety, depression, withdrawal, or aggressive behavior toward himself or others;
(f.) Encourages, directs, or approves of delinquent acts involving moral turpitude committed by the juvenile; or
(g.) Commits or allows to be committed an offense under N.C.G.S. §14-43.11 (human trafficking), N.C.G.S. §14-43.12 (involuntary servitude), or N.C.G.S. §14-43.13 (sexual servitude) against the child.

Neglected Juvenile - A juvenile who does not receive proper care, supervision, or discipline from the juvenile's parent, guardian, custodian, or caretaker; or who has been abandoned; or who is not provided necessary medical care; or who is not provided necessary remedial care; or who lives in an environment injurious to the juvenile's welfare; or who has been placed for care or adoption in violation of law. In determining whether a juvenile is a neglected juvenile, it is relevant whether that juvenile lives in a home where another juvenile has died as a result of suspected abuse or neglect or lives in a home where another juvenile has been subjected to abuse by an adult who regularly lives in the home.

Dependent Juvenile - A juvenile in need of assistance or placement because the juvenile has no parent, guardian, or custodian responsible for the juvenile's care or supervision or whose parent, guardian, or custodian, is unable to provide for the care or supervision and lacks an appropriate alternative child care arrangement.
Receive CPS Report

Step 1.
Collect Information on Intake Form

Is child under 18 years of age?

YES

Does the report involve a Substance Affected Infant?

YES

Report Not Accepted

NO

Report Not Accepted

YES

Develop Plan of Safe Care using CC4C Referral.

NO

Report Not Accepted

Does the alleged perpetrator a parent or caretaker?

YES

Step 2. Use Maltreatment Screening Tools to make Screening Decision.

SCREENED IN

NO

SCREENED OUT

Report Not Accepted

Step 3.
Does the child reside in your county?

YES

Step 4.
Use Response Priority Tools to determine initiation timeframe.

YES

Step 5.
Determine appropriate Assessment track, Investigative or Family.

NO

Refer to Appropriate County

CONFLICT OF INTEREST

If after completing the Intake Form a Conflict of Interest (COI) is identified, immediately stop and refer to COI policy.

New reports on an open COI case must be referred to and screened by the partner county with the open case.
## Intake: Anonymous Reporters / Reporter Confidentiality

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<td>North Carolina legislation requires that the person making the report give their name, address, and telephone number. However, refusal of the person making the report to identify himself or herself does not relieve the county child welfare agency of its responsibility for conducting a CPS Assessment.</td>
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<td>County child welfare agencies often need to speak with a reporter more than once to clarify or follow up on other issues, so anonymous calls should be discouraged as much as possible. If a county child welfare agency has “Caller Identification,” the staff should make any caller aware that the agency has this information, especially if the identifying information the caller is giving is different from the information on the “Caller Identification.” If the county child welfare agency knows the identity of the reporter, that information should be recorded on the Structured Intake Report tool, even if the caller wishes to remain anonymous. In that case, the fact that the caller wants to remain anonymous should be noted as well.</td>
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| North Carolina statute requires that:  
  - The identity of the person making the report and  
  - All information obtained during a CPS Assessment must be held in the strictest confidence by the county child welfare agency. |
| However, this statute does not grant the right for the reporter to remain anonymous. The reporter must be informed that their identity will remain confidential unless:  
  - a court orders otherwise  
  - if a local, state, or federal entity demonstrates a need for the reporter's name to carry out its mandated responsibilities. |
| Statute does not require that the reporter possess any information beyond a cause to suspect abuse or neglect. The reporter is not required to have witnessed the abuse or neglect or to have firsthand knowledge. |

Revision Date: 06/15/18
## Intake: Collection of Information and Assessing Agency History

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<td>The County child welfare worker must use the North Carolina Division of Social Services’ Structured Intake Form, (DSS-1402) to document information about the report of suspected abuse, neglect and/or dependency. Timeframes for responding to reports of abuse, neglect, and/or dependency begin at the time the reporter contacts the county child welfare agency. County child welfare agencies must provide Child Protective Services, including Intake, 24 hours per day, 7 days per week, as well as, respond immediately to emergency situations. The County child welfare worker must provide support and encouragement to the reporter by:</td>
<td>Every effort should be made to speak with the reporter at the time the call is placed. In instances when the reporter left a message, the time frame for response begins at the time the reporter left the message-not the time the call was returned. There may be times when the reporter does not have access to a telephone on a regular basis and cannot leave a number for the call to be returned. The absence of an immediate personal response to a reporter sends a message of apathy to that reporter and the public. Assessing whether an immediate response is required is impossible when those concerns are left on a messaging system. The absence of a personal response at Intake jeopardizes the agency’s ability to provide quality protective services to children. Moving towards more family-centered, strengths-based perspective, it is important to remember that the reporter’s first impression at Intake is crucial. The expectation is that the reporter can speak to a professional regarding their concerns and is not left to leave a message or required to say the exact words, “I want to make a CPS report”, to share their safety concerns regarding the child and family. Comprehensive information provided by the reporter supports County child welfare workers in making the best determination about the appropriateness of the report for CPS Assessment; the level of risk to the child, and the urgency of the response needed. Information gathering should focus on demographic information about the child and family; information about the alleged maltreatment; and information about the child, the parents/caretakers, and the family as a whole. There are some reports that do not clearly meet legal definitions of abuse, neglect and/or dependency; however, the allegations are concerning. It may be that the reporter did not have enough information to provide specifics or was not willing to do so. In these situations, it is acceptable to use county agency history to make a well-informed decision. In some instances, a reporter may be considered a “designated reporter” for their agency, meaning he or she is calling on behalf of the person who...</td>
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<td>• Explaining the purpose of CPS (to protect and strengthen the family); • Emphasizing the importance of reporting; • Dealing with fears and concerns of the reporter; and • Discussing confidentiality regarding the CPS report including the identity of the reporter.</td>
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<td>The County child welfare worker must gather sufficient information from the reporter to be able to:</td>
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<td>• Identify and locate the child(ren), parents, or primary caretaker; • Determine if the report meets the statutory guidelines for child maltreatment; • Assess the seriousness of the child’s situation; and • Understand the relationship of the reporter to the family and the motives of the reporter.</td>
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## Intake: Collection of Information and Assessing Agency History

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<td>The County child welfare worker must check county agency records to determine if the family or child has been reported/known to the agency previously.</td>
<td>It is permissible to contact the person with firsthand knowledge prior to making a final decision about whether to accept the report.</td>
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The County child welfare worker must NOT check the Central Registry/Responsible Individual List or contact another community agency or another county child welfare agency to make a screening decision.

Making effective intake decisions requires County child welfare workers to have competent interviewing skills, awareness of the information needed, the skill to organize and analyze information to arrive at accurate conclusions, and the ability to be supportive of reporters. The reporter’s information/impression regarding the allegations needs to be listened to and documented in detail for the county child welfare agency’s purposes and to make the reporter feel he or she has been heard. Each reporter must be given support and encouragement for the decision to make a report. In addition, the reporter’s fears and concerns should be elicited and addressed. These can range from fear that the family will retaliate to fear of having to testify in court. It is important to understand that it is often very difficult for the reporter to make the call. The telephone call usually comes after much thought has been given to the possible consequences to the child and family. More than likely, the reporter has considered that it would be easier to do nothing or that the CPS system may not be able to help the family. It is difficult for a reporter to think that the call will help the family rather than hurt them. While gathering information from the reporter, the distinction between events and judgement is important. The position of the reporter can be determined from a compilation of the judgements the reporter is making about the case. CPS County child welfare workers will be able to make better decisions about the case if they have a good understanding of the reporter’s position. Helpful questions that can be used to establish the reporter’s position include:

1. What, in your view are the worst aspects of the behavior you are talking about?
2. What convinced you to take action and call us now?
3. What have you done (besides making the report) to address the problem?
4. What do you see as the cause of the problem?
5. Have you talked about these matters with anyone who knows the family? Would others agree with your perspective? What would they say?
### Intake: Collection of Information and Assessing Agency History

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<td>6.) Would the parents of the family agree with your assessment of the situation?</td>
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In some instances, the reporter may know about exceptions to the current family situation, and some of the following questions may be useful:

1.) It sounds like this has happened before now. What have you seen the family do to work this out on its own?
2.) Are there times when the parent is attentive instead of neglectful? Talk more about those times. What did the parent and child do instead? What do you think made the parent respond differently?
3.) You said the child always seems depressed. Are there any times when you’ve seen the child be happy? What is going on then?

While it is important to know the reporter’s concerns about the risk to the children, it is crucial that the message conveyed is that CPS is about ensuring safe homes for children by identifying the strengths of the family—not by identifying bad parents and taking children away. Some questions that may be useful in eliciting family strengths include:

1.) Can you share anything good about these parents?
2.) How do family members usually solve this problem? What have you seen them do in the past?
3.) What do you see as a positive regarding the relationship between parent and child?

Another line of questioning that may be helpful includes talking with the reporter about what he or she hopes can be accomplished for the family. Discussing safety shifts the focus from problems to possible solutions. Some of these questions include:

1.) This situation sounds serious. What do you think should happen? How would that solve the problem?
2.) Calling DSS is a big step. In your opinion, what would it take to make the child safer?
3.) What do you imagine the agency doing to make the child safer?
4.) What do you think this family should do? What are they capable of doing?
5.) You are saying this family has problems. Can you tell me how the agency will know when the problem is solved?
## Intake: Collection of Information and Assessing Agency History

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<td>Talking with the reporter about the goal for contacting child welfare can also be initiated using scaling questions. The Intake County child welfare worker can ask the reporter to rate the seriousness of the situation through a safety scaling question; “On a scale of 0 to 10, with 0 meaning you are certain the child will be abused again and you believe the agency should take action immediately, and with 10 meaning the problems are solved, where would you rate the seriousness of this situation?” Following this question, the Intake County child welfare worker can then ask, “You rated the situation a 3, what can be done to increase the situation to a 4?” The use of scaling questions gives information about immediate progress as compared to complete resolution.</td>
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<td>Questions from a safety-oriented approach may be unexpected, causing the reporter to think more critically about the situation. It may be necessary for the Intake County child welfare worker to take more time to explain the questions and acknowledge that some of the questions may be unexpected. There will be some reporters who are willing to engage in a discussion regarding safety and some reporters will not because they feel they have done their job by notifying the county child welfare agency. Exceptions, strengths, and goal-oriented questions cause the reporter to think about the family’s situation and stress the idea that child safety and protection is a community issue which calls for collective responsibility.</td>
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## Intake: Substance Affected Infants

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| When a county child welfare agency receives a report of a “substance affected infant,” it must develop a Plan of Safe Care for all identified infants by:  
  • Completing a Care Coordination for Children (CC4C) referral form and  
  • Submitting the referral form to the local CC4C program. | The timing of the referral is critical because confidentiality laws prohibit a child welfare agency from making the referral to CC4C if the report has already been screened out and child protective services are no longer being provided. |
| To comply with confidentiality laws and to ensure that a plan of safe care can be created for every infant, it is important that the CC4C referral be made during the screening of the report and prior to making a determination to screen in or screen out the report. | Current standard practice dictates that any information the child welfare agency obtains that is protected by federal regulations should not be disclosed absent a court order or proper client consent. See Chapter X: The Juvenile Court and Child Welfare section OBTAINING SUBSTANCE ABUSE RECORDS BY COURT ORDER for more information on 42 C.F.R. Part 2 regulations. |
| Once the referral has been made, the county child welfare agency must consult the Substance Affected Infant Screening Tool to determine if a CPS Assessment is warranted. | Refer to Chapter VIII: Section 1439 – Substance Affected Infants |
## Protocol – What you must do

When a reporter indicates or suspects trafficking may be occurring, or the intake worker suspects trafficking may be occurring based on information received from the reporter, the intake worker must complete the Structured Intake Report Form. This must occur regardless of whether it is apparent that the perpetrator is not a caretaker.

### Procedures During Receipt of Intake Report

When the child or youth’s parent, guardian, custodian or caretaker has not been identified as the perpetrator, the intake worker must engage the reporter in obtaining information about the specific circumstances of the child or youth and the parent’s protective capacity.

If the reporter indicates the parent is aware of the child or youth’s involvement in trafficking and is unwilling to take protective action or allow the child or youth to come back to their home (if the child or youth ran away), this would constitute a report of abuse and/or neglect.

Children or youth who have run away from home, or whose parent or caretaker is absent, may be trafficked or at risk of being trafficked. The intake worker must engage the reporter to obtain information about:

- Child’s circumstances and access to basic needs;
- Who is providing for these needs – food, clothing, shelter, etc.;
- Whether the child or youth is exchanging sex acts to meet these needs; and,
- Names, aliases, physical description, and relationship to the child of anyone accompanying the child or youth who is suspected to be dependent or who has run away.
### Intake: Human Trafficking Reports

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<tr>
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<tbody>
<tr>
<td>If the person trafficking the child is not their parent, guardian, custodian or caretaker, the child or youth may be dependent. A child or youth can be dependent due to the absence of the parent or caretaker, or the parent or caretaker is incapacitated due to mental or physical illness, or any situation which impacts the ability of the parent to provide appropriate care.</td>
<td></td>
</tr>
<tr>
<td>If the agency is unable to determine whether the adult perpetrator meets the statutory requirements of a caretaker, the report must be accepted for CPS assessment.</td>
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</tr>
</tbody>
</table>

**Provision of Information and Resources**

If a child welfare agency receives a report alleging the human trafficking of a child or children by a parent, guardian, custodian, or caretaker, or non-caretaker, the agency must provide appropriate information and resources to the reporter including, but not limited to, the following:

- National Human Trafficking Hotline Number (1-888-373-7888);
- Contact information for local agencies serving survivors of human trafficking; and,
- Contact information for statewide agencies serving survivors of human trafficking.
### Intake: Establishing the Authority to Intervene

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<tr>
<th>Protocol – What you must do</th>
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</thead>
<tbody>
<tr>
<td><strong>Juvenile Involved</strong>&lt;br&gt;County child welfare agencies must screen out any reports that do not involve a juvenile. See definitions.</td>
<td></td>
</tr>
</tbody>
</table>

**Meet Abuse, Neglect, &/or Dependency Definitions**<br>County child welfare agencies only has the authority to intervene when the allegations if true met the statutory definitions of abuse, neglect, and or dependency. See definitions.

**Caretaker**<br>County child welfare agencies must screen Child Protective Services reports to determine whether the alleged perpetrator meets statutory requirements as a caretaker at the time the report is made. In making this determination, the county child welfare agency must consider whether the alleged perpetrator meets the statutory requirements for a caretaker at the time of the alleged incident. See Caretaker Definition Decision Tool and definitions.

County child welfare agencies must assess whether the parent made an appropriate decision regarding the child’s safety and welfare when he or she placed the child with the relative/caretaker, regardless of whether the alleged perpetrator meets the caretaker definition.

**Determination of Caretaker**<br>Because the statute is specific to include certain relationships (such as stepparents) that meet this definition, these relationships should be liberally construed and inclusive of persons connected by blood, as well as by marriage. Thus, extended step-relatives such as step-grandparents, step-aunts, step-uncles, and step-cousins entrusted with responsibility for the health and welfare of the child must be considered caretakers. A relative entrusted with the health and welfare of a juvenile is a person who has a significant degree of parental-type responsibility for the child. The totality of the circumstances must be considered in these instances including:

- The duration and frequency of care provided by the adult,
- The location in which that care is provided, and
- The decision-making authority granted to the adult.

A temporary arrangement for supervision is not the equivalent of entrusting a person with the care of the juvenile.
### Intake: Establishing the Authority to Intervene

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<tr>
<th>Protocol – What you must do</th>
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<tbody>
<tr>
<td><strong>The report must be accepted for assessment if it cannot be determined whether the alleged perpetrator meets the statutory definitions of a caretaker.</strong></td>
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</tr>
<tr>
<td>The statute does not include persons in a special relationship with the primary parent, guardian, custodian or caretaker (such as a boyfriend, girlfriend, or babysitter not meeting the definition of child care provider) and who live outside of the child’s residence. These relationships must be narrowly construed and exclusive to only mean those adult members of the juvenile’s household.</td>
<td></td>
</tr>
<tr>
<td>While every “employee or volunteer” of a Juvenile Justice secure detention facility is no longer subject to a CPS Assessment, the caretaker definition still applies to employees who have “responsibility for the health and welfare of a juvenile” at such a facility. See <a href="#">Out-of-Home Care Providers</a>.</td>
<td></td>
</tr>
<tr>
<td>Reports alleging abuse or neglect in boarding schools also are subject to CPS Assessment based on the caretaker definition.</td>
<td></td>
</tr>
</tbody>
</table>
| **Non-Caretaker Reports**  
When a report that is not accepted for CPS Assessment includes information that a child may have been physically (including sexually) harmed in violation of any criminal statute by a non-caretaker, the agency must:  
- Give immediate verbal notifications to the District Attorney or designee  
- Send subsequent written notification to the District Attorney within 48 hours  
- Give immediate verbal notification to the appropriate local law enforcement agency  
- Send subsequent written notification to the appropriate local law enforcement agency within 48 hours. | |
| **Reports Involving a Child(ren) Living in a Home Where Another Child is Abused, Neglected and/or Dependent**  
Intake must screen the report regarding all children living in the home as alleged victim children. | **Reports Involving a Child(ren) Living in a Home Where Another Child is Abused, Neglected and/or Dependent**  
While the prior physical or sexual abuse or death from abuse or neglect of one child in a home does not
## Intake: Establishing the Authority to Intervene

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</thead>
<tbody>
<tr>
<td>• When there are no other children living in the home, it is not appropriate for the county child welfare agency to be involved in the case, but the report must be referred to law enforcement for investigation.</td>
<td></td>
</tr>
<tr>
<td>• When there are other children residing in the home at the time of the child fatality, all children living in the home of the reported victim child must be screened as alleged victim children.</td>
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</tr>
</tbody>
</table>

When a child fatality occurs and abuse, neglect and/or dependency is suspected as the cause of death, the agency must report the death to the NC DSS. See [State Child Fatality Review Protocol](#).

 automatically mean that other children in the home are unsafe, it does create a reason to suspect that they may be at risk of harm.

The county child welfare agency may receive a report that a child has died and there is suspicion that abuse, neglect, and/or dependency may have contributed to the fatality. If a child lives in a home where another child has died as a result of abuse or neglect or lives in a home where another juvenile has been subjected to abuse or neglect by an adult who regularly lives in the home, that child may have been neglected or abused, but not necessarily. It is critical that information regarding risk and safety be carefully gathered and evaluated to determine if the child has been harmed or if there is evidence or suspicion that the other children are being abused or neglected per the legal definitions.
Is the person the parent (birth or adoptive), legal guardian or legal custodian?

**YES**
This person is legally responsible for the health and welfare (care) of the juvenile. This person is not defined by statute as a caretaker.*

**NO**

Is the person an adult member of the household where the child resides? This includes: stepparents, foster parents, potential adoptive parents, and any other adult living in the home.

**YES**
For reports regarding a foster parent and an open Permanency Planning case, refer to: Reports Regarding an Open Permanency Planning Case in Intake Policy.

**NO**

Is the person an adult relative (inclusive of persons connected by blood as well as by marriage) entrusted** with the juvenile’s care?

**YES**
This person is defined by statute as a caretaker.

**NO**
This person is NOT defined by statute as a caretaker.

Is the person in the role of a house parent or cottage parent who has primary responsibility for supervising a juvenile’s health and welfare in a residential child care facility or residential educational facility, or any employee or volunteer of a division, institution, or boarding school operated by the Department of Health and Human Services?

**YES**
While not every employee or volunteer of a Juvenile Justice secure detention facility is subject to a CPS Assessment, the caretaker definition still applies to employees who have responsibility for the health and welfare of a juvenile at such a facility.
Refer to: Reports Involving Residential Setting in Intake Policy.

**NO**

** responsible for the health and welfare of a juvenile or having a significant degree of parental-type responsibility for the juvenile. Circumstances to be considered:
- The duration and frequency of care provided,
- The location in which that care is provided, and
- The decision-making authority granted to the adult.

*CARETAKER DEFINITION DECISION TOOL*
**Intake: Reports Involving Child Caring Agencies & Duty to Report Allegations of Child Abuse and Neglect in Child Care**

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<tr>
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<tbody>
<tr>
<td>Duty of the County Child Welfare Agencies to Report Allegations of Child Abuse and Neglect in Child Care</td>
<td></td>
</tr>
</tbody>
</table>

When a county child welfare agency receives a report of suspected child maltreatment pertaining to a caregiver in a child care facility, the Intake County child welfare worker must:

- Continue to complete the intake report tool.
- Once completed, screen it out.
- Notify the Division of Child Development and Early Education (DCDEE) within 24 hours or on the next working day of receipt of the report and fax the completed intake report tool.
**Intake: Out of State Requirements**

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<tr>
<th>Protocol – What you must do</th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>WHEN ALLEGATIONS OCCURRED OR RESIDENCE IS OUT-OF-STATE</strong></td>
<td>When the report indicates that the residence of both the child and the parents or caretakers is out-of-state, and the location of the alleged maltreatment occurred out-of-state, the agency should refer that report to the state where the alleged maltreatment occurred.</td>
</tr>
<tr>
<td>• When the report indicates that the residence of both the child and the parents or caretakers is in North Carolina, but the location of the alleged maltreatment occurred out-of-state, the county of residence must conduct the CPS Assessment.</td>
<td>If maltreatment is alleged to have occurred to a North Carolina child while out-of-state by an individual who is not a resident of North Carolina, the child welfare agency that received the report must refer it to the state where the alleged maltreatment occurred. If that state refuses to accept the report, the North Carolina child welfare agency of residence must conduct the CPS Assessment with assistance from the other state.</td>
</tr>
<tr>
<td>• If maltreatment is alleged to have occurred to a North Carolina child while out-of-state by an individual who is not a resident of North Carolina, the child welfare agency that received the report must refer it to the state where the alleged maltreatment occurred. If that state refuses to accept the report, the North Carolina child welfare agency of residence must conduct the CPS Assessment with assistance from the other state.</td>
<td>If a report is received on a child that resides in another state but ‘found’ in the county and the intake decision was to not accept the report for CPS Assessment, the other state should be notified of the report and the county’s screening decision so the resident state can screen based on their statutes, giving that state information for when the child returns to their state.</td>
</tr>
<tr>
<td>• If a report alleges that a North Carolina child was subject to maltreatment in North Carolina by a parent or caretaker who is not a North Carolina resident, the North Carolina county child welfare agency of residence must conduct the CPS Assessment with the other state’s assistance.</td>
<td>In some circumstances, the other state when contacted may not accept the county’s report because the maltreatment occurred in North Carolina, even though the child is a resident of their state and is in that state now. In those circumstances, the NC county child welfare agency is advised to accept the report for CPS Assessment and request the other state to provide assistance with interviewing the child. Jurisdictional barriers should not prevent a county from protecting children.</td>
</tr>
<tr>
<td>• If at any time, the county child welfare agency where the child is found believes the child is in immediate danger, a petition must be filed and a non-secure custody order obtained.</td>
<td>Jurisdictional barriers should not prevent a county from protecting children.</td>
</tr>
</tbody>
</table>

See [Out of State Decision Making Tool](#).

**REPORTS FROM OUT OF STATE**

When county child welfare agencies receive requests from out-of-state agencies to provide a continuation of protective services to children and their families who are now living in North Carolina, a new CPS Intake report and screening process must be completed. The county child welfare agency has the authority to intervene only when the allegations, if true, meet the legal definitions of abuse, neglect or dependency as defined by North Carolina law.

In addition to the decision-making process related to Child Protective Services, the receiving county child welfare agency must confirm that the child is not in North Carolina in violation of the Interstate Compact for the Placement of Children (ICPC).

When the out-of-state agency indicates that court action involving custody of the child has already taken place, the receiving child welfare agency must also refer the matter to the ICPC office. Such referrals must be made without delay to assure compliance with the ICPC and the continuation of appropriate services to the family. See [Permanency Planning](#) policy.
Intake: Out of State Requirements

Out of State Decision Making Tree

**Child Residency / Location**

- Child is a resident of NC?
  - YES: Perpetrator a resident of NC?
    - YES: Alleged Maltreatment Occurred In or Out of State
      - NO: Refer report to the state where the alleged maltreatment occurred. If that state refuses to accept the report, NC Child Welfare Agency of Residence must conduct the CPS Assessment with assistance from the other state.
      - YES: NC Child Welfare agency of residence must conduct the CPS Assessment.
    - NO: Child “found” in NC?
      - YES: NC Child Welfare agency of residence must conduct the CPS Assessment with the other state’s assistance.
      - NO: Refer report to the state where the child resides. No further action.

**Alleged Perpetrator Residency**

- Perpetrator a resident of NC?
  - YES: Alleged Maltreatment Occurred In or Out of State
  - NO: Alleged Maltreatment Occurred in NC?
    - YES: NC Child Welfare agency of residence must conduct the CPS Assessment.
    - NO: Refer report to the state where the alleged maltreatment occurred. If that state refuses to accept the report, NC Child Welfare Agency of Residence must conduct the CPS Assessment with assistance from the other state.

**Location of Alleged Maltreatment**

- Alleged Maltreatment Occurred In or Out of State
  - NO: Alleged Maltreatment Occurred in NC?
    - YES: NC Child Welfare agency of residence must conduct the CPS Assessment.
    - NO: Refer report to the state where the alleged maltreatment occurred. If that state refuses to accept the report, NC Child Welfare Agency of Residence must conduct the CPS Assessment with assistance from the other state.

**County Responsible for CPS Assessment**

- NC Child Welfare agency of residence must conduct the CPS Assessment.

This decision tree is not all inclusive. There may be situations where a county child welfare agency answers no (at asterisk*) and based on the information obtained:
- Screens in and assigns a CPS assessment in North Carolina and
- Requests assistance from that state.
Within the Intake report, provide documentation with jurisdiction for decisions.
### Intake: Reports Involving Out-of-Home Care Providers

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<tbody>
<tr>
<td>Reports Involving Open Child Placement Cases</td>
<td></td>
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</tbody>
</table>

Any new allegation and/or incident that meets the legal definitions of abuse, neglect, and/or dependency received at any time during the course of the child receiving Child Placement Services, must be documented as a new report and the agency must conduct a prompt and thorough CPS Assessment.

County child welfare agencies often receive reports on children that are receiving Child Placement Services. For example, if a child is home for a trial visit and the county child welfare agency receives a report regarding this visit, it must be documented as a new report and a prompt and thorough CPS Assessment must be completed if the allegations meet the NC criteria of abuse, neglect and/or dependency.

Additional requirements are contained in Chapter V, [Jurisdiction](#), and Chapter VIII, 1410, [Conflict of Interest](#).

#### Reports Involving Out-of-Home Care Providers

Reports alleging abuse, neglect and/or dependency of a child by out-of-home care providers, and the allegations meet the definitions of abuse, neglect and/or dependency, and the out of home provider meets the definition of caretaker per G.S. §7B-101, the county child welfare agency must complete a CPS Assessment.

Additional requirements are contained in Chapter V, [Jurisdiction](#), and Chapter VIII, 1410, [Conflict of Interest](#).

#### Reports Regarding Institutional Placements

If a report is received on an institutional placement and the person alleged to have maltreated the child is responsible for the child’s health and welfare, the report must be accepted for CPS Assessment. This includes a correctional officer or any employee with the Division of Juvenile Justice and Delinquency Prevention that has responsibility for the health and welfare of a juvenile.

If a report is received and the person alleged to have abused or neglected the juvenile is the cook, the janitor, the groundskeeper, etc., the report would not be accepted for CPS Assessment but reported to law enforcement.
Intake: Reports Involving Out-of-Home Care Providers

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<tr>
<th>Protocol – What you must do</th>
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<tbody>
<tr>
<td>Screened in reports on institutional placements must be assigned to the Investigative Assessment approach and referred to law enforcement when required. Only children identified as victims must be subject of the Investigative Assessment. However, other children in the institutional setting must be considered as victims if an assessment of the circumstances warrants the inclusion of those children in the Investigative Assessment. Additional requirements are contained in Chapter V, Jurisdiction.</td>
<td></td>
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<tr>
<td>Reports Involving Children Living in an Institutional Setting Where a Child Has Died Due to Suspected Maltreatment</td>
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</tr>
<tr>
<td>When a report of a juvenile’s death, as a result of maltreatment or a report of suspected abuse, neglect, or dependency of a juvenile in an institutional setting, such as a residential child care facility or residential educational facility is received:</td>
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<tr>
<td>• The county child welfare agency must immediately ascertain if other juveniles remaining in the facility are subject to the alleged perpetrator’s care or supervision, and,</td>
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<tr>
<td>• If so, assess the circumstances of those juveniles to determine whether they require protective services or whether immediate removal of those juveniles from the facility is necessary for their protection (N.C.G.S. §7B-302(b))</td>
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</table>
## Intake: Multiple Reports Involving the Same Child or Family

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<tbody>
<tr>
<td><strong>Multiple Reports Involving the Same Child or Family</strong></td>
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<tr>
<td>If a CPS report is received that describes the exact, same allegations and incidents already being assessed,</td>
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<tr>
<td>- The information must be documented and the allegations must be considered screened-in.</td>
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<tr>
<td>- The circumstances do not require a new initiation; therefore, a determination of the response timeframe is unnecessary.</td>
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</tr>
<tr>
<td>Any new allegation and/or incident that meets the legal definition of abuse, neglect or dependency received from the public during the course of an open CPS Assessment (i.e., not uncovered by the County child welfare worker as a part of the CPS Assessment) must be documented and must be responded to within the legal time frames to assess the safety of the child. The new information is not assigned as a separate assessment, but must be responded to within appropriate time frames to assess the safety of the child. There must be one assessment that addresses the initial and new information with one case decision. The child welfare supervisor may waive the requirement to respond to the new allegations, within legal timeframes, when he/she confirms, in writing, that the county child welfare worker has uncovered and is responding to the new allegations as a part of the current CPS Assessment.</td>
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Revision Date: 06/15/18
**Intake: Reports Involving Open CPS In-Home Services Cases**

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<tbody>
<tr>
<td>Reports Involving Open CPS In-Home Services Cases</td>
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</table>

Any new allegation and/or incident that meets the legal definitions of abuse, neglect, and/or dependency received at any time during the course of a CPS In-Home Services case must be documented as a new report and the agency must conduct a prompt and thorough CPS Assessment.

If it is determined that a CPS In-Home Services case is open, the county with the open CPS In-Home Services case must be the county responsible for conducting the CPS Assessment of any new reports received, unless there has been a change in the residence of the child as outlined in statute.

Refer to [New Assessment on Open In-Home Case](#)
## Intake: Conflicts of Interest

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<tr>
<td>The family's (child's) county of residence is responsible for conducting the CPS Assessment, except in cases where there is a conflict of interest present. See <a href="#">Conflict of Interest</a> for details on how to manage those cases. The county child welfare agency conducting the CPS Assessment assigns a response time to the report and determines whether the case is assigned as a Family Assessment or Investigative Assessment.</td>
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</table>

### Reports Involving a Conflict of Interest to the Agency

County child welfare agencies must refer reports of abuse, neglect, and/or dependency to another county child welfare agency when there is a conflict of interest. The point at which the report is referred is determined by the immediacy of the safety concerns to the child.

See [Conflict of Interest](#) for further information regarding a county child welfare agency’s responsibilities when there is a conflict of interest.
### Intake: Maltreatment Screening Tools

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<tr>
<td>The Maltreatment Screening Tools are one component of Intake Decision-Making. Use of the Maltreatment Screening tools:</td>
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<tr>
<td>• Must occur for every CPS report:</td>
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<tr>
<td>o Regarding a child under the age of 18, and</td>
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<tr>
<td>o Alleging abuse, neglect, and/or dependency by a parent or caretaker,</td>
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<tr>
<td>• Provide for consistent screening across the state, and</td>
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<tr>
<td>• Determine whether the allegations meet the legal definitions of abuse, neglect and dependency.</td>
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Intake County child welfare workers must have a current knowledge of statutory guidelines to identify and categorize child abuse, neglect and dependency.

A CPS Assessment must occur if the information reported meets the legal definitions. The appropriate maltreatment must be selected based on the maltreatment screening tools.

There are 16 maltreatment screening tools. The Intake worker must consult each tool that corresponds to the allegations in the report. The abuse screening tools include: physical injury; cruel/grossly inappropriate behavior modification; sexual abuse; emotional abuse; moral turpitude; and human trafficking. The neglect screening tools include: improper care; improper supervision; improper discipline; abandonment; improper medical/remedial care; injurious environment; and illegal placement/adoption. Reports alleging dependency must consult the dependency screening tool. When a reporter alleges maltreatment pertaining to substance abuse and/or domestic violence, the substance abuse and/or domestic violence screening tool must be consulted.

See [Maltreatment Screening Tools](#) to:

- Determine the Maltreatment Type for each allegation that meets the definition of Abuse, Neglect and/or Dependency for assessment, and
- For the associated directions and guidance required when consulting the screening tools.
### Intake: Determination of County Assignment

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<tbody>
<tr>
<td>The intake decision not only determines if there is a valid Child Protective Services (CPS) report, but also which county child welfare agency is responsible for conducting the CPS Assessment.</td>
<td>The worker should take the information from the reporter and then screen the report for acceptance prior to the report being assigned to the county where the child lives so that a timely assessment can be initiated. The worker should not expect the caller to find the correct number to call or make the call to another “DSS.” The caller should be advised that their name and information will be referred to another agency and they may call the reporter to gain more information if necessary and the five-day letter can be sent.</td>
</tr>
</tbody>
</table>

**COUNTY ASSIGNMENT**

The Intake County child welfare worker and supervisor that receive the report or where the child is “found” must:

- Screen the report,
- Determine whether the facts alleged in the report are sufficient to warrant intervention on the basis of suspected abuse, neglect or dependency,
- Determine which county child welfare agency is responsible for conducting the CPS Assessment, and
- Send the reporter notification letter.

All information must be provided to the county where the child resides to complete the CPS Assessment and make the case decision.

The county child welfare agency responsible for conducting the CPS Assessment determines the CPS Assessment response time and track assignment.

Additional requirements are contained in Chapter V, [Jurisdiction](#), and Chapter VIII, 1410, [Conflict of Interest](#).
### Intake: Determination of Response Priority

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<tbody>
<tr>
<td>Response Priority Tools are one component of Intake Decision-Making. The use of the Response Priority tools results in consistent decisions regarding the response time for assessments.</td>
<td>An agency may always respond more quickly than the indicated time if there are circumstances or lack of information that may indicate the child is possibly at greater risk than indicated by the response priority tree.</td>
</tr>
</tbody>
</table>

The Response Priority Tool determines the time frame for the response for all reports accepted for a CPS Assessment (immediate, within 24 hours or within 72 hours). It incorporates and prioritizes critical factors, which leads to a decision about the speed of response. After a report is received and the appropriate maltreatment screening tools are consulted, and it is determined that it is a valid CPS report, the response Priority Tree must be consulted to determine the assessment response time.

All reports that are screened “in” must be assigned for response according to the criteria in the response priority tool. See [Response Priority Decision Trees](#) to establish appropriate initiation timeframe.
Intake: Determination of Response Approach

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<tbody>
<tr>
<td>When a report meets the statutory criteria of a valid CPS report, the county child welfare agency must determine whether to approach the family using either the Family Assessment response or Investigative Assessment response.</td>
<td>Except for certain reports that must be taken as an Investigative Assessment, each county child welfare agency can choose which response will be used to assess reports of abuse, neglect, and/or dependency. Use of the Family Assessment is the preferred approach allowing county child welfare agencies to work with families with a strength based, family centered and prevention oriented approach.</td>
</tr>
</tbody>
</table>

FAMILY ASSESSMENT APPROACH
A response to selected reports of child neglect and dependency that is:
- Family-centered
- Protection and prevention oriented, and
- Evaluates the strengths and needs of the juvenile’s family, as well as the condition of the juvenile.

The Family Assessment response is appropriate for reports that contain allegations meeting the statutory definitions of neglect. These are reports that include allegations a juvenile:
- Does not receive proper care from a parent, guardian, custodian or caretaker;
- Does not receive proper supervision from a parent, guardian, custodian or caretaker;
- Does not receive proper discipline from a parent, guardian, custodian or caretaker;
- Is not provided necessary medical care;
- Is not provided necessary remedial care;
- Lives in an environment injurious to his/her welfare;
- Has been placed for care or adoption in violation of law;
- Lives in a home where another juvenile has been subjected to abuse or neglect by an adult who regularly lives in the home;
- Is in need of assistance or placement because he or she has no parent, guardian, or custodian responsible for the juvenile’s care or supervision; or,
- Whose parent, guardian, or custodian is unable to provide for the care and supervision and lacks an appropriate alternative child care arrangement.
- Has been safely surrendered per N.C.G.S. §14-322.3.

The Family Assessment response is appropriate for reports meeting the statutory definition of dependency, if true according to N.C.G.S. §7B-101.

Nothing replaces the professional judgement of the County child welfare worker and child welfare supervisor. A report that is statutorily considered neglect may be assigned to the Investigative Assessment response if it is deemed to be the more appropriate response.
INVESTIGATIVE ASSESSMENT APPROACH
A response to reports of child abuse and selected reports of child neglect and dependency that is a formal information gathering process to determine whether a juvenile is abused, neglected, or dependent.

The Investigative Assessment response is appropriate for reports that include allegations a juvenile’s parent, guardian, custodian, or caretaker:

- Creates or allows to be created a substantial risk of serious physical injury to the juvenile by other than accidental means;
- Inflicts or allows to be inflicted upon the juvenile a serious physical injury by other than accidental means;
- Uses or allows to be used upon the juvenile cruel or grossly inappropriate procedures or cruel or grossly inappropriate devices to modify behavior;
- Commits, permits, or encourages the commission of a violation of the following laws by, with, or upon the juvenile: first-degree rape, as provided in N.C.G.S. §14-27.2; rape of a child by an adult offender, as provided in N.C.G.S. §14-27.2A; second degree rape, as provided in N.C.G.S. §14-27.3; first-degree sexual offense, as provided in N.C.G.S. §14-27.4; sexual offense with a child by an adult offender, as provided in N.C.G.S. §14-27.4A; second degree sexual offense, as provided in N.C.G.S. §14-27.5; intercourse and sexual offenses with certain victims; consent no defense, as provided in N.C.G.S. 14-27.7; unlawful sale, surrender, or purchase of a minor, as provided in N.C.G.S. §14-43.14; crime against nature, as provided in N.C.G.S. §14-177; incest between certain near relatives, as provided in N.C.G.S. §14-178; incest between uncle and niece and nephew and aunt, as provided in N.C.G.S. §14.179; preparation of obscene photographs, slides, or motion pictures, as provided in N.C.G.S. §14-190.5; employing or permitting minor to assist in offense under Article (26), as provided in N.C.G.S. §14-190.6; dissemination of obscene material to minors under the age of 16 years, as provided in N.C.G.S. §14-190.7; dissemination of obscene material to minors under the age of 13 years, as provided in N.C.G.S. §14-190.8; displaying material harmful to minors, as provided in N.C.G.S. §14-190.14; disseminating harmful material to minors; exhibiting harmful performances to minors, as provided in N.C.G.S. §14-190.15; first degree sexual exploitation of a minor, as provided in N.C.G.S. §14-190.16; second degree sexual exploitation of a minor, as provided in N.C.G.S. §14-190.17; promoting prostitution of a minor, as provided in N.C.G.S. §14-190.18; and taking indecent liberties with children, as provided in N.C.G.S. §14-202.1;
- Creates or allows to be created serious emotional damage to the juvenile; or,
- Encourages, directs, or approves of delinquent acts involving moral turpitude committed by the juvenile.
<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<td>The special type of neglect reports that must be assigned for an Investigative Assessment response include cases in which the allegations include the existence of the following:</td>
<td></td>
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<tr>
<td>• A child fatality when there are surviving children in the family;</td>
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<tr>
<td>• A child in custody of a county child welfare agency, family foster homes, or residential facilities;</td>
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<tr>
<td>• A child taken into protective custody by physician or law enforcement, pursuant to N.C.G.S. §7B-308 [1] and §7B-500 [2];</td>
<td></td>
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<tr>
<td>• The medical neglect of disabled infants with life threatening condition, pursuant to Public Law 98-457 (Baby Doe);</td>
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<tr>
<td>• Abandonment;</td>
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<tr>
<td>• The suspected or confirmed presence of a methamphetamine lab where children are exposed;</td>
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<tr>
<td>• A child less than a year who has been shaken or subjected to spanking, hitting or other form of corporal punishment</td>
<td></td>
</tr>
<tr>
<td>• <strong>Reports of dependency where the child or youth is believed to be the victim of human trafficking must be assigned as an Investigative Assessment response.</strong></td>
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</tbody>
</table>

### Intake: Assignment of Report

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regardless of the assignment to either CPS Assessment response, when the county child welfare agency receives a valid CPS report, the agency must act to ensure the safety of the child through the provision of protective services.</td>
<td></td>
</tr>
<tr>
<td>As the timeframe for responding to reports of abuse, neglect, and/or dependency begin at the time the reporter contacts the county child welfare agency, assignment of the report for assessment must occur as soon as the Intake screening process is complete.</td>
<td></td>
</tr>
</tbody>
</table>
## Intake: Two Level Decision Making

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<td>Two level decisions must occur on every CPS report. The screening decision(s) must include the CPS Intake worker and a supervisor (or other management position).</td>
<td>Two level decisions for CPS Intake reports should involve the assigned case worker and that worker’s supervisor. However, there may be circumstances that require another County child welfare worker or another supervisor or a higher-level manager in the agency to participate in a review or the decision making.</td>
</tr>
<tr>
<td>All persons participating in the screening decision must sign the Structured Intake Report tool where indicated.</td>
<td></td>
</tr>
<tr>
<td>The Intake supervisor must review every CPS report for compliance with policy and protocol.</td>
<td></td>
</tr>
</tbody>
</table>
**Intake: Notification**

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DISTRICT ATTORNEY / LAW ENFORCEMENT NOTIFICATION</strong></td>
<td><strong>DA / LE NOTIFICATION</strong></td>
</tr>
<tr>
<td>Whenever a report is received that a child may have been harmed by a non-caretaker in violation of any criminal statute, child welfare agencies must:</td>
<td>Examples of situations in which a non-caretaker report to the District Attorney are to be made include: reports alleging assault on a child by educational personnel; reports alleging sexual molestation of a child by a stranger; reports alleging maltreatment of a child by staff of an acute physical care hospital; and reports alleging human trafficking of a child by a person who is not a caretaker. These situations do not meet the current definition of caretaker and are inappropriate for child protective services intervention.</td>
</tr>
<tr>
<td>1. Give immediate verbal notifications to the District Attorney or designee;</td>
<td>In some cases, local law enforcement may be investigating the actions of the person who is reported to be directly responsible for the harm to the child while the county child welfare agency assesses the parent or caretaker's behavior that contributed to the alleged abuse or neglect. Other situations are clearly the responsibility of law enforcement as far as investigation and court action are concerned.</td>
</tr>
<tr>
<td>2. Send subsequent written notification to the District Attorney within 48 hours;</td>
<td><strong>REPORTER NOTIFICATION</strong></td>
</tr>
<tr>
<td>3. Give immediate verbal notification to the appropriate local law enforcement agency, and</td>
<td>The requirement for written notification does not negate the child welfare agency’s ability to share the screening decision with the reporter through other means, so long as the inquiry is an effort to provide protective services to the family. Examples of such situations include: a hospital social worker wanting to know the screening decision prior to child’s discharge; or a police</td>
</tr>
<tr>
<td>4. Send subsequent written notification to the appropriate local law enforcement agency within 48 hours.</td>
<td></td>
</tr>
</tbody>
</table>
## Intake: Notification

<table>
<thead>
<tr>
<th></th>
<th>The identity of the alleged victim child; for instance, if the reporter specifically identifies the name of a child use that name; however, if the name is unknown use the descriptor given by the reporter;</th>
</tr>
</thead>
<tbody>
<tr>
<td>c)</td>
<td>Information regarding the process by which the reporter may obtain a review of the agency's decision not to accept the report for CPS Assessment;</td>
</tr>
<tr>
<td>d)</td>
<td>A statement about whether the report was referred to the appropriate state or local law enforcement agency;</td>
</tr>
<tr>
<td>e)</td>
<td>The identity of the county responsible for conducting the CPS Assessment, if different than the county who received the Intake;</td>
</tr>
<tr>
<td>f)</td>
<td>Information and resources on human trafficking, as appropriate, regardless if the report is screened in or screened out;</td>
</tr>
<tr>
<td>g)</td>
<td>A statement that encourages the reporter to contact the agency in the event that more information or concerns regarding the child or family surfaces; and</td>
</tr>
<tr>
<td>h)</td>
<td>The name and contact information for the assigned County child welfare worker, the supervisor, or other identified person.</td>
</tr>
</tbody>
</table>

If a reporter describes the exact, same allegations and incidents that are currently being assessed, the county child welfare agency must still provide the notification, even if they may not have been the initial reporter.

### NOTIFICATIONS INVOLVING OUT-OF-HOME PLACEMENTS

Refer to [Chapter V - Jurisdiction in Child Welfare](#) for notifications required for out-of-home placements.
The purpose of the maltreatment screening decision trees is to provide structure for the determination of type of maltreatment and the associated assessment approach for every report. This applies to all reports, reports on new families and families already known to the agency, whether a case is open to CPS Assessments, CPS In-Home Services, or Child Placement Services.

Use of Maltreatment Screening Decision Trees

a. Begin with the Maltreatment Decision Tree that corresponds to the maltreatment allegation that is the most egregious. Consult the appropriate Maltreatment Decision Tree for each allegation in the report. The Maltreatment Trees include:
   - **Physical Injury.** To be used with allegations of: physical abuse and allegations of a parent criminally charged with driving while intoxicated;
   - **Cruel/grossly inappropriate behavior modification**;
   - **Moral turpitude**;
   - **Sexual Abuse**;
   - **Emotional Abuse**;
   - **Human Trafficking**;
   - **Neglect Priority Decision Trees** that include:
     - **Improper care**;
     - **Improper supervision**;
     - **Improper discipline**;
     - **Abandonment**;
     - **Improper medical/remedial care**;
     - **Injurious environment**, plus specific tools for:
       - **Substance Abuse**,
         - **Substance Affected Infants**, and
       - **Domestic Violence**, and
     - **Illegal placement/adoption**.
   - **Dependency Decision** Tree.

2. Start with the first question box of each Decision Tree. Proceed by answering the questions yes or no. When the answer to any question is yes, this is the termination point. Guidance regarding each of the questions is provided after the Decision Tree.

3. The termination point indicates the assessment approach/track to be selected for each allegation.

4. If the termination point for any allegation designates an Investigative Assessment, then that track/approach must be selected for the assessment. Otherwise the Family Assessment track is appropriate.

If the county child welfare agency selects a track other than what the corresponding Decision Tree indicates, the rationale for changing the track, must be documented and approved by a supervisor or higher management level. The decision trees are designed to guide decisions—not to replace County child welfare worker judgement. A case may have unique circumstances not captured by the decision tree, or there may be critical information that is unknown. If there is any doubt about the most appropriate response time frame, the agency decision must be to select the Investigative track.
Physical Injury Screening Tool

Accept for Investigative Assessment

Is the parent/caretaker causing serious non-accidental physical injury which creates a substantial risk of death, disfigurement, or impairment?

Accept for Investigative Assessment

Is the parent/caretaker causing the child to be at a substantial risk of non-accidental abuse or injury?

Accept for CPS Assessment

Has the parent/caretaker been criminally charged with driving while intoxicated?

This decision tree is not all inclusive in regards to the screening of physical abuse reports. There may be situations where you answer no to these questions, but accept the report and begin an Investigative Assessment due to other information obtained during Intake.
A. Physical Injury Screening Tool Directions

Is the parent/caretaker causing serious non-accidental physical injury which creates a substantial risk of death, disfigurement, or impairment?

Fractures, subdural hematoma, dislocations, sprains, internal injuries, burns, and inflicted injuries such as extensive welts, bruises, lacerations and abrasions would be indicative of abuse. The specific injuries listed are not intended to be an all-inclusive list, but are an indication of information that does warrant an Investigative Assessment. There may be instances where a child has bruises that do not rise to the level of abuse, but are considered improper discipline (refer to Improper Discipline Maltreatment Screening Tool), as well as situations where there may be bruising and there is no abuse or neglect.

Is the parent/caretaker causing the child to be at a substantial risk of serious non-accidental abuse or injury?

This refers to a situation when the parent/caretaker knows that the environment has a substantial risk for serious non-accidental abuse or injury and allows the child to remain in this environment. In situations where the child has unexplained injuries, and there is no clear perpetrator, these reports would be accepted, as the statute refers to “creates or allows to be created”.

Has the parent been criminally charged with driving while intoxicated?

If a parent or caretaker is criminally charged with a DWI offense while a child is in the car, the report must be accepted for assessment. The county child welfare agency maintains discretion in the classification of this allegation, meaning that depending on the circumstances this type of report may be accepted as an abuse report or as a neglect report.

Return to Maltreatment Screening Tools page 1.
Cruel/Grossly Inappropriate Behavior Modification Screening Tool

1. **Yes**
   - Is the parent/caretaker using sadistic measures to modify the child's behavior?
     - **Yes**
       - Is the parent/caretaker using extreme confinement measures to modify the child's behavior?
         - **Yes**
           - Is the parent/caretaker using weapons to modify the child's behavior?
             - **Yes**
               - Is the parent/caretaker forcing the child to ingest harmful substance?
                 - **Yes**
                   - Accept for Investigative Assessment
                 - **No**
                   - Accept for Investigative Assessment
             - **No**
               - Accept for Investigative Assessment
         - **No**
           - Accept for Investigative Assessment
     - **No**
       - Accept for Investigative Assessment
   - **No**
     - Accept for Investigative Assessment

**Note:** This decision tree is not all inclusive in regards to the screening of abuse reports (cruel or grossly inappropriate punishment). There may be situations where your answer is no to these questions, but accept the report and begin an Investigative Assessment due to other information obtained during Intake.
B. Cruel/Grossly Inappropriate Behavior Modification Screening Tool Directions

Is the parent/caretaker using sadistic measures to modify the child’s behavior?
Sadistic measures include the parent/caretaker purposely injuring the child and inflicting pain to modify behavior, such as cigarette burns and scalding water burns. Also included is any discipline that is designed to cause physical pain such as excessive physical exercise including forcing a child to run laps, complete push-ups, carry heavy rocks, etc. The child’s age and cognitive abilities should be factored into the screening decision.

Is the parent/caretaker using extreme confinement measures to modify the child’s behavior?
Extreme confinement measures would include any type of activity the parent/caretaker uses to severely restrict the child, such as tying the child up with rope, duct tape, using a chain to keep the child in one place. This also includes locking the child up in any manner which threatens the child’s safety. This is not referring to placing a child in time out or sending the child to their room for a short period of time. The child’s age and cognitive abilities should be factored into the screening decision.

Is the parent/caretaker using weapons to modify the child’s behavior?
Threatening and/or using a gun, knife or any item that may be used as a weapon as a means to correct the child’s behavior is cruel and grossly improper and is abusive. A paddle is not considered a weapon when used in the reasonable application of corporal punishment.

Is the parent/caretaker forcing the child to ingest harmful substance?
Forcing a child to ingest nonfood items is not appropriate. This includes having the child ingest any substance that would be harmful such as poisonous household/cleaning chemicals, an extreme amount of water, an extreme amount of hot sauce, or hot peppers. The child’s age and cognitive abilities should be considered as to whether the allegations fit most appropriately under the physical abuse guidelines or with the improper discipline guidelines.

Return to Maltreatment Screening Tools page 1.
C. Moral Turpitude Screening Tool Directions

Is the parent/caretaker encouraging, directing or approving of the child participating in illegal activities such as shoplifting, fraud or selling drugs/alcohol?

Situations where the parent/caretaker encourages or directs the child to participate in shoplifting activities while under their supervision are applicable, as well as, situations where the parent has knowledge that the child is shoplifting and instead of intervening to terminate those activities, the parent/caretaker encourages the activity. Situations in which a parent/caretaker uses the child as a part of a drug/alcohol operation, for example, as a drug runner would require an Investigative Assessment. The parent/caretaker providing alcohol/drugs to the child or consuming alcohol/drugs with the child are situations that meet the definition of neglect; therefore, completion of the Improper Care Maltreatment Screening Tool must occur.
Intake: Maltreatment Screening Tools

Sexual Abuse Screening Tool

- Accept for Investigative Assessment
  - Yes
  - Is the parent/caretaker committing, permitting, or encouraging any sexual act with the child?
    - No
    - Accept for Investigative Assessment
      - Yes
      - Is the parent/caretaker committing, permitting, or encouraging the child to participate in the production and or dissemination of obscene material?
        - No
        - Accept for Investigative Assessment
          - Yes
          - Is the parent/caretaker displaying and or disseminating obscene material to the child or encouraging the child to participate in a live sex act?
            - No
            - Accept for Investigative Assessment
              - Yes
              - Is the parent/caretaker participating in the commercial sexual activity of the child?
                - No
                - Accept for Investigative Assessment
                  - Yes
                  - Is the parent/caretaker allowing sibling sexual activity to occur?
                    - No
                    - Accept for Investigative Assessment
                      - Yes
                      - Is the parent/caretaker intentionally permitting the child to engage in sexual activity?
                        - No

This decision tree is not all inclusive in regards to the screening of sex abuse reports. There may be situations where you answer no to these questions, but accept the report and begin an Investigative Assessment due to other information obtained during intake.
D. Sexual Abuse Screening Tool Directions

**Is the parent/caretaker committing, permitting, or encouraging any sexual act with the child?**

Sexual abuse is any incident of sexual contact involving a child that is inflicted or allowed to be inflicted by the parent/caretaker. Sexual abuse includes, but is not limited to the following: rape, intercourse, sodomy, fondling, oral sex, incest, or sexual penetration-digital, penile or foreign objects.

**Is the parent/caretaker committing, permitting, or encouraging the child to participate in the preparation and/or dissemination of obscene material?**

The use of children in the production of obscene films, photographs, and/or slides is sexual abuse. The parent/caretaker encouraging the child to watch obscene material is also sexual abuse.

**Is the parent/caretaker displaying and/or disseminating obscene material to the child or encouraging the child to participate in a live sex act?**

Any material that a reasonable person would consider obscene should not be shared with the child. The parent/caretaker is responsible for ensuring the child is not sexually exploited.

**Is the parent/caretaker participating in the commercial sexual activity of the child?**

This includes any action of the parent/caretaker to entice, force, encourage, supervise, support, advise, or protect the commercial sexual activities of the child.

Pursuant to 22 USC § 7102; 8 CFR § 214.11(a) and N.C.G.S. § 14-204(c) anyone under the age of 18 years that is involved in a commercial sex act is a victim of human trafficking. Under federal law (22 U.S. CODE § 7102), a commercial sex act is “any sex act on account of which anything of value is given to or received by any person.” For the purpose of criminal proceedings, force, fraud or coercion do not have to be present to prove that someone under the age of 18 years was a victim if sex trafficking.

A parent’s involvement in the prostitution of their child is abuse. This type of sexual abuse is human trafficking. Children whose parents commit this type of offense against them meet the definition of abused juvenile under N.C.G.S. §7B-101(1)(d) or N.C.G.S. §7B-101(1)(g).

**Is the parent/caretaker allowing sibling sexual activity to occur?**

When the parent/caretaker has knowledge that siblings are engaging in sexual activity and permits/encourages the continuation of this activity a CPS Assessment must occur. Reports alleging sexual activity between children under age 16 may provide cause to examine the supervision provided by their parents/ caretakers. If it is clear at Intake that the parent/ caretaker responded in a protective manner, keeping the health and well-being needs of the child at the forefront, a CPS Assessment is not required.

**Is the child living in the home with a sex offender?**

If a substantiated perpetrator or an individual convicted of a sexual offense against a child has established residence where juveniles reside, those persons having suspicion of risk in the new environment are obligated to report. The screening decision must be based on current risk. If it is believed the children are at risk, the report must be accepted for CPS Assessment.
Is the parent/caretaker intentionally permitting the child to engage in sexual activity?

The parent/caretaker has knowledge the child is engaging in sexual activity and permits/encourages the continuation of this activity. Relevant to screening these types of reports is whether the parent is condoning the behavior of a child under age 16 while the child is under their care and supervision. Reports alleging sexual activity between children under age 16 may provide cause to examine the supervision provided by their parent/caretakers. If it is clear at Intake that the parent/caretaker responded in a protective manner, keeping the health and well-being needs of the child at the forefront, a CPS Assessment is not required. It is important to get sufficient information at Intake regarding the behavior of the parent(s), as well as the behavior of the minor child(ren). When the parent has no knowledge of the child’s sexual activity, the child’s age, behaviors and developmental level impact whether a CPS Assessment is required. If the only allegation in the report is that a child age 16 or above is having sex without the parents’ knowledge or the child is pregnant, then these reports should not be accepted. The legal age of consent in North Carolina is 16; therefore, consensual sexual activity of juveniles 16 and above is not, in and of itself, considered sexual abuse.

When a report involving parental knowledge and permission of sexual activity of an incompetent juvenile, a CPS Assessment must occur, regardless of the age of the juvenile, as an incompetent juvenile is not able to consent. A parent providing condoms and/or birth control to their children is not, in and of itself, considered permitting or encouraging their child to engage in sexual activity. The provision of birth control is considered a preventive measure in order to maintain the juvenile’s health, which is consistent with N.C.G.S. § 90-21.5 (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_90/GS_90-21.5.html), Minor’s consent sufficient for certain medical health services.

A CPS Assessment based on improper supervision must occur for the following situations:

- A 15-year-old engaging in risky sexual behavior (multiple partners, no protection) with parental knowledge and the absence of a protective response by the parent;
- A child displaying sexualized behaviors that are inconsistent with normal child development and the parent has not responded in a protective manner.

<table>
<thead>
<tr>
<th>Normal Child Sexual Development</th>
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<tbody>
<tr>
<td><strong>Infancy (birth through one year)</strong></td>
</tr>
<tr>
<td>• Pair bonding</td>
</tr>
<tr>
<td>• Genital play</td>
</tr>
<tr>
<td>• Identification of gender</td>
</tr>
<tr>
<td><strong>Toddler/Early Childhood (2 to 5 years)</strong></td>
</tr>
<tr>
<td>• Toilet training</td>
</tr>
<tr>
<td>• Genital play</td>
</tr>
<tr>
<td>• Interpersonal games: family, marriage, doctor, etc.</td>
</tr>
<tr>
<td><strong>Latency (6 to 9 years)</strong></td>
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<tr>
<td>• Concrete interest in anatomic differences, pregnancy, birth</td>
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<tr>
<td>• Private, occasional masturbation</td>
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<tr>
<td>• Modesty about bodies</td>
</tr>
<tr>
<td>• Increased secretive behavior among peers</td>
</tr>
<tr>
<td>• Interest in socialization</td>
</tr>
</tbody>
</table>
Pre-adolescence (10 to 12 years)
- Adaptation to initial signs of puberty
- Development of secondary sexual characteristics
- Strong friendships and budding romances
- Playful hitting or tickling among peers

Once a child has reached the age of consent, age 16, consensual sexual activity is not a concern which rises to the level of sexual abuse or improper supervision.

E. Sex Abuse Crimes

If a parent, guardian, custodian or caretaker commits, permits, or encourages the commission of a violation of the following laws by, with, or upon the juvenile, then that adult has sexually abused the child. The information contained within this statute delineates specific sex abuse crimes. The Intake County child welfare worker must refer to this information when screening sexual abuse reports.

**N.C.G.S. § 14-27.2. First-degree rape**
(a) A person is guilty of rape in the first degree if the person engages in vaginal intercourse:

(1) With a victim who is a child under the age of 13 years and the defendant is at least 12 years old and is at least four years older than the victim; or
(2) With another person by force and against the will of the other person, and:
   a. Employs or displays a dangerous or deadly weapon or an article which the other person reasonably believes to be a dangerous or deadly weapon; or
   b. Inflicts serious personal injury upon the victim or another person; or
   c. The person commits the offense aided and abetted by one or more other persons.

**N.C.G.S. § 14-27.2A. Rape of a child by an adult offender**
(a) A person is guilty of rape of a child if the person is at least 18 years of age and engages in vaginal intercourse with a victim who is a child under the age of 13 years.

**N.C.G.S. § 14-27.3. Second-degree rape**
(a) A person is guilty of rape in the second degree if the person engages in vaginal intercourse with another person:

(1) By force and against the will of the other person; or
(2) Who is mentally defective, mentally incapacitated, or physically helpless, and the person performing the act knows or should reasonably know the other person is mentally defective, mentally incapacitated, or physically helpless.

**N.C.G.S. § 14-27.4. First-degree sexual offense**
(a) A person is guilty of a sexual offense in the first degree if the person engages in a sexual act:

(1) With a victim who is a child under the age of 13 years and the defendant is at least 12 years old and is at least four years older than the victim; or
(2) With another person by force and against the will of the other person, and:
   
a. Employs or displays a dangerous or deadly weapon or an article which the other person reasonably believes to be a dangerous or deadly weapon; or
b. Inflicts serious personal injury upon the victim or another person; or
c. The person commits the offense aided and abetted by one or more other persons.

N.C.G.S. § 14-27.4A. Sexual offense with a child by an adult offender
(a) A person is guilty of sexual offense with a child if the person is at least 18 years of age and engages in a sexual act with a victim who is a child under the age of 13 years.

N.C.G.S. § 14-27.5. Second-degree sexual offense
(a) A person is guilty of a sexual offense in the second degree if the person engages in a sexual act with another person:
   
   (1) By force and against the will of the other person; or
   (2) Who is mentally defective, mentally incapacitated, or physically helpless, and the person performing the act knows or should reasonably know that the other person is mentally defective, mentally incapacitated, or physically helpless.

N.C.G.S. § 14-27.31 and §14-2732. Intercourse and sexual offenses with certain victims; consent no defense
(a) If a defendant who has assumed the position of a parent in the home of a minor victim engages in vaginal intercourse or a sexual act with a victim who is a minor residing in the home, or if a person having custody of a victim of any age or a person who is an agent or employee of any person, or institution, whether such institution is private, charitable, or governmental, having custody of a victim of any age engages in vaginal intercourse or a sexual act with such victim, the defendant is guilty of a Class E felony. Consent is not a defense to a charge under this section.

N.C.G.S. § 14-43.14. Unlawful sale, surrender, or purchase of a minor
(b) A person commits the offense of unlawful sale, surrender, or purchase of a minor when that person, acting with willful or reckless disregard for the life or safety of a minor, participates in any of the following: the acceptance, solicitation, offer, payment, or transfer of any compensation, in money, property, or other thing of value, at any time, by any person in connection with the unlawful acquisition or transfer of the physical custody of a minor, except as ordered by the court. This section does not apply to actions that are ordered by a court, authorized by statute, or otherwise lawful.

N.C.G.S. § 14-177. Crime against nature
If any person shall commit the crime against nature, with mankind or beast, he shall be punished as a Class I felon.

N.C.G.S. § 14-178. Incest between certain near relatives
The parties shall be guilty of a felony in all cases of carnal intercourse between (i) grandparent and grandchild, (ii) parent and child or stepchild or legally adopted child, or (iii) brother and sister of the half or whole blood. Every such offense is punishable as a Class F felony.
N.C.G.S. § 14-179. Incest between uncle and niece and nephew and aunt

In all cases of carnal intercourse between uncle and niece, and nephew and aunt, the parties shall be guilty of a Class 1 misdemeanor.

N.C.G.S. § 14-190.5. Preparation of obscene photographs, slides and motion pictures

Every person who knowingly:

1. Photographs himself or any other person, for purposes of preparing an obscene film, photograph, negative, slide or motion picture for the purpose of dissemination; or
2. Models, poses, acts, or otherwise assists in the preparation of any obscene film, photograph, negative, slide or motion picture for the purpose of dissemination, shall be guilty of a Class 1 misdemeanor.

N.C.G.S. § 14-190.6. Employing or permitting minor to assist in offense under Article (26)

Every person 18 years of age or older who intentionally, in any manner, hires, employs, uses or permits any minor under the age of 16 years to do or assist in doing any act or thing constituting an offense under this Article and involving any material, act or thing he knows or reasonably should know to be obscene within the meaning of N.C.G.S. §14-190.1, shall be guilty of a Class I felony.

N.C.G.S. § 14-190.7. Dissemination to minors under the age of 16 years

Every person 18 years of age or older who knowingly disseminates to any minor under the age of 16 years any material which he knows or reasonably should know to be obscene within the meaning of N.C.G.S. §14-190.1 shall be guilty of a Class I felony.

N.C.G.S. § 14-190.8. Dissemination to minors under the age of 13 years

Every person 18 years of age or older who knowingly disseminates to any minor under the age of 13 years any material which he knows or reasonably should know to be obscene within the meaning of N.C.G.S. §14-190.1 shall be punished as a Class I felon.

N.C.G.S. § 14-190.14. Displaying material harmful to minors

(a) A person commits the offense of displaying material that is harmful to minors if, having custody, control, or supervision of a commercial establishment and knowing the character or content of the material, he displays material that is harmful to minors at that establishment so that it is open to view by minors as part of the invited general public. Material is not considered displayed under this section if the material is placed behind "blinder racks" that cover the lower two thirds of the material, is wrapped, is placed behind the counter, or is otherwise covered.

N.C.G.S. § 14-190.15. Disseminating harmful material to minors; exhibiting harmful performances to minors

(a) Disseminating Harmful Material. - A person commits the offense of disseminating harmful material to minors if, with or without consideration and knowing the character or content of the material, he:

1. Sells, furnishes, presents, or distributes to a minor material that is harmful to minors; or
2. Allows a minor to review or peruse material that is harmful to minors.

(b) Exhibiting Harmful Performance. - A person commits the offense of exhibiting a harmful performance to a minor if, with or without consideration and knowing the character or
content of the performance, he allows a minor to view a live performance that is harmful to minors.

(c) Defenses. - Except as provided in subdivision (3), a mistake of age is not a defense to a prosecution under this section. It is an affirmative defense to a prosecution under this section that:

(1) The defendant was a parent or legal guardian of the minor.
(2) The defendant was a school, church, museum, public library, governmental agency, medical clinic, or hospital carrying out its legitimate function; or an employee or agent of such an organization acting in that capacity and carrying out a legitimate duty of his employment.
(3) Before disseminating or exhibiting the harmful material or performance, the defendant requested and received a driver’s license, student identification card, or other official governmental or educational identification card or paper indicating that the minor to whom the material or performance was disseminated or exhibited was at least 18 years old, and the defendant reasonably believed the minor was at least 18 years old.
(4) The dissemination was made with the prior consent of a parent or guardian of the recipient.

N.C.G.S. § 14-190.16. First degree sexual exploitation of a minor

(a) Offense. - A person commits the offense of first degree sexual exploitation of a minor if, knowing the character or content of the material or performance, he:

(1) Uses, employs, induces, coerces, encourages, or facilitates a minor to engage in or assist others to engage in sexual activity for a live performance or for the purpose of producing material that contains a visual representation depicting this activity; or
(2) Permits a minor under his custody or control to engage in sexual activity for a live performance or for the purpose of producing material that contains a visual representation depicting this activity; or
(3) Transports or finances the transportation of a minor through or across this State with the intent that the minor engages in sexual activity for a live performance or for the purpose of producing material that contains a visual representation depicting this activity; or
(4) Records, photographs, films, develops, or duplicates for sale or pecuniary gain material that contains a visual representation depicting a minor engaged in sexual activity.

(c) Inference. - In a prosecution under this section, the trier of fact may infer that a participant in sexual activity whom material through its title, text, visual representations, or otherwise represents or depicts as a minor is a minor.

(d) Mistake of Age. - Mistake of age is not a defense to a prosecution under this section.

N.C.G.S. § 14-190.17. Second degree sexual exploitation of a minor

(a) Offense. - A person commits the offense of second degree sexual exploitation of a minor if, knowing the character or content of the material, he:

(1) Records, photographs, films, develops, or duplicates material that contains a visual representation of a minor engaged in sexual activity; or
(2) Distributes, transports, exhibits, receives, sells, purchases, exchanges, or solicits material that contains a visual representation of a minor engaged in sexual activity.

(b) Inference. - In a prosecution under this section, the trier of fact may infer that a participant in sexual activity whom material through its title, text, and visual representations or otherwise represents or depicts as a minor is a minor.

(c) Mistake of Age. - Mistake of age is not a defense to a prosecution under this section.

N.C.G.S. § 14-205.3(b) Promoting prostitution of a minor

(b) Any person who willfully performs any of the following acts commits the offense of promoting prostitution of a minor or mentally disabled person;

(1) Advances prostitution as defined in N.C.G.S. §14-203, where a minor or profoundly mentally disabled person engaged in prostitution, or any person in prostitution in the place of prostitution is a minor or severely or profoundly mentally disabled at the time of the offense.

(2) Profits from prostitution by any means where the prostitute is a minor or is severely or profoundly mentally disabled at the time of the offense.

(3) Confines a minor or a severely or profoundly mentally disabled person against the person’s will by the infliction or threat of imminent infliction of great bodily harm, permanent disability, or disfigurement or by administering to the minor or severely or profoundly mentally disabled person, without the person’s consent or by threat or deception and for other than medical purposes, any alcoholic intoxicant or a drug as defined in Article 5 of Chapter 90 of the General Statutes (North Carolina Controlled Substances Act) and does any of the following:

a. Compels the minor or severely or profoundly mentally disabled person to engage in prostitution.

b. Arranges a situation in which the minor or severely or profoundly mentally disabled person may practice prostitution.

c. Profits from prostitution by the minor or severely or profoundly mentally disabled person.

N.C.G.S. § 14-202.1. Taking indecent liberties with children

(a) A person is guilty of taking indecent liberties with children if, being 16 years of age or more and at least five years older than the child in question, he either:

(1) Willfully takes or attempts to take any immoral, improper, or indecent liberties with any child of either sex under the age of 16 years for the purpose of arousing or gratifying sexual desire; or

(2) Willfully commits or attempts to commit any lewd or lascivious act upon or with the body or any part or member of the body of any child of either sex under the age of 16 years.
Emotional Abuse Screening Tool

This decision is not all inclusive in regards to screening of emotional abuse reports. There may be situations where you answer no to these questions, but accept the report and begin an Investigative Assessment due to other information obtained during Intake.
F. Emotional Abuse Screening Tool Directions

When making screening decisions with regards to emotional abuse, it is important to question the reporter about the child’s mental and physical status. The parent’s behavior must be causing serious emotional damage to the child or is at risk of causing serious emotional damage. Serious emotional damage is evidenced by a child’s severe anxiety, depression, withdrawal, or aggressive behavior. The following can be indicators of a child suffering from emotional abuse:

- eating disorders such as obesity and anorexia
- speech disorders such as stuttering or stammering
- developmental delays in the acquisition of speech and motor skills
- weight or height levels substantially below norm
- flat or bald spots on an infant’s head
- nervous disorders such as rashes, hives, or facial tics.

It is important to note that emotional abuse is characterized by continuous, ongoing harmful interactions—not isolated incidents. This list is not all-inclusive, nor is it absolute; rather factors to consider when making a decision to accept a report for a CPS Assessment.

**Is the parent/caretaker’s rejection of the child causing serious emotional damage?**

Potential serious emotional damage may be caused if the parent/caretaker continually uses rejecting statements such as, “I wish you were never born.” It is also concerning for possible emotional abuse if the parent/caretaker sees the child as responsible for their problems.

**Is the parent/caretaker’s criticism of the child causing serious emotional damage?**

Potential serious emotional damage may be caused if the parent/caretaker continually uses critical statements such as, “Why can’t you ever do anything right?” This could be a situation where one child has been identified as the scapegoat of the family, meaning the child bears the blame for anything that goes wrong within the family system.

**Is the parent/caretaker’s insulting of the child causing serious emotional damage?**

Potential serious emotional damage may be caused if the parent/caretaker continually uses insulting statements such as, “I can’t believe you would be so stupid.” This includes describing the child as ugly, evil, or in any demeaning or degrading manner. This also includes using sexualized language such as whore or slut to describe the child.

**Is the parent/caretaker’s humiliation of the child causing serious emotional damage?**

Potential serious emotional damage may be caused if the parent/caretaker continually uses humiliation tactics such as embarrassing the child in front of other people; cursing at the child; and belittling the child.

**Is the parent/caretaker’s isolation of the child causing serious emotional damage?**

Potential serious emotional damage may be caused if the parent/caretaker continually uses isolation tactics such as prohibiting the child from playing with friends and neighbors who are appropriate for the child’s age and development. Isolation tactics would further include actions that the parent/caretaker takes to prevent the child from forming friendships with others, and/or teach the child they are alone in the world.
Is the parent/caretaker’s terrorizing of the child causing serious emotional damage?

Potential serious emotional damage may be caused if the parent/caretaker continually uses terrorizing tactics such as, “The police or social services will come and take you away.” When the parent/caretaker destroys the child’s possessions or attacks beloved people or pets, the parent/caretaker is teaching the lesson that the world is a hostile place.

Return to Maltreatment Screening Tools page 1.
Is the child being exploited or has the child been exploited?

- YES
  - Accept for Investigative Assessment
  - Is the child being exchanged for the purposes of sex or labor?
    - YES
      - Accept for Investigative Assessment
    - NO
      - Is the child working long hours for little or no pay?
        - YES
          - Accept for Investigative Assessment
        - NO
          - Has the child been promised things, such as a job, money, or improved circumstances for moving from one location to another, whether residence, community, city, state, or country?
            - YES
              - Accept for Investigative Assessment
            - NO

This decision tree is not all inclusive in regards to the screening of human trafficking reports. There may be situations where you answer no to these questions, but accept the report and begin a Investigative Assessment due to other information obtained during Intake.
G. Human Trafficking Screening Tool Instructions

Is the child being exploited or has the child been exploited?

Exploitation or trafficking of children occurs when individuals buy, trade, sell or exchange children for the purposes of sex or to perform labor. Sex trafficking may include, but is not limited to, allowing or forcing the child to engage in prostitution or the production of child pornography. Exploiting a child for labor may involve, but is not limited to coercing or forcing the child to perform labor in various settings, such as agricultural work, hospitality work in hotels or restaurants, or domestic work. Signs of physical abuse, restraint, torture, or deprivation may be present. A child who is sold, traded or exchanged for the purposes of sex or labor by his/her parent, guardian, custodian or caretaker is an abused child. A child whose parent, guardian, custodian or caretaker allows the child to be sold, traded or exchanged for sex or labor is an abused child. A child whose parent, guardian, custodian or caretaker knows the child is being exchanged for sex or labor and does not take steps to protect the child is an abused and/or neglected child.

Is the child being exchanged for the purposes of sex or labor?

A parent, guardian, custodian, or caretaker who does any of the following has trafficked their child or allowed the child to be trafficked:

- has exchanged their child for the purposes of sex or labor;
- has directly or indirectly given, promised, or has received anything of value in exchange for the child;
- has exchanged the child to satisfy a debt;
- has allowed the child to be exchanged for something of value or to pay a debt; or,
- has allowed the child to be exchanged for the purposes of sex or labor.

Trafficking the child or allowing the child to be trafficked is abuse. These types of reports must be accepted for an Investigative Assessment.

Is the child working long hours for little or no pay?

A child working long hours for little or no pay; particularly in dangerous jobs or jobs which are illegal for him/her to perform suggest he/she may be a victim of labor trafficking or labor exploitation. A parent, guardian, custodian, or caretaker who deceives, defrauds, coerces, intimidates, or forces a child to perform labor, whether or not for compensation or the satisfaction of a debt, is trafficking the child. A parent, guardian, custodian, or caretaker or who allows, or knows, the child is being deceived, defrauded, coerced, intimidated, or forced to perform labor, whether or not for compensation or the satisfaction of a debt, is trafficking the child. Trafficking a child, whether for sex or labor, is abuse.

Has the child been promised things, such as a job, money, or improved circumstances, in exchange for moving from one location to another—whether residence, community, city, state, or country?

Often persons who exploit children and youth through sex or labor trafficking make promises to children or to families that the child will have improved circumstances, have access to education or a job if the child moves from one place to another. Sometimes this involves moving from another country into the United States.
If a child has moved from another country to the United States without a family member or is traveling with an adult to whom they are not related or with whom the relationship is unclear, it is possible that the child is being trafficked or is at risk of being trafficked. Intake workers should gather as much information as the reporter is able to provide concerning the child and the child’s circumstances, including where they traveling from, where they are traveling to, who (if anyone) they are traveling with and their relationship to this person, the reason for coming to the United States, as provided by the child, the person with whom they are traveling or with whom they reside, and any other information the reporter can provide regarding their concern that the child is being trafficked or is at risk of being trafficked.

Additional Guidance

In cases where human trafficking is suspected, if the agency is unable to determine whether the adult perpetrator meets the statutory definition requirements of a caretaker at the time the screening decision is made, the report must be accepted for assessment. Traffickers may be family members or may pose as the child or youth’s parent, sibling, aunt, uncle, or significant other and their relationship to the child may be unclear – even to the reporter.
Improper Care Screening Tool

This decision tree is not all inclusive in regards to the screening of lack of proper care reports. There may be situations where you answer no to these questions, but accept the report and begin a CPS Assessment due to other information obtained during intake. Reports alleging poverty issues only are not valid CPS reports.
H. Improper Care Screening Tool Directions

Is the parent/caretaker failing to provide sufficient food?

The parent/caretaker needs to provide sufficient food for the child in order to prevent nutritional deficiencies. A report would be accepted in situations where adequate food has not been provided for a period of time that interferes with the health needs of the child based on age and other conditions. A CPS Assessment to determine whether food neglect exists must occur when a child shows symptoms of malnutrition, dehydration, or food poisoning. If the county child welfare agency receives a report and the only information is there is no food in the home, this report would be accepted and a CPS Assessment would be conducted. A CPS Assessment must occur if the parent/caretaker fails to meet specific dietary needs of the child.

Is the parent/caretaker failing to provide appropriate and reasonable clothing?

A CPS Assessment to determine whether clothing neglect exists must occur when the child suffers illness, exposure or frostbite due to inadequate clothing; or the clothing is insufficient to protect the child from the elements. This may include severe sunburn. Consideration is given to whether the clothing is sufficient to protect the child from the elements and health hazards.

Is the parent/caretaker failing to ensure proper hygiene?

Depending on the age and needs of the child, it is a concern when a serious health hazard is present and the parent/caretaker is not taking appropriate action to eliminate the problem.

Is the parent/caretaker failing to provide adequate shelter?

The parent/caretaker needs to provide housing or emergency shelter or make alternate arrangements in the event the family is homeless. The parent/caretaker needs to ensure the child is safe and protected from the elements.

Is the parent/caretaker failing to provide a basic education?

Educational neglect pertains to the failure of the parent/caretaker to meet the child's educational needs. Educational neglect may take the form of permitted chronic truancy, failure to enroll or provide alternative education, or inattention to special education needs.

The allegation of permitted chronic truancy would apply after the inability of the school to engage the parent/caretaker in efforts to improve the child's attendance. N.C.G.S. §115C-378 describes a school principal's responsibilities in relation to children who are repeatedly absent and sets out circumstances in which a principal must to notify DSS regarding unlawful absences. After 10 accumulated unexcused absences in a school year, the principal or the principal’s designee is required to confer with the student and the parent, guardian, or custodian to determine if a good faith effort has been made to comply with the compulsory school attendance law. If there is a determination that a good faith effort has not been made, the principal is required to notify the district attorney and DSS in the county where the child resides. Upon receiving notification by the principal or the principal’s designee, DSS must determine whether to undertake an investigation under N.C.G.S. §7B-302. Intervention by DSS must occur only after the school's efforts have been proven unable to ensure the child's attendance. However, the reporting of educational neglect by schools may also result in the reporting of other forms of abuse or neglect. School truancy, whether excessive, unexcused or not, may be an indicator of other forms of underlying abuse or neglect in the home. The allegation of permitted chronic truancy does not pertain to children who will fully refuse to attend school.
In North Carolina, children between the ages of seven and sixteen must be enrolled in a public school or an equivalent, or receive private instruction through home schooling. Educational neglect may take the form of failure to home school, to register, or to enroll a child of mandatory school age. North Carolina courts have consistently found that it is “fundamental that a child who receives proper care and supervision in modern times is provided a basic education” and that willful failure and refusal to send children to school or to provide children with an alternative education, constitutes neglect for improper care and injurious environment. *In re McMillan*, 30 N.C. App. 235 (1976)

Lastly, educational neglect may take the form of refusing to allow or failing to obtain recommended special education or remedial education services. The North Carolina Court of Appeals, found neglect where a father refused to send his mentally handicapped child to public school, and its special education programs, because the father insisted on educating his children at home. *In re Devone*, 86 N.C. App. 57 (1987) The Court noted that the child needed additional stimulation outside the home and that denial of the remedial care available in the public schools constituted neglect and lack of proper care. The *Devone* Court, quoting *In re Huber*, 57 N.C. App. 453 (1982), stated that "[t]o deprive a child of the opportunity for normal growth and development is perhaps the greatest neglect a parent can impose upon a child."

**Is the parent/caretaker providing drugs/alcohol to the child?**

The parent/caretaker providing alcohol/drugs to the child or consuming alcohol/drugs with the child are situations that meet the definition of neglect and a CPS Assessment must occur.
I. Improper Supervision Screening Tool Directions

Is the parent/caretaker leaving a child age 8 or younger alone with no supervision?

No legal age for when a child can stay at home alone has been established; however, NC fire code specifies that children under age eight should not be locked or confined. A report alleging a child under age six left alone must have an immediate response. The length of time the child is left alone, along with the child’s age, and cognitive abilities factor into whether the child can be safely left alone. Some important questions to ask are: Is the child afraid to stay at home alone? Is the child providing care for siblings? Does the child know how to contact emergency personnel? How long is the child being left alone? Is the child in an isolated area?
Is the parent/caretaker placing the responsibility for supervision of siblings with a child who is not capable of providing proper supervision?

The child’s age and cognitive abilities factor into the decision as to whether a child is able to provide adequate supervision for siblings, as well as the age and needs of the children being provided supervision. A child who is not able to contact emergency personnel and who is afraid to stay at home alone is not able to supervise siblings. A child who is safe at home alone for short periods of time may not be able to handle the responsibility of providing care and supervision for younger siblings.

Is the parent/caretaker’s choice or style of supervision placing the child at risk?

When the parent/caretaker makes alternative arrangements for the child’s supervision, the person responsible for the child’s care must be able to consistently provide the minimum of child-caring tasks. It can be problematic when the parent/caretaker frequently makes alternative arrangements with caretakers whom they have been unable to assess in regard to childcare due to the inadequate length of time they have been acquainted. The parent/caretaker can be present, but not attending to the child to such an extent that the need for care goes unnoticed or unmet. The parent/caregiver can be present while the child wanders outdoors alone; plays with dangerous objects; plays on unprotected window ledge; or is exposed to other serious hazards.

In reports involving children playing in the street, it is important to note the traffic patterns on that street and the age of the child. There are some streets in NC that do not pose a safety risk for children. In a situation where the reporter alleges a young child is playing in a busy street, a CPS Assessment must occur.

Reports involving sexual activity between children under age 16 may provide cause to examine the supervision provided by their parent/caretakers. Refer to the sexual abuse screening tool for specifics in these situations. When children are participating in a juvenile delinquent activity such as vandalism or selling drugs on the corner with the parent’s encouragement, direction, or approval; this is moral turpitude. In instances where the juvenile is participating in delinquent activity without the encouragement, direction or approval of the caregivers; improper supervision may be a concern.

If it is clear at Intake that the parent/caretaker responded in a protective manner, this report would not be accepted for assessment. In situations where the parent has no knowledge of the child’s delinquent activity, the screening decision should be based on whether the supervision plan the parent/caretaker had in place was a reasonable plan based on the child’s current and past behaviors. If the parent had no reason to expect that the child needed a more stringent supervision plan and was unaware of the child’s delinquent activities, this report would not be accepted for assessment. If the child’s past behaviors indicated that a more stringent supervision plan was needed and the parent failed to implement a more stringent plan, this report would be accepted for assessment.
Improper Discipline Screening Tool

Accept for CPS Assessment

Yes

Is the parent/caretaker using corporal punishment which results in any type of injury, cut, or extreme bruises?

No

Accept for CPS Assessment

Yes

Is the parent/caretaker withholding food and/or water or requiring the child to consume non-food items or inappropriate amounts of food or water?

No

Accept for CPS Assessment

Yes

Is the parent/caretaker using restraints, confinement, or deprivation?

No

This decision tree is not all inclusive in regards to screening of reports of improper discipline reports. There may be situations where you would answer no to these questions, but begin a CPS Assessment due to other information during intake.
J. Improper Discipline Screening Tool Directions

**Is the parent/caretaker using corporal punishment that results in any type of injury, cuts, or extreme bruises?**

The law does not prohibit the use of reasonable methods of parental discipline or recommend particular methods. Parents have the right to physically discipline their child as long as the punishment is reasonable and appropriate for the child’s age and stage of development. **Improper Discipline** occurs when a parent/caretaker uses corporal punishment that creates minor physical marks such as bruises and/or welts greater than minor temporary redness of skin lasting more than 24 hours or any other disciplinary act(s) unreasonable and/or inappropriate for the child’s age, size, condition and abilities that does not rise to the level of abuse.

Examples of unreasonable and inappropriate acts of discipline include, but are not limited to:
- Child standing in one place for an extended amount of time
- Requiring the child to consume nonfood items or inappropriate amounts of food or water
- Parent use restraints, confinement, or deprivation

When determining reasonable discipline consider the following factors:
- Child’s age, physical size, abilities, and condition,
- Location of the physical marks and frequency or recurrence of injuries, and
- Type and extent of discipline.

**Is the parent/caretaker withholding food and/or water or requiring the child to consume nonfood items or inappropriate amounts of food or water?**

A CPS Assessment must occur if there is a pattern of withholding water or food. Forcing a child to consume excessive amounts of food or water can be dangerous. Forcing a child to consume an extreme amount of hot sauce, salt, pepper or nonfood item is not an appropriate form of discipline and depending upon the age and size of the child could be life threatening. Reports of this nature could be seen as meeting the criteria for an abuse report based on cruel/grossly inappropriate behavior modification, depending on the circumstances.

**Is the parent/caretaker using restraints, confinement, or deprivation?**

Appropriate discipline does not involve the use of restraints, confinement, or deprivations. This includes being deprived of heat, ventilation, or any basic necessity.

Return to [Maltreatment Screening Tools page 1](#).
**K. Abandonment Screening Tool Directions**

**Is the parent/caretaker gone for an extended time period without indicating when he/she will return?**

Abandonment is a willful act; a conscious decision made by the parent/caretaker to abandon the child. There is a clear demonstration that the parent/caretaker does not intend to resume parental responsibilities for the child. The legal definition of abandonment is “any willful or intentional conduct on the part of the parent which evidences a settled purpose to forego all parental duties and relinquish all parental claims to the child.”

It is important to determine if the parent/caretaker made arrangements with an alternate caregiver. A situation where a parent/caretaker left a child with a grandparent and the grandparent who is willing to continue to provide care for the child should not be accepted for CPS Assessment under the abandonment category. The grandparent should be referred to community resources to assist with obtaining legal custody. If the only issue is that the grandparents are having difficulties enrolling the child in school, refer to N.C.G.S. § 115C-366, Assignment of student to a particular school. A situation where a parent/caretaker left a child with a grandparent who agreed to provide care; the parent did not return to assume caretaking responsibilities, and the grandparent is now saying they are no longer willing to provide care meets the criteria for a CPS Assessment.

Another consideration is the appropriateness of the alternate caretaker and their desire to continue to provide care for the child, as well as, determining the last time the parent/caregiver has been in contact with the child and alternate caretaker. The Infant Homicide Prevention Act requires CPS reports of abandonment to be initiated immediately. The county child welfare agencies must contact law enforcement to request assistance; to inquire through the NC Center for Missing Persons; and other resources to determine if the child has been reported as a missing child.
L. Improper Medical and Remedial Care Screening Tool Directions

Is the parent/caretaker failing to provide proper medical care?

This includes the parent/caretaker’s refusal or failure to seek, obtain, and/or maintain those services for necessary medical, dental, or mental health care. This category includes the parent/caretaker not seeking treatment for the child’s immediate, chronic, and/or dangerous medical condition or does not follow prescribed treatment. If the child has exceptional needs, such as being medically fragile, which the parent/caretaker does not or cannot meet, a CPS Assessment may be warranted. If the child is suicidal and the parent/caretaker will not/cannot take protective action, a CPS Assessment is warranted.

Is the parent/caretaker failing to provide proper remedial care?

This category further includes necessary rehabilitative care such as speech therapy and physical therapy, as well as, remedial care such as the proper treatment for a hearing defect.

Note: Failure to provide child with immunizations or routine well childcare in and of itself does not constitute neglect. A parental decision not to provide a child with behavior modification medication in and of itself does not constitute neglect. An allegation of neglect based solely on a child’s having head lice is not appropriate for CPS Assessment. This condition could arise in any number of ways and is not, in and of itself, an indicator of neglect. Collecting information regarding the parent/caretaker’s attempts towards treating the head lice, as well as, whether public health has intervened is important. In situations where a teenager is refusing to keep appointments with a therapist and the parent/caretaker is making every effort to encourage the child to keep the appointment, including arranging transportation for the child, is not sufficient information to proceed with a CPS Assessment.
Injurious Environment Screening Tool

- Accept for CPS Assessment
- Are there structural issues with the family's living environment which place the child's health or safety at risk?
- Yes
- No
- Accept for CPS Assessment
- Is the child's living environment hazardous or immediately threatening?
- Yes
- No
- Accept for CPS Assessment
- Are criminal elements endorsed by the parent/caretaker that place the child's health or safety at risk?
- Yes
- No
- Accept for CPS Assessment
- Is the child living in the house with a sex offender?
- Yes
- No

This decision tree is not all inclusive in regards to the screening of injurious environment reports. There may be situations where you answer no to these questions, but accept the report and begin a CPS Assessment due to other information obtained during Intake. Reports alleging Domestic Violence and Substance Abuse can be indicative of an injurious environment and require the completion of the coordinating screening tool.
M. Injurious Environment Screening Tool Directions

Are there structural issues with the family’s living environment which place the child’s health or safety at risk?

Structural issues to consider include: exposed electrical wiring; holes in the floor of the home; flaking lead based paint; plumbing/septic tank issues; leaking gas from stove or heating unit; lack of water or utilities (heat, plumbing and electricity) with no alternate provisions made or the alternate provisions are inappropriate (stove, unsafe space heaters used), open, broken or missing windows. The age and developmental status of the child impact the potential for harm to the child’s health and safety.

Is the child’s living environment hazardous or immediately threatening?

Housekeeping/cleanliness issues addressed through CPS are those that impact the child’s health or safety. Simply having a dirty house does not indicate an injurious environment. The living conditions have to be such that they are not safe for a child. Cleanliness issues to consider include: a substantial amount of scattered garbage/trash accessible to a young child; a substantial amount of contained garbage/trash which sits to the point that vermin are present; animal or human waste that is not disposed of properly; and any situation in which the failure to maintain cleanliness results in a health or safety risk to the child. The main concern regarding fecal matter has to do with fecal/oral contamination; therefore, the child's age and developmental status impacts the level of risk. It is important to note whether dangerous substances or objects are stored in areas that are easily accessible to young children, such as lower shelves or cabinets, under the sink or in an open area. The accessibility of firearms and other weapons is a factor to consider. In accordance with N.C.G.S. §14-351, a report which indicates that the firearm is stored or left in a condition that the firearm can be discharged and that the parent has knowledge that the child has access to the firearm warrants a CPS Assessment.

Are criminal elements endorsed by the parent/caretaker that place the child’s health or safety at risk?

The potential exists for a child to be negatively impacted when the parent/caretaker engages in activities such as manufacturing and/or distributing drugs/alcohol, operating a gaming house, or organizing a shoplifting ring which lead to constant disruption of the home environment as evidenced by heavy traffic in the home. A consideration would be whether drugs and alcohol were easily accessible to the child, the potential for violence/weapons associated with illegal activities, and whether the parent/caretaker’s caretaking and supervision skills were negatively impacted in this environment.

Is the child living in the home with a sex offender?

If a substantiated perpetrator or an individual convicted of a sexual offense against a child has established residence where juveniles reside, those persons having suspicion of risk in the new environment are obligated to report. The screening decision must be based on current risk. If it is believed the children are at risk, the report must be accepted for CPS Assessment. For reports alleging domestic violence and substance abuse, please consult the Domestic Violence and Substance Abuse Maltreatment Screening Tools.

Return to Maltreatment Screening Tools page 1.
Intake: Maltreatment Screening Tools

Substance Abuse Screening Tool

- Is the parent/caretaker using money to buy alcohol/drugs without making arrangements to provide basic necessities?
  - NO
  - Has the parent/caretaker’s use of alcohol/drugs impairing his/her ability to care for the child in the absence of an alternative child care arrangement?
    - NO
    - Has the child been exposed to a methamphetamine or other drug manufacturing laboratory?
      - NO
      - Has the parent/caretaker been criminally charged with driving while intoxicated?
        - NO
        - Go to Substance Affected Infant Screening Tool.
          - YES
          - Has the infant been identified as affected by substance use resulting from prenatal drug exposure?
            - NO
              - This decision tree is not all inclusive in regards to the screening of substance abuse reports. There may be situations when the report is accepted for a CPS Assessment due to other information obtained during Intake.

Substance Affected Infant Screening Tool
N. Substance Abuse Screening Tool Directions

Is the parent/caretaker using money to buy alcohol/drugs without making arrangements to provide basic necessities?

When the substance abusers use rises to the level that he or she is willing to place their needs to satisfy the addiction above providing proper care to the child, it is problematic and must be accepted for CPS Assessment in the absence of an alternative arrangement for ensuring those basic needs are provided to the child. In situations when other family/friends/other support networks are ensuring that the child is provided with food, clothing, and shelter, the dynamic of that relationship should be explored. This could be considered enabling and could lead to the substance abuser’s expectation that others will provide care for their child. Illegal and legal drugs have the potential to become problematic when they are abused.

Is the parent/caretaker’s use of alcohol/drugs impairing their ability to care for the child in the absence of an alternative child care arrangement?

Parenting skills are affected by substance use, depending upon the parent/caretaker’s level of dependency on the substance. The capacity to provide proper care will vary. Many times, the parent/caretaker makes arrangements for care to be provided to the child by a responsible caretaker known to the child, and this can be appropriate depending upon the relationship among the child, parent, and caretaker, and the frequency of such an arrangement. The parent’s use/behavior and the impact on the child are relevant. Simply using drugs or having a drink in the child’s presence does not meet the definition of neglect. If the parent’s use impacts the caretaking ability in such a manner that his or she is not providing proper supervision and care, then those reports must be accepted for CPS Assessment.

Has the parent/caretaker been criminally charged with driving while intoxicated?

If a parent or caretaker is criminally charged with a DWI offense while a child is in the car, the report must be accepted for assessment. The county child welfare agency maintains discretion in the classification of this allegation, meaning that depending on the circumstances this type of report may be accepted as a neglect report or as an abuse report.

Has the parent’s alcohol/drug use resulted in a positive screening at the child’s birth?

Since North Carolina General Statutes do not recognize prenatal child abuse, a mother’s positive screening coupled with the infant’s negative screening in the absence of further information indicating abuse or neglect does not automatically warrant a CPS Assessment. Newborn children who have a positive urine or meconium toxicology for drugs or alcohol are considered at risk and those situations must be accepted for a CPS Assessment.
**Intake: Maltreatment Screening Tools**

**Has the child been exposed to a methamphetamine or other drug-manufacturing laboratory?**

The children who live in and around methamphetamine or other drug-manufacturing laboratories have a high risk of harm due to their developmental nature. Under these circumstances, the children are at increased risk due to their inability to protect themselves. The children in these homes are also exposed to serious toxicities and dangers that could have long term effects on their health and development. A child living in or being exposed to a methamphetamine or other drug-manufacturing laboratory must be accepted for an Investigative Assessment.

**Has an infant been identified as affected by substance use resulting from prenatal drug exposure?**

The Child Abuse and Prevention Treatment Act (CAPTA) requires that health care providers involved in the delivery and care of an infant affected by substance abuse, withdrawal symptoms resulting from prenatal drug exposure or a Fetal Alcohol Spectrum Disorder must notify the child protective services system. However, the notification requirement does not establish a definition under Federal law of what constitutes child abuse or neglect. In North Carolina, the notification must occur upon identification of the infant as a “substance affected infant,” as defined by the North Carolina Department of Health and Human Services.

Thus, a report that an infant has been identified as affected by substance use resulting from prenatal drug exposure does not always mean that child welfare services are appropriate. Consult the Substance Affected Infant Screening Tool that follows to determine if a CPS Assessment is warranted.

Return to **Maltreatment Screening Tools page 1**.
Substance Affected Infant Screening Tool

Substance Affected Infant Screening Tool, Part I

- Has the infant been identified as being affected by a Fetal Alcohol Spectrum Disorder?
  - NO
    - Did the infant have a positive drug toxicology?
      - NO
        - Is the infant experiencing drug or alcohol withdrawal symptoms?
          - YES
            - Accept for CPS Assessment
          - NO
            - Is the infant's positive drug toxicology or are the withdrawal symptoms the result of prenatal substance use other than the mother's prescribed and appropriate use of a medication?
              - NO
                - Continue with Substance Affected Infant Screening Tool, Part II.
              - YES
                - Accept for CPS Assessment

- YES
  - Accept for CPS Assessment
Did the mother have a positive drug or alcohol toxicology screen at the time of infant’s birth?

YES

NO

Did the mother have a medical evaluation or behavioral health assessment indicative of an active substance use disorder at the time of infant’s birth?

YES

NO

Is the substance use having a demonstrated behavioral impact on mother’s ability to care for the infant?

YES

NO

Was the mother’s positive drug toxicology the result of substance use other than her prescribed and appropriate use of a medication?

YES

NO

Has a review of the county child welfare agency history revealed a pattern of substantiations or findings of services needed or a particularly egregious finding that correlates with the allegations?

YES

NO

This decision tree is not all inclusive in regards to the screening of substance abuse reports. There may be situations when the report is accepted for a CPS Assessment due to other information obtained during Intake.
O. Substance Affected Infant Screening Tool Directions

Has the infant been identified as being affected by a Fetal Alcohol Spectrum Disorder?

Fetal Alcohol Spectrum Disorder (FASD) is an umbrella term that encompasses all disabilities caused by prenatal alcohol exposure.

If the infant has received one of the following diagnoses then the report must be accepted for CPS Assessment: Fetal Alcohol Syndrome (FAS), Partial FAS (PFAS), Neurobehavioral Disorder associated with Prenatal Alcohol Exposure (NDPAE), Alcohol-Related Birth Defects (ARBD) or Alcohol-Related Neurodevelopmental Disorder (ARND).

Did the infant have a positive drug toxicology? Is the infant experiencing drug/alcohol withdrawal symptoms?

A report alleging that an infant had a positive drug toxicology or is experiencing withdrawal symptoms would be appropriate for CPS Assessment. However, if it is known that the drug is a medication prescribed to the mother and is being used appropriately – per the prescribing provider – then the report should not be accepted on that basis alone. This includes medications prescribed for the treatment of opioid use disorders.

Did the mother have a positive drug or alcohol toxicology screen at the time of the infant’s birth?

A report that only alleges the mother’s substance use would not be appropriate for CPS Assessment. However, a CPS Assessment must occur if she is also demonstrating behaviors that impact her ability to provide care to the infant.

Additionally, a CPS Assessment must occur if a review of county child welfare agency history revealed a pattern of substantiations or findings of services needed or a particularly egregious finding that correlates with the allegations. However, a mother’s prescribed and appropriate use of medications should not be coupled with county child welfare agency history to justify the acceptance of a report.

Did the mother have a medical evaluation or behavioral health assessment that was indicative of an active substance use disorder at the time of the infant’s birth?

A report that only alleges the mother’s substance use disorder would not be appropriate for CPS Assessment. However, a CPS Assessment must occur if she is also demonstrating behaviors that impact her ability to provide care to the infant.

Return to Maltreatment Screening Tools page 1.
Domestic Violence Screening Tool

- Accept for CPS Assessment
  - Yes: Has the child ever called 911, intervened or been physically harmed during violent incidents between adults?
  - No

- Accept for CPS Assessment
  - Yes: Is the child fearful for his/her life, for the lives of other family members including pets, or fearful for the non-offending adult victim's life?
  - No

- Accept for CPS Assessment
  - Yes: Is the child present or does he/she have knowledge of when the batterer inflicts injury on or threatens violence against the non-offending adult victim?
  - No

- Accept for CPS Assessment
  - Yes: Are there weapons present? Have weapons been used?
  - No

- Accept for CPS Assessment
  - Yes: Is there a history of domestic violence? Is the violence increasing in frequency?
  - No

- Accept for CPS Assessment
  - Yes: Has there been repeated police involvement? Are there current protective orders?
  - No

- Accept for CPS Assessment
  - Yes: Are there power and control dynamics that pose a risk to the child's well-being?
  - No

This decision tree is not all inclusive to the screening of domestic violence reports. There may be situations where you answer no to those questions, but accept the report and begin a CPS Assessment due to other information obtained during Intake. There are additional questions on the CPS Intake Report to help inform the screening decision.
P. Domestic Violence Screening Tool Directions

Domestic violence is a serious issue with potentially fatal implications for children and non-offending adult victims. In recognition of this potential lethality, every reporter must be asked, “Has there been an occurrence of domestic violence in the home?”

Domestic violence is the establishment of control and fear in an intimate relationship through the use of violence and other forms of abuse including but not limited to: physical abuse, emotional abuse, sexual abuse, economic oppression, isolation, threats, intimidation, and maltreatment of the children to control the non-offending adult victim.

Has the child ever called 911, intervened, or been physically harmed during violent incidents between adults?

There is a real possibility that the child could be physically injured when intervening in domestic violence situations.

Is the child fearful for their life, for the lives of other family members including pets, or fearful for the non-offending adult victim’s life?

An assessment of the impact of exposure to the violence is needed. The child fearing for their life or for the lives of any family members is evidence that the violence is having a serious impact on their mental/emotional health. There is a correlation between pet abuse and domestic violence, as it is a predictor of a batterer’s lethality.

Is the child present or does he or she have knowledge of when the batterer inflicts injury on or threatens violence against the non-offending adult victim?

The child’s presence when violence is occurring warrants a CPS Assessment. A child’s presence is defined as within sight or sound regardless of their age. This includes not only a situation where a child is present to witness violence, but also must include a situation when a child may have knowledge that violence is occurring in their home. For example, a child reporting that he or she hears one parent/caretaker threatening the life of the parent/caretaker; he or she reports seeing injuries on a parent/caretaker after an altercation; or a parent/caretaker is reporting to the child he or she was assaulted by the other parent/caretaker. An assessment of the impact of exposure is needed, as some children are more resilient than others.

Has there been repeated police involvement? Are there civil protective orders?

Police involvement is one indication there is a history of domestic violence and that the non-offending adult victim has taken some steps towards protection. Repeated violence from the batterer after law enforcement/court involvement is an indication that the batterer has no regard for these legal measures, and that law enforcement is not a deterrent.
Is there a history of domestic violence? Is the violence increasing in frequency?

A pattern of domestic violence indicates a situation more serious than an isolated incident. If the batterer has become increasingly violent, it is reasonable to expect this progression to continue which can compromise the child’s safety.

Are there weapons present or have weapons been used?

The presence of a weapon or weapons creates a risk for potential use. The use of weapons increases the potential for deadly violence.

Are there power and control dynamics that pose risk to a child’s well-being? Does the batterer interfere with the non-offending adult victim's ability to meet the child’s needs?

Batterers will often control access to basic necessities to maintain power in the family. Examples include control over access to food, shelter, clothing, education, mental health, and medical care.

Return to Maltreatment Screening Tools page 1.
Illegal Placement/Adoption Screening Tool

Accept for CPS Assessment

Is the parent/caretaker placing the child for adoption in exchange for money or other compensation?

Yes

Accept for CPS Assessment

Is the parent/caretaker placing the child for adoption without executing a consent for adoption?

Yes

Accept for CPS Assessment

Is the parent/caretaker placing the child in violation of the Interstate Compact on the Placement of Children?

Yes

No

This decision tree is not all inclusive in regards to the screening of illegal placement/adoption reports. There may be situations where you answer no to these questions, but accept the report and begin a CPS Assessment due to other information received during Intake.
Q. Illegal Placement/Adoption Screening Tool Directions

Is the parent/caretaker placing the child for adoption in exchange for money or other compensation?

A parent/caretaker may not pay or give, offer to pay or give, or request, receive or accept any money or anything of value, directly or indirectly for the placement or adoption of a child. An adoptive parent, or another person acting on behalf of an adoptive parent, may pay medical expenses, counseling services expenses, and/or reasonable or actual expenses for ordinary living expenses, etc. for the mother. It is neglectful to accept payment in kind for a child, such as trading a child for a car.

Is the parent/caretaker placing the child for adoption without executing a Consent for Adoption?

A parent/caretaker cannot place a child with an alternate caregiver without executing their consent for adoption. The parent/caretaker must have the authority to place the child and consent to the child’s adoption.

Is the parent/caretaker placing the child in violation of the Interstate Compact on the Placement of Children?

ICPC is a legally and administratively sound means of placing children across state lines with the same safeguards and services that are available when they are placed within their own state. ICPC provides the means for securing an evaluation of a prospective placement before the child is sent outside the state and provides assurance that the state sending the child retains jurisdiction over the child sufficient to ensure that the child receives adequate care and protection. Placements across state lines require the cooperation of agencies in ensuring that potential placements are evaluated for suitability and that supervision will be provided for the time necessary to determine that the placement is in the child's best interest.
Intake: Maltreatment Screening Tools

Dependency Screening Tool

Accept for CPS Assessment

Yes

Is the child without a parent/caretaker?

No

Accept for CPS Assessment

Yes

Is the parent/caretaker lacking capacity to provide care and supervision to the child without having an appropriate alternative child care arrangement?

No

Accept for CPS Assessment

Yes

Is the child unaccompanied and the whereabouts of the parent/caretaker are unknown?

No

This decision tree is not all inclusive in regards to the screening of dependency reports. There may be situations where you answer no to these questions, but accept the report and begin a CPS Assessment due to other information obtained during Intake.
R. Dependency Screening Tool Directions

Is the child without a parent/caretaker?

A child can be dependent due to the absence of a parent/caretaker. The parent/caretaker’s absence may be due to hospitalization, incarceration, or any situation in which the parent/caretaker is unavailable and there are no alternative arrangements to provide appropriate care. Dependency also refers to the lack of ability of the parent/caretaker. A parent who is hospitalized or incarcerated is not necessarily unwilling to provide care but is unable to provide care due to the present circumstances. An infant who has been safely surrendered is dependent.

Children or youth who appear to be unaccompanied, whose parent/caretaker is absent, or who have run away from home may be vulnerable to exploitation or may have already been exploited through sex trafficking or labor trafficking. Intake workers may need to ask questions to further explore the child’s circumstances regarding access to basic needs (food, clothing, shelter), who is providing those needs, and whether the child is exchanging sexual acts to meet these needs or for anything else of value. Those who participate in the human trafficking of children and youth may pose as the child or youth’s parent, relative caregiver, legal custodian, or romantic partner. These children and youth may not initially appear to be dependent; however, if their exploiter is not a parent, guardian, custodian, or caretaker pursuant to N.C.G.S. §7B-101, the child or youth may be dependent. Intake workers should thoroughly document the circumstances of the child that cause the reporter to suspect that the child is dependent as well as the names, aliases, physical description, and relationship to the child of anyone accompanying a child or youth who is suspected to be dependent or who has run away.

Is the parent/caretaker lacking capacity to provide care and supervision to the child without having an appropriate alternative child care arrangement?

Dependency can also occur in situations where the parent/caretaker is incapacitated due to mental or physical illness, substance abuse, or any situation which impacts the ability of the parent to provide appropriate care. If the parent/caretaker fails to ensure an appropriate alternative child care arrangement, the child is dependent and a CPS Assessment must occur.

Is the child unaccompanied and the whereabouts of the parent/caretaker are unknown?

Children or youth who appear to be unaccompanied, who have run away from home, or whose parent/caretaker is absent or unknown may be victims of human trafficking. Those who participate in the human trafficking of children and youth may pose as the child or youth’s parent, relative caregiver, legal custodian, or romantic partner. These children and youth may not initially appear to be dependent; however, if the perpetrator, who may be posing as a parent, relative caregiver, or guardian is not in fact, their parent, guardian, custodian, or caretaker pursuant to G.S. 7B-101, the child or youth may be dependent.

Return to Maltreatment Screening Tools page 1.
The purpose of the response priority decision trees is to provide structure for the determination of how quickly the CPS Assessment must be initiated. The response priority decision trees are to be consulted for every new CPS report that is accepted for CPS Assessment. This applies to all reports, reports on new families and families already known to the agency, whether or not a case is open to CPS Assessments, CPS In-Home Services, or Child Placement Services.

**Use of Response Priority Decision Trees:**

1. Begin with the Response Priority Decision Tree that corresponds to the maltreatment allegation that is the most egregious. Consult the Priority Response Decision Tree for each type of maltreatment alleged in the report. The Response Priority Trees include:
   - **Physical Abuse Response Priority Decision Tree.** To be used with allegations of: physical abuse and cruel/grossly inappropriate behavior modification.
   - **Moral Turpitude Response Priority Decision Tree**
   - **Sexual Abuse Response Priority Decision Tree**
   - **Emotional Abuse Response Priority Decision Tree**
   - **Human Trafficking Response Priority Decision Tree**
   - **Neglect Response Priority Decision Tree.** To be used with maltreatment allegations of: improper care, improper supervision, improper discipline, abandonment, improper medical/remedial care, injurious environment, and illegal placement/adoption.
   - **Dependency Response Priority Decision Tree**

2. Start with the first question box of each Decision Tree. Proceed by answering the questions yes or no. When the answer to any question is yes, this is the termination point. Guidance regarding each of the questions is provided after the Decision Tree.

3. The termination point indicates the appropriate response time, immediate, within 24-hours, or within 72-hours. If an immediate response has been indicated on one tree, it is not necessary to complete additional maltreatment trees. Otherwise, continue with the Decision Tree for each maltreatment alleged.

For an immediate response, initiation must occur at once, immediately after completion of the Intake report. The response should never exceed 24 hours for a report alleging physical or sexual abuse. The response should never exceed 72 hours for a report alleging neglect or dependency.

The responsibility to ensure safety begins at Intake. If the county child welfare agency selects an initiation timeframe other than what the corresponding Response Time Decision Tree indicates, the rational for changing the response, especially for any decision to delay the response time, must be documented and approved by a supervisor or higher management level. The decision trees are designed to guide decisions--not to replace County child welfare worker judgement. A case may have unique circumstances not captured by the decision tree, or there may be critical information that is unknown. If there is any doubt about the most appropriate response time frame, the agency decision must be to respond in a response time that ensures the children are, first and foremost, protected from harm.
Physical Abuse Response Priority Decision Tree

Immediate Response

1. Is the child preschool or limited by disability?
   - Yes
   - No

2. Is the child being tormented or tortured?
   - Yes
   - No

3. Is the child in a life threatening situation?
   - Yes
   - No

4. Is this a self-reporting child under 12?
   - Yes
   - Is this child afraid to go home?
     - Yes
     - No
     - Is another child living in a home in which another child died as a result of maltreatment?
       - Yes
       - No

All other physical abuse reports require a 24 hour response including: child at risk of serious injury, child not protected from alleged perpetrator, child in need of immediate medical care.
PHYSICAL ABUSE RESPONSE PRIORITY DECISION TREE DEFINITIONS

Is the child preschool-aged or limited by a disability?
Physical abuse of a young child or a child with a disability is high risk and an immediate response must be assigned.

Is the child being tormented or tortured?
Tormenting and torture are aggravated circumstances and an immediate response must be assigned.

Is the child in a life-threatening situation?
Physical abuse can present as a life-threatening situation depending upon severity, age, and developmental stage of the child. Examples of possible life-threatening situations include a child with internal injuries; burns requiring medical treatment; or a child less than a year old who has been shaken or subjected to spanking, hitting, or other form of corporal punishment.

Is this a self-reporting child under 12? Is this child afraid to go home?
A child under the age of 12 who contacts the county child welfare agency directly as a possible abuse victim is particularly concerning and an immediate response must be assigned. Based on credible threats made by a parent/caretaker, a child's behavioral indicators of fear, as well as a history of abusive behavior similar to the current allegation, may suggest a higher chance of reoccurrence.

Does the child live in a home in which another child died as a result of maltreatment?
Based on the potential risk, this situation an immediate response must be assigned.

Return to Response Priority Page 1.
Moral Turpitude Response Priority Decision Tree Definitions

Is the child in a life-threatening situation?

Based on the child’s age and developmental status, if the moral turpitude presents a threat to the child’s life, an immediate response must be assigned.

Return to Response Priority Page 1.
Does the alleged perpetrator have access to the child currently being sexually abused?

If the alleged perpetrator resides in the home with or has access to the suspected victim child, an immediate response must be assigned. In situations where the reported abuse occurred in the past and the alleged perpetrator does not have access to the child, a response within 24 hours is acceptable.

Is the child in a life-threatening situation?

If the alleged sexual abuse presents a threat to the child’s life, an immediate response is must be assigned.

Is this a self-reporting child under 12? Is this child afraid to go home?

A child under the age of 12 who contacts the county child welfare agency directly as a possible sexual abuse victim is particularly concerning and an immediate response must be assigned. Based on credible threats made by a parent/caretaker, a child’s behavioral indicators of fear also suggest a potentially dangerous situation and an immediate response must be assigned.
EMOTIONAL ABUSE RESPONSE PRIORITY DECISION TREE DEFINITIONS

Is the child in a life-threatening situation?

If the emotional abuse presents a threat to the child’s life, an immediate response must be assigned. An example of a life-threatening allegation includes the emotional abuse has prompted the child to exhibit suicidal behavior.

Is this a self-reporting child under 12? Is this child afraid to go home?

A child under the age of 12 who contacts the county child welfare agency directly as a possible abuse victim is particularly concerning and an immediate response must be assigned. Based on credible threats made by a parent/caretaker, a child’s behavioral indicators of fear, as well as a history of abusive behavior similar to the current allegation, may suggest a higher chance of reoccurrence.

Is the child being tormented?

If the child is currently being exposed to extreme terrorizing tactics and evidences behavioral indicators of fear, an immediate response must be assigned.

Return to Response Priority Page 1.
Human Trafficking Response Priority Decision Tool

Does the alleged perpetrator have access to the child currently being exploited or trafficked?

- **YES**
  - Immediate Response

- **NO**
  - \( \quad \)

Is the child in a life threatening situation?

- **YES**
  - Immediate Response

- **NO**
  - \( \quad \)

Is this a self-reporting child under age 12? Is the child afraid to go home?

- **YES**
  - Immediate Response

- **NO**
  - \( \quad \)

All reports of human trafficking require at least a 24 hour response.

HUMAN TRAFFICKING RESPONSE PRIORITY DECISION TREE DEFINITIONS

**Does the alleged perpetrator have access to the child currently being exploited or trafficked?**

If the alleged perpetrator resides in the home with or has access to the suspected victim child, an immediate response must be assigned. In situations where the reported abuse occurred in the past and the alleged perpetrator does not have access to the child, a response within 24 hours is acceptable.

**Is the child in a life-threatening situation?**

If the alleged trafficking presents a threat to the child’s life, an immediate response must be assigned.

**Is this a self-reporting child under age 12? Is the child afraid to go home?**

A child under the age of 12 who contacts the county child welfare agency directly as a possible human trafficking or sexual abuse victim is particularly concerning and an immediate response must be assigned. Based on credible threats made by a parent/caretaker, a child’s behavioral indicators of fear also suggest a potentially dangerous situation and an immediate response must be assigned.

Return to **Response Priority Page 1**.
Neglect Response Priority Decision Tree

Immediate Response

Yes

Is the child at immediate risk of harm resulting from neglect?

No

Immediate Response

Yes

Is the child under age 6 or limited by a disability unsupervised?

No

Immediate Response

Yes

Is the child in a life threatening situation? Has the child been abandoned?

No

Immediate Response

Yes

Is this a self-reporting child under 13? Is this child afraid to go home?

No

Immediate Response

Yes

Is the child in a home where another child has been abused or where a child has died as a result of abuse or neglect?

No

Immediate Response

Yes

Is the child in immediate need of medical care?

No

Immediate Response

Yes

Is the child at risk of serious injury?

No

24 Hour Response

Yes

Has the child received discipline resulting in injury?

No

All other neglect reports require at least a 72 hour response, including the following situations: improper supervision, improper discipline, injurious environment, lack of proper care, and child placed for care/adoption in violation of the law.
NEGLECT RESPONSE PRIORITY DECISION TREE DEFINITIONS

Is the child immediately at risk of harm resulting from neglect?

Based on the child(ren)’s age and developmental status, if they are at immediate risk of harm, then a timelier response is more appropriate. Things that constitute an immediate risk of harm include leaking gas from a stove or a heating unit; lack of food in home and information that the child has not been fed; substances or objects accessible to the child(ren) that may endanger their health and safety; excessive garbage, human, and/or animal waste which threatens the child(ren)’s health or serious illness or significant injury has occurred due to living in such conditions and these conditions still exist (lead poisoning, rat bites), and firearms that are easily accessible to children.

Is the child under the age of 6 or limited by a disability unsupervised?

If the child is under the age of 6 or limited by a disability, not supervised by the parent/caretaker and there is no known appropriate alternative plan for supervision, then an immediate response is warranted.

Is the child in a life-threatening situation? Has the child been abandoned?

Based on the child’s age and developmental status, if the alleged neglect presents a threat to the child’s life, then an immediate response is warranted. Child abandonment is considered an aggravated circumstance and an immediate response must be assigned.

Is this a self-reporting child under 12? Is the child afraid to go home?

A child under the age of 12 who contacts the county child welfare agency directly as a possible neglect victim is particularly concerning and an immediate response must be assigned. Based on credible threats made by a parent/caretaker, a child’s behavioral indicators of fear also suggest a potentially dangerous situation and an immediate response must be assigned.

Is the child in a home where another child has been abused or where a child has died as a result of abuse or neglect?

Based on the potential for risk, CPS reports with allegations that a child resides in the home where another child has been abused or has died as a result of abuse or neglect an immediate response must be assignee, regardless of whether the abuse or neglect was known and substantiated.

Is the child in immediate need of medical care?

CPS reports with allegations that the child needs immediate, not necessarily lifesaving medical care an immediate response must be assigned. Examples include allegations that the child is underweight; the child is not being fed; the parent/caretaker refuses to meet the child’s medical and/or mental health needs; or the parent/caretaker refuses to treat a serious injury/condition.
Is the child at risk of serious injury?

Based on the parent’s ability to provide appropriate supervision and care, CPS reports with allegations that a child is at risk of serious injury may require a timelier response.

Has the child received discipline resulting in injury?

CPS reports that allege improper discipline resulting in injury to the child a response of 24 hours must be assigned; all other improper discipline reports a response within 72 hours must occur. If the bruises reported are not currently visible, a response within 72 hours must be assigned.

Return to Response Priority Page 1.
INTAKE: RESPONSE PRIORITY / TIME FRAME DECISION TREES

Immediate Response

Yes

Is the child in a life threatening situation?

No

Immediate Response

Yes

Is this a self-reporting child under 12?

Is the child afraid to go home?

No

Immediate Response

Yes

Is this an infant that has been safely surrendered?

No

Immediate Response

Yes

Is the child without a parent/caretaker to provide care and supervision and believed to be a victim of human trafficking?

No

72 Hour Response

Yes

Is this a child without a parent/caretaker to provide care and supervision?

No

72 Hour Response

Yes

Is this a child with a parent/caretaker who is unable to provide care and supervision?

No

All dependency reports require at least a 72 hour response.
Is the child in a life-threatening situation?

Based on the child’s age and developmental status, if the dependency presents a threat to the child’s life, an immediate response must be assigned.

Is this a self-reporting child under 12? Is this child afraid to go home?

A child under the age of 12 who contacts the county child welfare agency directly as a possible dependency victim is particularly concerning and an immediate response must be assigned.

Is the child without a parent/caretaker to provide care and supervision and believed to be a victim of human trafficking?

The response time to CPS reports containing allegations that the child is without a parent/caretaker and is believed to be a victim of human trafficking requires an immediate response.

Is this an infant who has been safely surrendered?

An immediate response time must be assigned to reports alleging that an infant has been safety surrendered.

Is this a child without a parent/caretaker to provide care and supervision?

The response time to CPS reports containing allegations that the child is without a parent/caretaker must be based upon the absence of the parent/caretaker to provide care and supervision.

Is this a child with a parent/caretaker who is unable to provide care and supervision?

The response time to CPS reports containing allegations that the child is with a parent/caretaker who is unable to provide care and supervision must be based upon the parent/caretaker’s capacity (or lack thereof) to meet the child’s needs.
CPS Assessments: Family & Investigative Assessments: Purpose

The primary goal of CPS Assessments is to protect children from further harm and to support and improve parental/caregiver abilities to assure a safe and nurturing home for each child. If conditions described in the intake report would, if true, meet the legal definition of child abuse, neglect, or dependency and the alleged perpetrator is a parent, guardian, custodian or caretaker by statutory definition, and if the alleged victim is a child under the age of 18 years of age, the county child welfare agency where the child resides, or is found, is required to initiate a CPS Assessment of all children residing in the home. The task of the CPS Assessment is to determine if the child(ren) is/are abused, neglected, and/or dependent, or if the family is in need of services, and what level of intervention is necessary to assure safety.

The purpose of the CPS Assessment is to gather sufficient information through interviews, observations, and when appropriate, analysis of reports, medical records, photographs, etc. to determine if:

- Child maltreatment occurred,
- There is a risk of future maltreatment and the level of that risk,
- The child is safe within the home and, if not, what interventions can be implemented that will ensure the child's protection and maintain the family unit intact if reasonably possible,
- Continuing agency services are needed to reduce the risk of maltreatment occurring in the future, and
- Determine if out of home placement is necessary to protect the child from harm.
## CPS Assessments: Family & Investigative Assessments: Table of Contents

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## CPS Assessments: Family & Investigative Assessments: Policy and Legal Basis

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<th>LEGAL BASIS</th>
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<td>CPS Assessments are legally mandated, non-voluntary services for:</td>
<td>The director of each county Department of Social Services is required by law to establish protective services for children alleged to be abused, neglected, or dependent.</td>
</tr>
<tr>
<td>o Children who are alleged victims of abuse, neglect and/or dependency due to the action of, or lack of protection by, the child’s parent or caregiver; and</td>
<td><strong>N.C.G.S. § 7B-300</strong> states:</td>
</tr>
<tr>
<td>o The household family members of such children.</td>
<td>&quot;The director of the department of social services in each county of the State shall establish protective services for juveniles alleged to be abused, neglected, or dependent. Protective services shall include the screening of reports, the performance of an assessment using either a family assessment response or an investigative assessment response, casework, or other counseling services to parents, guardians, or other caretakers as provided by the director to help the parents, guardians, or other caretakers and the court to prevent abuse or neglect, to improve the quality of child care, to be more adequate parents, guardians, or caretakers, and to preserve and stabilize family life.”</td>
</tr>
<tr>
<td>When a report of abuse, neglect, or dependency is received, the director of the county child welfare agency must make a prompt and thorough assessment to determine whether protective services should be provided or a petition filed.</td>
<td><strong>N.C.G.S. § 7B-302</strong> states:</td>
</tr>
<tr>
<td>Sufficient information must be gathered to assess:</td>
<td>&quot;When a report of abuse, neglect, or dependency is received, the director of the department of social services shall make a prompt and thorough assessment, using either a family assessment response or an investigative assessment response, in order to ascertain the facts of the case, the extent of the abuse or neglect, and the risk of harm to the juvenile, in order to determine whether protective services should be provided or the complaint filed as a petition.”</td>
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<tr>
<td>o The safety of the child and the potential risk of harm during the CPS Assessment period;</td>
<td><strong>N.C.G.S. § 7B-101</strong> provides the legal definitions of abused, neglected, and dependent juveniles:</td>
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<td>o What actions might be needed to assure the safety of the child;</td>
<td>Section 106 (b)(2)(B)(xviii) of the Child Abuse Prevention and Treatment Act (CAPTA) requires that county child welfare agency notify the individual of the complaints or allegations made against him or her at the first time of contact, regardless of how that contact is made. This is dependent upon the county child welfare worker being certain that he or she is speaking to the person who is named in the report. If the county child welfare worker cannot be certain to whom he or she is speaking, specific allegations shall not be discussed to protect the confidentiality of the family.</td>
</tr>
<tr>
<td>o Whether the facts identified through a structured gathering of information support the substantiation that a child is abused, neglected, and/or dependent;</td>
<td><strong>N.C.G.S. § 7B-302(a)</strong> states:</td>
</tr>
<tr>
<td>o If through observation and the gathering of information it is determined that due to the level of safety and risk, the family is in need of services; and</td>
<td>The assessment and evaluation shall include a visit to the place where the juvenile resides, except when the report alleges abuse or neglect in a child care facility as defined in Article 7 of Chapter 110 of the General Statutes.</td>
</tr>
<tr>
<td>o Whether the specific environment in which the child is found meets the child’s need for care and protection.</td>
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</table>
| The Family Assessment Response; or | o The Family Assessment Response; or  
| The Investigative Assessment Response. | o The Investigative Assessment Response. |

With the exception of certain reports that must be taken as an Investigative Assessment, it will be up to each county child welfare agency director, or their designee, to choose which response will be used to assess reports of abuse, neglect, and/or dependency.

When a report of abuse, neglect, and/or dependency is received regarding a non-institutional setting, all children living in the home must be considered and assessed as victim children, whether or not they are named in the report. If a report is received on an institutional setting, the circumstances of other children who were subjected to the alleged perpetrator's care and supervision must be assessed to determine whether they require protective services or immediate removal.

N.C.G.S. § 7B-302 (b) states:
(b) When a report of a juvenile's death as a result of suspected maltreatment or a report of suspected abuse, neglect, or dependency of a juvenile in a non-institutional setting is received, the director of the department of social services shall immediately ascertain if other juveniles live in the home, and, if so, initiate an assessment in order to determine whether they require protective services or whether immediate removal of the juveniles from the home is necessary for their protection. When a report of a juvenile's death as a result of maltreatment or a report of suspected abuse, neglect, or dependency of a juvenile in an institutional setting such as a residential child care facility or residential educational facility is received, the director of the department of social services shall immediately ascertain if other juveniles remain in the facility subject to the alleged perpetrator's care or supervision, and, if so, assess the circumstances of those juveniles in order to determine whether they require protective services or whether immediate removal of those juveniles from the facility is necessary for their protection.

N.C.G.S. § 7B-302 (e) states:
In performing any duties related to the assessment of the report or the provision or arrangement for protective services, the director may consult with any public or private agencies or individuals, including the available State or local law enforcement officers who shall assist in the assessment and evaluation of the seriousness of any report of abuse, neglect, or dependency when requested by the director. The director or the director's representative may make a written demand for any information or reports, whether or not confidential, that may in the director's opinion be relevant to the assessment or provision of protective services. Upon the director's or the director's representative's request and unless protected by the attorney-client privilege, any public or private agency or individual shall provide access to and copies of this confidential information and these records to the extent permitted by federal law and regulations. If a custodian of criminal investigative information or records believes that release of the information will jeopardize the right of the State to prosecute a defendant or the right of a defendant to receive a fair trial or will undermine an ongoing or future investigation, it may seek an order from a court of competent jurisdiction to prevent disclosure of the information. In such an action, the custodian of the records shall have the burden of showing by a preponderance of the evidence that disclosure of the information in question will jeopardize the right of the State to prosecute a defendant or the right of a defendant to receive a fair trial or will undermine an ongoing or future investigation. Actions brought pursuant to this paragraph shall be set down for immediate hearing, and subsequent proceedings in the actions shall be accorded priority by the trial and appellate courts.
<table>
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<tr>
<th>N.C.G.S. § 7B-302(h) states:</th>
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<td>The director or the director's representative may not enter a private residence for assessment purposes without at least one of the following:</td>
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<td>(1) The reasonable belief that a juvenile is in imminent danger of death or serious physical injury.</td>
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<td>(2) The permission of the parent or person responsible for the juvenile's care.</td>
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<td>(3) The accompaniment of a law enforcement officer who has legal authority to enter the residence.</td>
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<td>(4) An order from a court of competent jurisdiction.</td>
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N.C.G.S. § 7B-306 states:
"the prosecutor shall review the director's determination that a petition should not be filed within 20 days after the person making the report is notified. The review shall include conferences with the person making the report, the protective services worker, the juvenile, if practical, and other persons known to have pertinent information about the juvenile or the juvenile's family. At the conclusion of the conferences, the prosecutor may affirm the decision made by the director, may request the appropriate local law enforcement agency to investigate the allegations, or may direct the director to file a petition."

North Carolina Administrative Rule 10A NCAC 70A .0105 states:
Initiation of an investigation is defined as having face-to-face contact with the alleged victim child or children. If there is not such face-to-face contact within the prescribed time period, the case record shall contain documentation to explain why such contact was not made and what other steps were taken to assess the risk of harm to the child or children.

(e) When the director is unable to initiate the investigation within the prescribed time period, as indicated in Paragraph (d) of this Rule, because the alleged victim child or children cannot be located, the director shall make diligent efforts to locate the alleged victim child or children until such efforts are successful or until the director concludes that the child or children cannot be located. Diligent efforts shall include, but not be limited to, visits to the child's or children's address at different times of the day and on different days. All efforts to locate the child or children shall be documented in the case record.
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<th>CPS Assessments: Family &amp; Investigative Assessments: Required Timeframes (Policy and Protocol)</th>
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<td><strong>Upon screen in of report</strong></td>
</tr>
<tr>
<td>• Time clock for initiation begins</td>
</tr>
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| **Within Response Time (Immediate, 24 or 72 hours)** | **Initiation** = Face to face interviews with all victim children  
See Initiation protocol for exceptions to interviewing sequence, i.e. domestic violence |
| **Same Day Initiated with Children** | **Face to face interviews with parents/caretakers**  
**Completion of Safety Assessment**  
**Home visit** |
| **Records Check (criminal, CPS history, etc.)** - Promptly and ongoing as new information is received |
| **Ongoing during assessment** |
| **Contacts with parent(s) and child(ren).** See Required Contact Section – Frequency determined by risk level  
**Collateral contacts** – At least two during assessment  
**Visit at home where child(ren) resides (with parent/caretaker or Temporary Safety Provider)** – Minimum of monthly |
| **Current within 7 calendar days** | **Documentation of any assessment activity or action** |
| **If/When case involves a Temporary Safety Provider** |
| **Prior to placement of child(ren) with safety provider** | **Meet with family to develop a safety plan and hold a CFT**  
**Complete Background checks for all household members 16 years or older**  
**Complete Initial Safety Provider Assessment and approved by supervisor** |
| **If/When county files petition for custody** |
| **Prior to filing petition** | **Hold a CFT. See Cross Function topic: File a Petition, Preparing Child(ren) and Parents** |
| **Prior to placing child(ren) out of the home** | **Locate placement in child(ren)’s best interest, consider relatives/kin for placement (complete Initial Provider Assessment), ICWA considerations, Mexican Heritage inquiry, address educational stability (Best Interest Determination)** |
| **At time of child(ren) placement** | **Provide to placement provider: custody order, all available child information, & county child welfare agency contact information** |
| **Within 3 calendar days following out-of-home placement** | **Face to face visit with child(ren)** |
| **Within 7 calendar days of custody** | **Child(ren) medical exam occurs (Child Health Status completed) & Educational Stability addressed (Child Educational Status or Best Interest Determination form completed)**  
**Visitation of child(ren) with parent(s) and siblings,**  
**Face to face contact with the placement provider (all providers) in the provider’s home** |
| **Within 14 calendar days of custody** | **Family Time and Contact Plan developed jointly with parent(s), Family Time and Contact Plan developed for sibling visits, Shared Parenting Meeting** |
| **Case Closure Requirements** |
| **Within 45 calendar days of CPS report. Prior to or at time of case closure:** | **Risk Assessment & Strengths and Needs Assessment**  
**Case Decision Summary** |
<table>
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<tr>
<th>Within 3 calendar days following case decision of Substantiation or Services Needed</th>
<th>A referral to CDSA for any child under the age of three must occur when concerns are identified on the Family Strengths and Needs Assessment, Child Characteristics (S6).</th>
</tr>
</thead>
<tbody>
<tr>
<td>Within 5 working days after case decision</td>
<td>Notification letters, RIL notification (if applicable)</td>
</tr>
</tbody>
</table>
| Within 7 calendar days after case decision of Substantiation or Services Needed | For ongoing cases, face to face contact with family regarding case decision  
Complete all documentation, closing forms, and case file. |
CPS Assessments: Family & Investigative Assessments: Checking Agency Records

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<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
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<td>As a part of a thorough CPS Assessment, the county child welfare agency must:</td>
<td>Review of CPS history, including the CR check, is important because it provides information that will help the county child welfare worker determine if the reported situation represents a pattern of abuse and/or neglect. When assessing the family, and trying to determine the most appropriate services, the county child welfare worker should consider the history of abuse and/or neglect, as well as other reported incidents.</td>
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<tr>
<td>• Review its Child Welfare Services records for previous contact with the family;</td>
<td>ASSIST can be used to complete background checks (it is particularly valuable for after hour reports and reports with a short response timeframe) and supports use of the following systems:</td>
</tr>
<tr>
<td>• Conduct a Central Registry (CR) check to ascertain if any previous reports of abuse, neglect, or dependency have been made concerning the alleged victim child(ren), unless:</td>
<td>• Criminal checks. ACIS provides any criminal charges or convictions in North Carolina through the AOC data base. and</td>
</tr>
<tr>
<td></td>
<td>• CPS Central Registry checks. The CR provides previous CPS involvement.</td>
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<td></td>
<td>There may be incidents that require a criminal record check and/or 911 call logs on an individual and/or address that is not the family home.</td>
</tr>
<tr>
<td>• Check criminal records for all relevant individuals who are 16 years of age or older, and</td>
<td>All county child welfare agencies should have staff trained to conduct criminal record checks on foster and adoptive parents, potential County child welfare workers, parents, guardians, custodians, caretakers under CPS Assessment, caretakers responsible for children in county child welfare custody, and on possible Temporary Safety providers.</td>
</tr>
<tr>
<td>• Request 911 call logs on the relevant address(es) and review obtained information.</td>
<td>Access to the ACIS system allows county child welfare agencies to immediately determine the legal status of all adults with or without criminal records and/or pending charges in North Carolina.</td>
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DOMESTIC VIOLENCE

On cases with allegations of domestic violence, assessment activities that must occur prior to the initial contact with the family, include but are not limited to:

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<tr>
<td>• Contact the Administrative Office of the Courts (or county Clerk of Superior Court) and/or complete a search of VCAP to determine if a domestic violence protective order exists, and</td>
<td>Civil Case Processing System (VCAP)</td>
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<tr>
<td></td>
<td>• Contact local law enforcement agencies and/or conduct a criminal record check on the alleged perpetrator of domestic violence.</td>
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If unable to conduct these activities before initial contact with the family, document the reasons, and these activities must be completed as soon as possible during the CPS Assessment.

The VCAP system contains information on civil actions that range from case initiation to disposition. This system should be used by county child welfare agencies when checking the existence of custody orders, domestic violence protective orders, and/or child support orders. VCAP is not able to provide a narrative on the conditions of a civil order.
**CPS Assessments: Family & Investigative Assessments: Initiation**

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<th>Protocol – What you must do</th>
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<tr>
<td>Initiation of a CPS Assessment must include face-to-face interviews with all children living in the home. All children living in the home, in a non-institutional setting, are considered alleged victim children when there is any allegation of abuse, neglect, and/or dependency.</td>
<td>These timeframes are guidelines and indicate the maximum time limit for initiating CPS Assessments. Each referral is evaluated to determine the perceived risk to the child's safety, the urgency of the situation, and the priority of the report.</td>
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</table>

All reports accepted for a CPS Assessment must:
- Be assessed promptly through face-to-face interviews with all alleged victim children within the statutory time requirements, or
- Include documentation to reflect diligent efforts made to see the child within these timeframes

Interviews with children must include questions regarding the allegations. Interviewing strategies and techniques which are appropriate to the child’s developmental level must be used. Documentation must explain the inability to interview the child. If a child has the capacity for speech, the child must be interviewed.

See Family Assessment and Investigative Assessment for more protocol and guidance for initiation, specifically regarding the sequence of contact.

Assessments with allegations of domestic violence:
In cases involving domestic violence, CPS Assessments must be initiated by first contacting the non-offending parent/adult victim outside of the presence of the violent partner. The children must not be interviewed in the presence of the violent adult.

The sequence of the interviews for a Family Assessment or Investigative Assessment without allegations of abuse but with allegations of domestic violence must be as follows:
- Non-offending parent/adult victim,
- Children,
- Alleged perpetrator of domestic violence.

Do not disclose information obtained from the non-offending parent/adult victim concerning the source of information, or any information concerning the non-offending parent/adult victim’s safety plan during the interview with the child.

Assessments with allegations of domestic violence:
The Children’s Domestic Violence Assessment Tool DSS-5237 contains scaled assessment questions and should be used to support the determination of the safety and risk factors on assessments with allegations of domestic violence.

Every child reacts differently when exposed to domestic violence. Some children develop debilitating conditions, while others show no negative effects from the exposure to violence. As a result, it is important to interview the children regarding their involvement and/or exposure to domestic violence, as well as their general safety and well-being. It is important to recognize that older children are more likely to minimize reports of parental fighting. Younger children may be more spontaneous and less guarded with the information they share.
### CPS Assessments: Family & Investigative Assessments: Initiation

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<tr>
<td>Investigative Assessments with allegations of abuse must be initiated by first interviewing the child.</td>
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**Postponement of the Child(ren) Interview**

The safety of children is closely linked to the safety of the non-offending parent/adult victim. When:

- The interview with the non-offending parent/adult victim and the completion of the Safety Assessment indicate extreme risk, or
- The children have learned to survive by identifying with the alleged perpetrator of domestic violence (i.e., cannot keep confidential information from the alleged perpetrator of domestic violence)

The County child welfare worker and the supervisor must determine if the interview of the child(ren) must be delayed until safety can be achieved. Documentation must reflect:

- What steps were taken to identify the risk of harm to the child and
- The reasons for the postponement.

Once safety is assured, all required face-to-face interviews must be conducted. Postponing the interview with the child will be the exception and not the rule.

**Justification for not complying with the above requirements of initiation must be:**

- Approved by a county child welfare agency supervisor, and
- Documented.

**Methamphetamine**

Assessments involving allegations of children exposed to methamphetamine or other drug manufacturing laboratories: See Chapter IX - DRUG ENDANGERED CHILDREN.
When the agency is unable to initiate the CPS Assessment within the prescribed time because the alleged victim child cannot be located, the director or their designees must make **diligent efforts** to locate the child until such efforts are successful or until the county child welfare agency concludes that the child cannot be located. The determination that the child cannot be located must be approved by a county child welfare agency supervisor.

If the county child welfare agency concludes that the child cannot be located, the report must be unsubstantiated in an investigative assessment or found services not recommended in a family assessment and closed.

All efforts to locate the child must be documented in the case record. The decision to discontinue diligent efforts must be approved by the county child welfare supervisor.

<table>
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<tr>
<th>Protocol – What you must do</th>
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<td>When the agency is unable to initiate the CPS Assessment within the prescribed time because the alleged victim child cannot be located, the director or their designees must make <strong>diligent efforts</strong> to locate the child until such efforts are successful or until the county child welfare agency concludes that the child cannot be located. The determination that the child cannot be located must be approved by a county child welfare agency supervisor.</td>
<td>See item IV entitled “Diligent Efforts to Initiate Case” of the Structured Documentation Instrument for CPS Assessments - Part I (DSS-5010).</td>
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</tbody>
</table>

All efforts to locate the child must be documented in the case record. The decision to discontinue diligent efforts must be approved by the county child welfare supervisor.
The primary concern of Child Welfare Services is protecting children. At no time should a county child welfare agency worker leave a child in unsafe circumstances. The intent of safety planning is to reach an agreed upon plan with the family that imposes the lowest level of intrusiveness possible while assuring a child’s safety.

When any high-risk situation is alleged, the county child welfare agency must:
- Take immediate action to see the child(ren),
- Assess the situation, and
- Implement whatever safety action is necessary to protect the child(ren).

Each CPS report must be assessed to determine the need for an immediate response to ensure the safety of the child.

All allegations, whether contained in the original report or uncovered during the CPS Assessment, must:
- Be documented,
- Thoroughly assessed, and
- Be addressed if found to exist. Any potential safety threat and/or risk to the child must have a safety intervention.

Throughout the CPS Assessment, the county child welfare agency must continue to monitor for safety, current and/or future risk of maltreatment, and assess for child well-being.

New Reports or Additional Allegations During Open CPS Assessment

If the county child welfare agency is contacted and provided with information regarding the same allegations and incidents that were in the initial report and already being assessed,
- The information must be documented in the case record and the allegations must be processed through Intake.
- Such circumstances do not require an initiation or a new Safety Assessment.
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<td>If the county child welfare agency is contacted and provided with information that is not regarding the same allegations and incidents in the initial report, the county child welfare agency must:</td>
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<tr>
<td>• Treat the information as a new report (through Intake) and</td>
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<tr>
<td>• Respond within appropriate timeframes to assess the safety of the child.</td>
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<td>If the county child welfare agency discovers new allegations or incidents meeting legal definitions of abuse, neglect, and/or dependency, during an open CPS Assessment, the county child welfare agency must:</td>
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<tr>
<td>• Ensure that the county child welfare worker responds to the new allegations within appropriate timeframes to assess the safety of the child and</td>
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<tr>
<td>• Develops a new or modified Safety Assessment that reflects the new information.</td>
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<td>If the county child welfare agency discovers information that necessitates law enforcement involvement, the county child welfare agency must:</td>
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<td>• Give immediate verbal notification to the district attorney (DA) or their designee;</td>
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<tr>
<td>• Send subsequent written notification to the district attorney within 48 hours;</td>
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<tr>
<td>• Give immediate verbal notification to the appropriate local law enforcement (LE) agency; and</td>
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<tr>
<td>• Send subsequent written notification to the appropriate local law enforcement agency within 48 hours.</td>
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<td>The notification to the DA/LE must include:</td>
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<td>• The name and address of the child, of the parents; or</td>
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<td>• The perpetrator when this person is different from the parents or caretaker;</td>
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<td>• Whether the abuse was physical, sexual, or emotional;</td>
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<tr>
<td>• The dates that the CPS Assessment was initiated and that the evidence of abuse was found;</td>
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<tr>
<td>• What evidence of abuse was found; and</td>
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</table>
### Protocol – What you must do
- What plan to protect the child has been developed and what is being done to implement it.

"Evidence of abuse" means information including but not limited to:
- credible statements of the child, parents, and/or other persons;
- observations of the county child welfare worker;
- records;
- photographs;
- x-rays or medical reports.

All information gathered during the assessment process must be incorporated into one case decision and one Report to the Central Registry / CPS Application (DSS-5104).

### Safety Assessment
A North Carolina Safety Assessment must be developed to address the safety issues and the caretaker's capacity to ensure safety for the children. The North Carolina Safety Assessment (DSS-5231) must be completed and documented at the following intervals:
- At the time of the initial contact, whenever feasible including a home visit, and prior to allowing the child to remain in the household;
- Prior to the case decision;
- Prior to the removal of a child from the home;
- Prior to the return home of a child in cases where the caretaker temporarily arranges for the child to stay outside of the home as a part of the safety intervention;
- At any point a new CPS report is received; and
- At any other point that safety issues are revealed.

A Safety Intervention must be identified whenever any Current Indicator of Safety is present. The Safety Intervention must either be:
- Development of the Temporary Parental Safety Agreement (TPSA) with the all parent(s) and, if required, all caretaker(s) or Temporary Safety Providers identified to assure safety, or
- If a TPSA cannot ensure safety, file a juvenile petition for court intervention.

### Guidance – How you should do it

Safety Assessment
Just having an allegation does not warrant a Safety Intervention. It is not appropriate to document the mere existence of an allegation as a safety indicator. During the county child welfare worker's assessment, the Safety Assessment tool is used to evaluate safety. If there is no information that indicates the allegation is valid; it does not become a part of the Safety Intervention. Families are not to be coerced into signing documents simply because of allegations. Safety Interventions are used when it is determined there is evidence of safety issues—not merely allegations.

It is expected that the parent or caretaker sign the North Carolina Safety Assessment. The instructions on the Safety Assessment tool state that no signature is required unless there is a finding of Safe with a Plan or Unsafe. No signature is required if no safety indicators have been identified. It is also important to remember that in family-centered practice, asking the parents if they desire to sign off on the findings of an assessment that they willingly participated in is an appropriate method of maintaining their
### Protocol – What you must do

The TPSA, Part E of the Safety Assessment, must specify what actions the parent or caretaker, agency and any identified Temporary Safety Provider will take to ensure the safety of the children.

See [Use of TPSA with Parents & Caretakers Decision Tool](#).

See [Safety](#) for more information regarding, but not limited to:

- Voluntary requirement of TPSA,
- When a TPSA may not be adequate and/or when court intervention must be considered, and
- Use of CFTs.

A copy of the North Carolina Safety Assessment must be provided to the parent(s)/caretaker(s) upon completion. Whenever a Temporary Parental Safety Agreement involves the use of a Temporary Safety Provider, he or she must sign and receive a copy of the Safety Assessment.

Whenever a Safety Assessment and/or Temporary Parental Safety Agreement is modified:

- The modified TPSA must be signed by the parent(s)/caretaker(s)/agency child welfare worker and supervisor, and
- A copy must be provided to the parent(s)/caretaker(s).

Assessments with allegations of **domestic violence**

After the initial interview with the non-offending parent/adult victim, if domestic violence is present and assessed by the Safety Assessment to constitute a safety issue for the child, a Safety Assessment and development of a Temporary Parental Safety Agreement must be completed. In some cases, safety will require that the non-offending parent/adult victim does not have a copy of the Safety Assessment that the perpetrator may find.

A separate Safety Assessment must be completed later with the alleged perpetrator of domestic violence after they are interviewed. Planning a safety agreement for the children’s safety with the alleged perpetrator of domestic violence must include the specific actions he or she will take to stop the violence and ensure that the children are safe.

### Guidance – How you should do it

engagement in the assessment process. As such, county child welfare workers should ask parents to sign off on the Safety Assessment tool that documents no identified safety indicators, and do not require a safety intervention if the parents desire to do so.

It is also important to remember that in family-centered practice, it is appropriate to engage and involve the parent(s) in the completion of the safety assessment process. As such, county child welfare workers should request that parent(s) initial each of the pages regarding Current Indicators of Safety on the Safety Assessment.

The county child welfare agency can choose to complete a new Safety Assessment or to modify the existing Safety Assessment and associated Temporary Parental Safety Agreement when:

- A new CPS report is received on an open CPS Assessment;
- Prior to the case decision;
- Prior to the return home in cases where the caretaker temporarily arranges for the child to stay outside of the home as a part of the safety intervention; and
- At any other point that safety issues are revealed.

Assessments with allegations of **domestic violence**

Prior to a child welfare agency filing a petition for court involvement, the following should be considered:

- A CPS Assessment involving domestic violence does not warrant an automatic custody removal to ensure safety.
- Placement of children, in even the best placements, causes emotional damage by adding to the children’s experiences of grief, loss, anxiety and/or fear caused by the separation from their families and their home. Even if children have been living in a chaotic or violent environment, they may have
Case specific circumstances may necessitate the completion of an additional Safety Assessment and development of a safety agreement after the interview with the child(ren) alleged to be victims of abuse, neglect, and/or dependency.

Use of **Temporary Safety Providers**
If, at any time during the CPS Assessment process, it is decided that a child must stay outside of the home to ensure safety, or a Temporary Safety Provider will move into the family home to supervise parental contact, the county child welfare agency must assess the Temporary Safety Provider and their home (assessment of the provider’s home is not required when the Safety Provider moves into the family home).

Whenever the Safety Assessment determines an intervention requiring separation or restriction of a parent’s access to their child is necessary, a Child and Family Team (CFT) meeting must be held. If it is not possible to hold the CFT meeting prior to the separation or restriction due to an urgent need to maintain safety, then the Child and Family Team meeting must be held as soon after as possible.

Written permission from the parent must be obtained, if:
- The parent is unable to travel with the county child welfare worker and child,
- The Temporary Safety Provider is unable to transport the child; and
- The county child welfare agency chooses to transport the child alone.

The county child welfare worker conducting the CPS Assessment must remain with the child until the Initial Provider Assessment is completed and approved.

If the county child welfare agency determines that the Temporary Safety Provider is not suitable, another Temporary Safety Provider must be identified by the parent. If the parent cannot identify another Temporary Safety Provider, temporary custody of the child must be taken and a juvenile petition requesting non-secure custody must be filed by the county child welfare agency conducting the CPS Assessment.

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<td>Case specific circumstances may necessitate the completion of an additional Safety Assessment and development of a safety agreement after the interview with the child(ren) alleged to be victims of abuse, neglect, and/or dependency.</td>
<td>developed skills to cope with that environment. Therefore, removal should not be considered until reasonable efforts are made to meet children’s needs for safety and nurturing in their own homes; unless no efforts are possible because children are at imminent risk of harm.</td>
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**Temporary Safety Provider**
The Temporary Safety Provider should be someone that both parents and the county child welfare worker agree will safely care for the child. In choosing someone to fill this need, the county child welfare worker should discuss the criteria rated on the Initial Provider Assessment.

Use of separation or restriction should be a last resort and should not be done without first exploring if an intervention can be identified that will keep the child safe without use of separation or restriction of a parent’s access.

The county child welfare worker should speak with the Temporary Safety Provider after the parent has gained this person’s agreement to care for the child. The Temporary Safety provider must be informed that a county child welfare worker will need to make a home visit to conduct the Initial Provider Assessment.

If the Initial Provider Assessment is positive, the county child welfare worker conducting the CPS Assessment should ask the Temporary Safety Provider to come for the child. If the county child welfare worker transports the child to the home of the Temporary Safety Provider, the parent should accompany the county child welfare worker to the home of the Temporary Safety Provider whenever possible.
Use of TPSA with Parents & Caretakers

Is the person the parent (birth or adoptive), legal guardian or legal custodian?

- **YES**
  - A Safety Assessment must be completed with this person.
  - If a Temporary Parental Safety Agreement (TPSA) is needed, this person must engage in the development of the TPSA. This person should initial all fields and sign the TPSA with the county child welfare agency.

- **NO**
  - This person is legally responsible for the health and welfare (care) of the juvenile (unless parental rights were terminated).
  - A Safety Assessment must be completed with this person.

  - If the juvenile resides in the home with this person or if the allegations pertain to this person, a Safety Assessment must be completed regarding the actions of this person.
  - This person cannot enter into a Temporary Parental Safety Agreement with the county child welfare agency. This person can participate in the development of a Safety Plan and sign the Temporary Parental Safety Agreement as Other.

  - If deemed Safe, or Safe With a Plan, and the Plan does not require restriction of access of this person to the juvenile, this person could continue to provide care for the juvenile while the agency continues the assessment, including attempts to locate and engage the parent.

  - If Safe with a Plan requires any restriction of access of this person to the juvenile or the Safety Assessment is Unsafe and the parent is not available to identify an alternate provider, the agency must pursue custody of the juvenile.

Is the person an adult member of the household where the child resides? This includes: stepparents, foster parents, and any other adult living in the home.

- **YES**
  - This person is defined by statute as a caretaker.
  - If the person is in the role of a house parent or cottage parent who has primary responsibility for supervising a juvenile’s health and welfare in a residential child care facility or residential educational facility, or any employee or volunteer of a division, institution, or school operated by the Department of Health and Human Services, refer to: Reports Involving Residential Setting in Intake Policy.

- **NO**
  - This person is NOT defined by statute as a caretaker.

Is the person an adult relative (inclusive of persons connected by blood as well as by marriage) entrusted** with the juvenile’s care?

- **YES**
  - This person is defined by statute as a caretaker. Refer to: Reports Involving Residential Setting in Intake Policy.

- **NO**
  - This person is defined by statute as a caretaker.

Is the person in the role of a house parent or cottage parent who has primary responsibility for supervising a juvenile’s health and welfare in a residential child care facility or residential educational facility, or any employee or volunteer of a division, institution, or school operated by the Department of Health and Human Services?

- **YES**
  - This person is defined by statute as a caretaker. Refer to: Reports Involving Residential Setting in Intake Policy.

- **NO**
  - This person is NOT defined by statute as a caretaker.
**CPS Assessments: Family & Investigative Assessments: Initial Face to Face Contacts with Household Members**

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<td>Interviews during the CPS Assessment must be conducted in the sequence least likely to cause further risk to the alleged victim, or there must be documentation that reflects the rationale for the sequence in which the interviews were conducted.</td>
<td>Family-centered practice and the concept of involving parents and both their formal and informal supports in decision-making throughout service provision can be challenging at times. It is important to remember that every interaction with the family and those supports is an opportunity to make a connection. Take the time to engage the family and the individuals that comprise the family’s support network, recognize the strengths, help with transitions, provide choices, pay attention to the words used when interacting with families, and make an effort to act as a change agent, rather than an authority figure. Family members and their supports should be made to feel their involvement and participation throughout the life of the case is crucial and that their feedback is valued.</td>
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Face-to-face interviews with the parents or primary caretakers with whom the child resides must:
- Be conducted the same day the child is seen, or
- There must be documentation to reflect diligent efforts made or rationale for delaying the interview that does not compromise the safety of the child. | An interview with the parents or primary caretakers with whom the child resides is an essential step in the CPS Assessment process. It allows the county child welfare worker to assess the allegations reported, assess the safety issues, and determine future risk or caretakers’ willingness and capacity to protect the child. Please refer to Structured Documentation Instrument for CPS Assessments Instructions DSS-5010ins. |

Face-to-face interviews with non-primary caretakers known to be living in the child’s household and with the alleged perpetrator if found not to be a parent/caretaker must:
- Be conducted within seven calendar days of initiating the CPS Assessment, or
- There must be documentation to reflect efforts made. | Sometimes extended family members, friends, or a second family unit reside in the same household. These or other appropriate adults who live in the household should be interviewed within seven calendar days of initiating the CPS Assessment. This is important because these individuals may have knowledge of the allegations through observation or they may have a significant relationship with the child. Except in very unusual circumstances, everyone living in the household should be interviewed or there should be documentation to reflect efforts made. One example where this might not be appropriate would be in a transient shelter. |

Regardless of how the first contact is made, the individual with complaints or allegations made against him or her must be notified of those allegations. This is dependent upon the county child welfare worker being certain that he or she is speaking to the person who is named in the report. If the county child welfare worker cannot be certain to whom he or she is speaking, specific allegations must not be discussed to protect the confidentiality of the family. |

At initial face to face contact with the parent(s)/caretaker(s), the county child welfare worker must:
- Communicate that the CPS Assessment must be completed within 45 calendar days of the date of the report;
- Provide a written explanation (e.g. a brochure) of the CPS Assessment response ([Family Response or Investigative Response](https://example.com)). The county child welfare worker must also verbally explain MRS and potential case decisions; | Assessment Interviews with Non-Offending Parent/Caretaker...
### CPS Assessments: Family & Investigative Assessments: Initial Face to Face Contacts with Household Members

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<td>• Assess the <strong>safety</strong> of the child;</td>
<td>The Non-Offending Parent/Adult Victim Domestic Violence Assessment Tool <a href="#">DSS-5235</a> contains scaled assessment questions and should be used to support the determination of safety and risk factors.</td>
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<td>• Assess ongoing <strong>risk</strong>;</td>
<td>The inability to speak with the non-offending parent/adult victim alone may be an indication of the level of control the perpetrator of domestic violence exerts over the family, and an indication of high risk.</td>
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<td>• Assess <strong>child well-being</strong> and family well-being; and</td>
<td>When interviewing the non-offending parent/adult victim of domestic violence:</td>
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<td>• Ascertain family strengths.</td>
<td>• Explain the process of the CPS Assessment,</td>
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<td>• Provide an assurance that the children’s safety (as well as theirs) is the goal of the CPS Assessment. Provide an assurance that the alleged perpetrator of domestic violence will not be confronted with the source of information, or any information concerning their safety plan that he or she has shared (within the limits of confidentiality) and,</td>
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<td>• Explain that he or she will be provided with referral information regarding safety for him or her and the children.</td>
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<td>• Questions to gain information regarding the history of domestic violence should be asked, such as:</td>
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<td>o Their history of seeking help</td>
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<td>o Their plan for the children and himself or herself</td>
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<td>o The frequency/intensity of the domestic violence</td>
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<td>o If their partner had ever used physical force on him or her (pushed, pulled, slapped, punched or kicked),</td>
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<td>o If he or she has ever been afraid for the safety of their children?</td>
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The child welfare agency must immediately ascertain if other children live in the home and, if so, initiate an assessment of those children to determine if they require protective services. When this includes the children of additional family units living in the same home, a separate report and assessment must occur.

Assessments with allegations of domestic violence
Separate interviews must be conducted with the non-offending parent/adult victim and alleged perpetrator of domestic violence. The non-offending parent/adult victim must never be placed in danger by having to be interviewed; develop safety plans; or meet with the perpetrator of violence against him or her.

Information obtained from the non-offending parent/adult victim or children that may jeopardize the safety of the child or the non-offending parent/adult victim must not be shared, especially with the alleged perpetrator of domestic violence. Information shared, including information that may seem inconsequential, and specifically information about the non-offending/adult victim’s whereabouts and/or schedule if he or she has left the home/relationship, can place the child and non-offending parent/adult victim in grave danger.

Assessment Interview with the Alleged Perpetrator
Ask the alleged perpetrator of domestic violence about:

- Their relationship with the non-offending parent,
- Parenting and child impact,
- Safety and well-being of the children.

The presence of relatives or friends may affect disclosure and safety. Information concerning resources and referrals to
Postponement of the Alleged Perpetrator Interview
If the non-offending parent/adult victim believes that interviewing the alleged perpetrator of domestic violence presents a great risk to him or her and the children, the county worker and supervisor must determine if the interview with the alleged perpetrator of domestic violence must be postponed until safety can be achieved. This determination comes from:

- An interview with the non-offending parent/adult victim, and
- Completion of the Safety Assessment.

When the interview with the non-offending parent/adult victim and the completion of the Safety Assessment indicate extreme risk and a decision by the County child welfare worker and approved by the supervisor is made to delay interviewing the alleged perpetrator, documentation must reflect:

- What steps were taken to identify the risk of harm to the child
- The reasons for the postponement.

Once safety is assured, the required face-to-face interview must be conducted. It is expected that most cases will not present with extreme danger.

Assessment Interview of Alleged Perpetrator
The Domestic Violence Perpetrator Assessment Tool DSS-5234 contains scaled assessment questions and should be used to support the determination of the safety and risk factors.

The interview should be conducted in such a manner that allows for the assessment of the level of danger presented by the alleged perpetrator of domestic violence. This will:

- Help to protect the county child welfare worker and
- Lessen the risk for children and the non-offending parent/adult victim.

The interview with the alleged perpetrator of domestic violence affords the opportunity to observe and document behaviors relative to the allegations, both positive and “concerning.” This observation supplements information obtained from:

- Police reports,
- Criminal records,
- Hospital/medical records,
- The child(ren) and
- The non-offending parent/adult victim.

It is important to note that the alleged perpetrator of domestic violence may attempt to:

- Present himself or herself as the “victim”;
- To charm the county child welfare worker;
- Gain control of the interview; and/or
- Deny any domestic violence, insisting that the relationship is “perfect.”

During interviews with the perpetrator, the county child welfare worker should:

services should immediately be given to the non-offending parent/adult victim and children (as appropriate).
### Protocol – What you must do

- Focus on information from third party reports such as law enforcement, medical providers, or the Administrative Office of the Courts.
- Follow up on legal accountability and/or treatment, and other service referrals for the alleged perpetrator of domestic violence.
- Convey to the alleged perpetrator of domestic violence that based on what happened (citing as much information as possible without compromising confidentiality or safety of the children, non-offending parent/adult victim, and/or the reporter) he or she will be required to take steps to stop the violence and ensure that the children are safe.
- Avoid debates and arguments with the alleged perpetrator of domestic violence. This is crucial. The focus of CPS is not to convince the alleged perpetrator of domestic violence to admit violent behavior, but discuss how to ensure the child’s safety with him or her.
- Set limits within the interview and future interaction with the alleged perpetrator of domestic violence and document the behaviors that make limit setting necessary and their capacity to respect efforts at setting limits.

### Guidance – How you should do it
## CPS Assessments: Family & Investigative Assessments: Home Visits

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<td>A home visit where the alleged victim child resides must:</td>
<td>It is important to see the children in the home as soon as possible to assess their conditions, to gain a perspective as to the level of immediate safety and continuing risk, and to determine whether the county child welfare agency needs to take steps to assure the children’s safety during the CPS Assessment.</td>
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<td>• Occur the same day as the victim child is seen (even if the contact and interview of the child occurs in another location),</td>
<td>A home visit provides firsthand knowledge of the home environment and facilitates the observation of family interactions in the everyday setting. A tour of the home and property, focused on where the child(ren) sleeps, eats, plays, etc., supports an assessment of the child(ren)’s physical environment.</td>
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<td>• Occur at least once a month with the child in the home during the CPS Assessment, and</td>
<td>The provision of Child Protective Services, including visiting and interviewing the child in their home with the parent’s permission, must not infringe upon any individual’s Fourth Amendment rights. Securing parental consent is vital. Efforts to secure voluntary consent should never be coercive. The CPS Assessment worker should explain their role and express the desire to interview the child, and to tour the home and property, to assess safety, risk, and the strengths and needs of the family.</td>
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<td>• Include observation and contact with every child living in the home.</td>
<td>The county child welfare agency should work with other agencies to ensure that all home visiting personnel address fire safety and the importance of working smoke detectors in the homes they visit. Discussions with the family should include development or review of a fire safety plan with the family.</td>
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<tr>
<td>If the allegations are made against the non-resident parent, a home visit must also be made to that home.</td>
<td>The home visit also supports the identification of resources within the neighborhood or community and the family’s access to these resources.</td>
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<td>Documentation must reflect the above or diligent efforts to accomplish these requirements.</td>
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**CPS Assessments: Family & Investigative Assessments: Home Visits**

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<td>If, after requesting to tour the home, the county child welfare worker is denied access:</td>
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<td>• The case must be staffed to determine if this tour is necessary to assess safety for the child(ren). If the decision is that a tour is necessary, the county child welfare agency must consult with their county attorney about filing for obstruction.</td>
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<td>• The refusal and following decisions must be documented, specifically pertaining to all safety and/or risk concerns.</td>
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## Protocol – What you must do

### Non-Resident Parent

The county child welfare agency must contact any non-resident parent who does not live in the home where the child neglect, abuse, and/or dependency allegations are being assessed to get their input on the allegations, as well as, the overall safety and risk level in the home.

If the non-resident parent cannot be located, the record must include documentation showing the diligent efforts made to locate him or her.

When contact with the non-resident parent may involve a safety threat and/or risk of harm to the child or to the resident parent/caretaker, the county child welfare agency must:

- Specify and verify the safety threat and/or risk of harm;
- State the reason(s) why contact is not in the best interest of the child and/or resident parent's/caretaker's safety;
- Indicate the decision was reviewed and approved by a supervisor/manager; and
- Document all the above.

### Non-Resident Child and Non-Resident Child’s Parent/Caretaker

There may be circumstances in which a parent has a child who does not live in the home where the child abuse, neglect and/or dependency occurred.

If child was present during alleged incidents of child abuse, neglect and/or dependency, the child must be considered a victim child and the child and his/her parent/caretaker must be interviewed within the statutory time requirements.

If it is known that the child visits the home but was not present during the alleged incidents of abuse, neglect and/or dependency, the child and his/her parent/caretaker must be interviewed within 7 calendar days and his/her safety assessed in the home where the allegations occurred as a part of the CPS Assessment.

If the non-resident child does not visit the home, the child and his/her parent/caretaker must be interviewed within 7 calendar days of initiating the CPS Assessment.

## Guidance – How you should do it

Discuss with the non-resident parent the level of their involvement with the child, and discuss if relatives may be a resource in supporting the child. If the non-resident parent or the family is not involved in the child's life, it may be beneficial to ask what it would take for him or her to become involved.

The resident parent may report that the non-resident parent has not been involved with the child to limit the non-resident parent’s interactions in the CPS Assessment. This may provide a good opportunity to discuss the parents’ relationship with each other, as well as, information about the non-resident parent’s last contact with the child and what the quality of the contacts has been. The child may also be able to report on their own relationship with the non-resident parent, as well as, the contacts.

A non-resident child and non-resident child’s parent/caretaker may have important information related to the safety of the resident children. A decision for the non-resident child to have limited or no visitation with a parent may be due to safety risks or threats in the home. It is the responsibility of the non-resident child’s parent/caretaker to protect the child and ensure his/her safety.
If the county child welfare agency determines that a petition is needed for the protection of the children living in the home where the child abuse, neglect or dependency occurred, the legal stability of the non-resident child’s living arrangement must be assessed.

Collateral Contacts
At least two collateral contacts (people significant to the case) must occur during the CPS Assessment. As a part of a thorough CPS Assessment, the county child welfare agency must:

- The county child welfare worker must contact all the collateral information sources identified by the family prior to making a case decision;
- The county child welfare worker must contact any collaterals identified on the CPS Structured Intake Form. These contacts must be made prior to making the case decision. An interview with all persons named at the time of the report as having information relevant to the CPS Assessment must occur; and
- Contact other persons or agencies known to be currently involved with the family or known to have knowledge of the situation.

If any of the above required contacts did not occur, there must be documentation regarding why the contacts did not occur.

Assessments with allegations of domestic violence
During contact with collateral contacts:

- Information obtained from the non-offending parent/adult victim or children that may jeopardize the safety of the child or the non-offending parent/adult victim must not be shared.
- Interviews with collaterals (neighbors, teachers and extended family members) are required by policy, and must be conducted with respect that their personal safety is a consideration that may affect their willingness to discuss the abuse/violence occurring within the family.

Written demands for information as provided for in N.C.G.S. §7B-302(e) must be utilized if needed by the county child welfare agency to acquire confidential information from domestic violence programs and other collateral information sources.
**CPS Assessments: Family & Investigative Assessments: Follow-Up Visits & Contacts with the Family**

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<tr>
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</table>
| When the child(ren) is not interviewed during initiation, the county child welfare must continue to make efforts to interview the child(ren). This interview must be:  
  • Conducted as soon as possible,  
  • Before the CPS Assessment is completed and the case decision is made. | Ongoing contact with the family and significant others is critical in monitoring the child’s safety and in knowing which services are most relevant.  
If information has not already been obtained and documented in the case file, the agency should continue to inquire, at least once a month, about:  
  • Any absent parent; and  
  • Extended family members or other extended social network. |
| If face-to-face interviews with the parent(s) or primary caretaker(s) with whom the child resides are not conducted the same day the child is seen, the county child welfare must continue to make efforts to interview the parent(s) or primary caretaker(s). These interviews must be:  
  • Conducted as soon as possible, and  
  • Before the CPS Assessment is completed and the case decision is made. |  |
| If face-to-face interviews with non-primary caretakers known to be living in the child’s household are not conducted within seven calendar days of initiating the CPS Assessment, the county child welfare must continue to make efforts to interview these non-primary caretakers. These interviews must be:  
  • Conducted as soon as possible, and  
  • Before the CPS Assessment is completed and the case decision is made. |  |
| The county child welfare agency must meet with the parents and the child(ren) throughout the CPS Assessment to:  
  • Ensure the safety of the child;  
  • Assess ongoing risk;  
  • Monitor the effectiveness of the safety intervention;  
  • Assess progress toward addressing the safety threat or risk;  
  • Monitor child well-being and family well-being; and  
  • Ascertain family strengths. |  |
| The frequency of ongoing face to face contact with the child(ren), parent(s) and/or caretaker(s) must be based on the safety and risk to the child(ren). Face to face contact with the victim child(ren), parent(s) and/or caretaker(s) must occur at a minimum of twice a month and at least 7 calendar days apart. Documentation must support the frequency of face to face contact. |  |
### Protocol – What you must do

Every contact with a family member must:
- Include visual observations of each person, their behavior, and the environment, especially related to safety or risk; and
- Describe specific interactions with and between each family members.

The county child welfare agency worker must communicate promptly to the parent(s)/caretaker(s) either verbally or in writing:
- Whenever a decision is made to extend the time to complete a CPS Assessment beyond 45 calendar days; and
- The reason for the extension.

### Guidance – How you should do it

**American Indian Child / ICWA**

The county child welfare agency must inquire if the child(ren) is a member of an American Indian tribe or is eligible for membership. All assessments Substantiated or found to be Services Needed and transferred for ongoing services must document there was an inquiry about a parent/caretaker’s American Indian ancestry. If any American Indian ancestry is indicated, the ICWA checklist (DSS-5291) must be completed.

**Mexican Heritage**

The county child welfare agency must inquire if the child(ren) has Mexican heritage. All assessments Substantiated or found to be Services Needed and transferred for ongoing services must document there was an inquiry about a child’s Mexican heritage.
**CPS Assessments: Family & Investigative Assessments:** Two Level Decision Making /Role of Supervisor

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| The social work supervisor and assigned case child welfare worker must staff each assessment case:  
  - Frequently enough to ensure the safety of all victim children, but at a minimum of once every other week; and  
  - Whenever there is a change in circumstances that impacts safety or risk to a child(ren).  
  Staffing must cover but not be limited to:  
    - Risk of maltreatment;  
    - Safety and Temporary Parental Safety Agreement, if in place;  
    - Family home environment;  
    - Family’s strengths and needs;  
    - Child Well-Being and family well-being;  
    - Progress toward addressing any safety threat or risk; and  
    - Review of the ongoing family and collateral contacts.  
  Two level decisions/reviews must occur on every CPS Assessment at the following times:  
    - When the Risk Assessment and Strengths and Needs Assessment are completed;  
    - Prior to initiating or terminating use of a Temporary Safety Provider;  
    - At completion of Safety Assessment and prior to implementation of a Temporary Parental Safety Agreement;  
    - Before modification of a Temporary Parental Safety Agreement;  
    - Regarding diligent efforts to locate a child/family and when these efforts can end;  
    - At case closure;  
    - Prior to filing a petition; and  
    - Whenever there is a change in circumstance that impacts the safety or risk to a child(ren).  
  The case supervisor must review every CPS Assessment case file for compliance with policy and protocol.  

CASE STAFFING/SUPERVISION  
Case staffing can occur in various forms.  
The focus of case staffing is to ensure that the case child welfare worker follows NC CW policy, addresses family needs, and monitors risk, safety, and family progress.  
Supervision provides coaching and support to the child welfare worker.  
Achieving these goals may be accomplished through an office meeting but could also occur when a supervisor attends a home visit or other family meeting with a child welfare worker.  
Two level decisions for CPS Assessment cases should involve the assigned case worker and that worker’s supervisor.  
However, there may be circumstances that require another County child welfare worker or another supervisor or a higher-level manager in the agency to participate in a review or the decision making.  
To ensure that every case includes all required documentation and two-level decision making, the case supervisor should review every CPS Assessment case file within two weeks of case closure.  
Each county child welfare agency should develop a method to indicate supervisory review of the case file for compliance with policy and protocol.
### Protocol – What you must do

Medical and psychological resources, such as the Child Medical Evaluation Program (CMEP) / Child and Family Evaluation Program (CFEP) must be utilized, when and as appropriate, as a component of a thorough CPS Assessment of alleged victims of neglect and/or physical, sexual, and/or emotional abuse. County child welfare workers engaged in conducting CPS Assessments must use professional judgment in determining when a CMEP and/or CFEP evaluation is necessary.

### Guidance – How you should do it

Refer to Section 1422 - CHILD MEDICAL & CHILD/FAMILY EVALUATION PROGRAM of Chapter VIII

A CMEP and/or CFEP evaluation should be considered if the county child welfare worker has questions about any of the following issues:

- Significant delay in the child's developmental skills;
- Significant delay in the child's physical development;
- Unusual and unexplained lethargy or irritability;
- Untreated or inadequately treated medical conditions which have significant impact on the child's overall health or physical development;
- Children affected when one parent abuses the other;
- Sexual contact between children initiated as CPS for parental supervision issues; or
- A child has received a non-serious injury from an unknown perpetrator.

This list is not intended to be all-inclusive. There may be other instances in which a CMEP and/or a CFEP may be considered appropriate as part of the CPS Assessment. The CMEP and CFEP can be used in all CPS Assessments.
CPS Assessments: Family & Investigative Assessments: Invoking the Juvenile Court During the Assessment, Interference with a CPS Assessment

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<tr>
<th>Protocol – What you must do</th>
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<tr>
<td>There will be instances when a county child welfare agency must file an obstruction/interference petition to proceed with the CPS Assessment and the required the provision of protective services. The petition must:</td>
<td>A thorough interview at Intake that solicits sufficient information to make a clear-cut screening decision that the allegations reported meet at least one of the legal definitions of abuse, neglect, and/or dependency is important.</td>
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<td>• Provide sufficient evidence to demonstrate that the facts surrounding the report would meet the definitions of abuse, neglect, and/or dependency under NCGS § 7B-101, and</td>
<td>When a person or entity interferes with the assessment process, it is the worker’s obligation to adequately explain the need to thoroughly complete the assessment to ascertain the safety and well-being of the child. It is incumbent upon any worker to understand and to acknowledge any mistrust. Often, simply having a rationale, non-threatening but frank discussion with the family or organization impeding the assessment can result in cooperation with the assessment. This discussion can center on explaining the child welfare process emphasizing service provision to the family and explaining that not every child that comes to the attention of a county agency is removed from their families. This discussion is not a bargaining session as the law is very clear that an order related to obstructing with or interfering with a CPS Assessment is enforceable by either civil or criminal contempt. Rather, the discussion is meant to model the partnership process by listening to and acknowledging fears, understanding the feelings, and explaining the need to proceed with the assessment within the provisions of the law. The provision of Child Protective Services, including visiting and interviewing the child in their home, with the parent’s permission does not infringe upon Fourth Amendment rights. Securing parental consent to interview the child is vital; efforts to secure voluntary consent must never be coercive. The worker should explain their role and express a desire to interview the child to assess safety, risk, and the strengths and needs of the family. It is important to remember that the ability to interview children at school or at childcare centers has not been compromised – schools and childcare centers are not private residences. The debate regarding parental rights versus the provision of Child Protective Services is an issue that has existed for some time.</td>
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<td>• State and verify evidence of the person’s obstruction or interference.</td>
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<td>This obstruction of, or interference with, the CPS Assessment includes:</td>
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<td>• Refusing to disclose the whereabouts of the juvenile;</td>
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<td>• Refusing to allow the agency to have personal access to the juvenile;</td>
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<td>• Refusing to allow the agency to observe or interview the juvenile in private;</td>
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<td>• Refusing to allow the agency access to confidential information and records upon request;</td>
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<td>• Refusing to allow the director/agency to arrange for an evaluation of the juvenile by a physician or other expert; or</td>
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<td>• Other conduct that makes it impossible for the director/agency to carry out the duties to make a thorough assessment of the safety and risk of the children.</td>
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<tr>
<td>Filing the Petition: Obstruction of or Interference with Juvenile Investigation</td>
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<td>A county child welfare agency can file a petition at any point during the CPS Assessment process if any person obstructs or interferes with the CPS Assessment. The county must name the person as a respondent and request from the court an order directing that person to cease such obstruction or interference using forms:</td>
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<td>• Obstruction of or Interference with Juvenile Investigation (form AOC-J-120) and</td>
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<td>• Citing the U.S. Constitution and N.C. Gen. Stat. § 11G-95.21</td>
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<tr>
<td>• Providing evidence to support the petition</td>
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<tr>
<td>• Requesting the court to enter an order directing the person to cease such obstruction or interference</td>
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CPS Assessments: Family & Investigative Assessments: Invoking the Juvenile Court During the Assessment, Interference with a CPS Assessment

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<td>• Juvenile Summons and Notice of Hearing for Obstruction of or Interference with Juvenile Investigation (form AOC-J-121).</td>
<td>time. The Fourth Amendment to the US Constitution reads as follows, “The right of the people to be secure in their persons, houses, papers, and effects, against unreasonable searches and seizures, shall not be violated, and no warrants shall issue, but upon probable cause, supported by oath or affirmation, and particularly describing the place to be searched, and the persons or things to be seized.”</td>
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The person obstructing the CPS Assessment is not limited only to a parent or family member.

If the court finds that there was obstruction or interference, the court will issue an Ex Parte Order to Cease Obstruction of or Interference with Juvenile Investigation (form AOC-J-122).

The reporter’s identity remains confidential. However, the judge may order disclosure of the reporter during the hearing.

Despite a worker’s best efforts towards family centered practice, there will be instances where a county child welfare agency must file an obstruction or interference petition to proceed with the CPS Assessment required in the provision of child protective services. If the family or person interfering with or obstructing the assessment is still unwilling to cooperate, he or she should be informed (again, in a rational and non-threatening manner) of the law and the potential outcomes of the filing of a petition in court.
### Protocol – What you must do

Prior to the case decision the following must be completed:
- The North Carolina Family Risk Assessment of Abuse / Neglect (DSS-5230), and
- The North Carolina Family Assessment of Strengths and Needs (DSS-5229) must be completed during the CPS Assessment.

The **North Carolina Family Risk Assessment of Abuse / Neglect (DSS-5230)** and the **North Carolina Family Assessment of Strengths and Needs (DSS-5229)** must be completed based on all information obtained during the assessment (including information associated with a new report), including:
- Face-to-face interviews with and/or observation of parents, caregivers, other household members, and children,
- As well as pertinent collateral contacts.

Prior to or at the time of the case decision, the CPS Assessment case decision must be documented on the Case Decision Section in the Structured Documentation Instrument for CPS Assessments (DSS-5010) and must:
- Be a shared decision, including at a minimum, the county child welfare worker and the county child welfare supervisor or supervisor’s designee or staffing team;
- Be correct based on the legal definitions (explain the context of the abuse, neglect and/or dependency and how it relates to the child maltreatment);
- Document specific caretaker behavior that resulted in harm to the child(ren) or clarify the absence of risk of harm;
- Identify the effects of neglect, abuse and/or dependency on the child(ren);
- Identify the steps taken by the agency and/or parent to protect the child(ren);
- Identify the family strengths and needs;
- Document the need for continued involuntary services to address the identified safety issues and future risk of harm to the child(ren), and

### Guidance – How you should do it

County child welfare workers must still use their professional judgment and their social work skills when completing assessments and making decisions about the case. These tools do not take the place of complete documentation in the case record.

Determining whether a child is abused, neglected, and/or dependent requires careful assessment of all the information obtained during the CPS Assessment process. In making a case decision, it is important to assess not only that maltreatment has occurred, but the current safety issues, as well as any future risk of harm, and the need for protection.

**USE OF NC FAMILY RISK ASSESSMENT**
Items N2. and A2. on the Risk Assessment have ratings for families identified with a history of CPS reports. Occasionally a family comes to the attention of a county child welfare agency with a number reports within the past year or two. County child welfare agencies should consider additional questions to determine if there is pattern or other factors for assessment prior to a case decision.

Refer **INVESTIGATIVE ASSESSMENTS** or **FAMILY ASSESSMENTS** for more guidance regarding case decisions.
• Be made within 45 calendar days for a CPS Assessment, or there must be documentation to reflect the rationale to extend the CPS Assessment beyond the required timeframes.

Making the Case Decision
The North Carolina Case Decision form used must document answers to the following questions:
• Has the maltreatment occurred with frequency and/or is the maltreatment severe?
• Are there current safety issues? Would the child be unsafe in the home where the abuse, neglect or dependency occurred? (Note: If the child(ren) is separated from their parent or access is restricted and that separation/restriction continues to be necessary due to safety issues, then this question must be answered “yes”).
• Is the child at risk of future harm?
• Is the child in need of protection?

To make a case decision to substantiate or find services needed, the answer to one or more of the above questions must be “yes”. See Family Assessment for additional protocol and guidance regarding case decisions. See Investigative Assessment for additional protocol and guidance regarding RIL.

Only in unusual circumstances should a supervisor and staffing team change the indicated structured case decision. In those cases, the supervisor must complete the “Rationale for Case Decision/Disposition” to justify the change.

DOMESTIC VIOLENCE ASSESSMENTS
In domestic violence assessments, when completing the 4 questions that are a part of the case decision, the answers to the following questions must be included.
• Have the children intervened in the domestic violence? (whether the child was injured or not, their direct involvement presents extreme risk)
• Is there an established pattern of domestic violence that is chronic or severe?

DOMESTIC VIOLENCE ASSESSMENTS
For assessments with Allegations of Domestic Violence Every effort should be made to hold the perpetrator of domestic violence accountable for the violence, and to only hold the non-offending parent/adult victim accountable for steps that he or she did or did not take to protect the children.

The non-offending parent/adult victim’s response to offers of help and the support system to protect himself or herself and children should be included in the documentation. He or she should be held responsible for acting contrary to that help and support, and for failing to protect the children.

When domestic violence is the only factor in a family situation, it is not acceptable to substantiate abuse or neglect on the non-offending parent/adult victim solely for the actions of the perpetrator of domestic violence who caused the situation. If, however, the non-offending parent/adult victim has abused and/or neglected the child, such a case decision is appropriate. Only when a non-offending parent/adult victim is given the necessary offers of help and the support system to protect himself or herself and children, then acts contrary to that help and support, can he or she be substantiated on for failing to protect the children.

When making the decision of whether to hold the non-offending parent/adult victim responsible for the abuse, neglect, or dependency of their child(ren), the following factors should be considered:
• The non-offending parent/adult victim’s history of:
  o using domestic violence shelters or programs,
  o calling law enforcement,
  o utilizing court services for domestic violence protection orders,
CPS Assessments: Family & Investigative Assessments: Decision Making and Case Closure

- Have the children exhibited extreme emotional, behavioral, or been diagnosed with mental health condition such as PTSD, depression, anxiety, fear as a result of living with domestic violence?
- Has there been a coexistence of domestic violence and substance abuse that impedes the non-offending parent/adult victim’s ability to assess the level of danger in the home? (substance abuse may exacerbate the violence, increasing risk to the children and non-offending parent/adult victim),
- Has the non-offending parent/adult victim been threatened or injured in the presence of the children?
- Has the non-offending parent/adult victim been hospitalized for injuries resulting from domestic violence?

- making, or attempting to make, other arrangements to protect the child such as taking him or her to a relative’s or friend’s house,
- cooperation with past child welfare services and possible motives for lack of engagement including, but not limited to, a lack of trust in the child welfare system’s ability to keep her/him and/or the child(ren) safe,
- past efforts to protect the child(ren)

- The level of risk and safety factors for the child at the present time.

Case Decision: Substantiated or Services Needed
A referral to the North Carolina Infant Toddler Program (ITP) through the local Children’s Developmental Services Agency (CDSA) for any child under the age of three must occur within 72 hours of the assessment case decision when:
- Concerns are identified on the Family Strengths and Needs Assessment, Child Characteristics (S6), and
- There is a case decision of substantiated or a finding of Services Needed.

A family must be seen by a county child welfare worker within seven calendar days after substantiation or a finding of services needed in any report of abuse, neglect, and/or dependency to begin the transition from the CPS Assessment to CPS In-Home Services, unless there is documentation of diligent efforts made and/or rationale for the delay. See Initial Contact in In-Home Services. The only exception to this requirement is for a case finding of Substantiated and Closed.

At the time that the family is seen within seven calendar days, the Continuing Needs and Safety Requirements page must be provided to the family. This page must be signed by the parent/custodian to ensure understanding of the requirement to comply with the TPSA regarding any ongoing safety threats and/or to communicate the needs to be addressed through ongoing services.

For a case finding of Substantiated and Closed, contact with the family should occur within 7 days to explain the case decision unless this explanation was provided to the family prior to the case decision.

It is expected that the parent or caretaker sign the Continuing Needs and Safety Requirements. If a parent refuses to sign, the social worker should try to address the parent’s concerns and stress the need for working together to address the safety and risk for the child. The parent may verbally agree even if he or she refuses to sign the agreement. The social worker must note that the parent has agreed to comply if he or she refuses to sign. If the parent refuses to sign the agreement and verbally refuses to agree to its provisions, the agency must ensure that the child is safe whether the child is in his or her own home or in another type of arrangement.
CPS Assessments: Family & Investigative Assessments: Case Closure Notifications

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<td>The CPS Assessment case decision must be reported in writing to:</td>
<td>The county child welfare agency fulfills the requirement to notify the Central Registry by electronically submitting the Report to Central Registry / CPS Application (<strong>DSS- 5104</strong>) to the North Carolina Division of Social Services. For additional state policy and other information, see <a href="#">Chapter VIII: Section 1426 - Central Registry</a>.</td>
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<tr>
<td>• The caretakers or parents alleged to have abused, neglected, and/or rendered the child dependent;</td>
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<td>• The primary caretakers or parents with whom the child resided at the time the agency initiated the CPS Assessment;</td>
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<td>• Other parents as appropriate;</td>
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<td>• Any agency in which the court has vested legal custody;</td>
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<td>• The licensing authority as appropriate;</td>
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<td>• <strong>RIL</strong>, if appropriate</td>
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<td>• The Central Registry; and</td>
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<td>• All reporters, including those who reported the same allegations and incidents after the initial report was accepted.</td>
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Within five working days of the completion of the CPS Assessment, the reporter must be given written notice of the county child welfare agency's findings, and actions being taken, and the process for requesting a review by the district attorney of the county child welfare agency's decision not to file a juvenile petition. If the reporter waives the right to notice or is anonymous, this does not apply.

When a Temporary Safety Provider was utilized the county child welfare agency must communicate with the Temporary Safety Provider the status of the case and need for the Temporary Safety Provider.

Review by Prosecutor at Request of Reporter

Upon receipt of the county child welfare agency's decision not to petition the court, the person who made the report has five working days to notify the prosecutor to request a review of this decision. If a review is requested by the person who made the report, the county child welfare agency must send a copy of the report and a summary of the assessment to the prosecutor within three working days.
### CPS Assessments: Family & Investigative Assessments: Special Categories of CPS Assessments

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| **CPS ASSESSMENTS INVOLVING MORE THAN ONE COUNTY**  
Refer to [Chapter V - Jurisdiction in Child Welfare](#) for information on CPS Assessments involving more than one county. An open CPS Assessment must not be transferred to another county. | A form has been developed to collect this information entitled, “[Documentation of Malicious Reports](#)” The form is to be completed at the time that the county child welfare agency director and county child welfare supervisor meet to discuss the malicious report. The county child welfare worker assigned to the report does not participate in this conference. The form should contain no identifying information about the reporter or the family beyond the information that led the county child welfare agency to suspect that the report was made maliciously. The form should be easily accessible by the appropriate staff, but should never be placed in the child’s or family’s case record. |
| **CPS ASSESSMENTS OF OUT-OF-HOME PLACEMENTS**  
Refer to [Chapter V - Jurisdiction in Child Welfare](#) for information on CPS Assessments involving reports of abuse and/or neglect in out-of-home placements. | |
| **MALICIOUS CPS REPORTS**  
A malicious report is one in which the reporter knowingly and willfully makes untrue statements that the juvenile is abused, neglected, and/or dependent. At the completion of the CPS Assessment, if the county child welfare worker states to their county child welfare supervisor that the report was a malicious report, the county child welfare supervisor brings this to the attention of the county child welfare agency director.  
In response to a recommendation from the House Interim Committee on Child Abuse and Neglect, Foster Care and Adoptions, the Division in collaboration with the North Carolina Association of County Directors of Social Services has developed procedures for documenting and tracking malicious reports throughout the year. | |
| **MEDICAL NEGLECT OF INFANTS WITH LIFE THREATENING CONDITIONS**  
[Chapter VIII: Section 1438](#) – Investigative Assessments of Medical Neglect of Infants with Life Threatening Conditions. | |
| **SUBSTANCE AFFECTED INFANTS**  
[Chapter VIII: Section 1439 – Substance Affected Infants](#) | |
| **SAFE SURRENDER**  
The CPS Assessment of a safely surrendered infant does not alter any of the requirements to complete a CPS Assessment.  
Initiation on Safe Surrender cases: The assigned county child welfare agency must: | **SAFE SURRENDER**  
In cases where a safe surrender occurs, in which there are simultaneous allegations of abuse or neglect involving other children in the home, only one DSS-5104 with one form number should be completed. For the child involved in the safe surrender, the type reported and type found should be dependency, and the maltreatment type found should be safe surrender. All other
• Assume custody of the infant. File a petition alleging dependency.
  o If the infant has not received medical attention, arrange this immediately.
    Request that a physician evaluate the child, estimate a birth date and complete
    a birth certificate with a name, “Safe County Name Surrender”. If an original
    birth certificate is later found, the safe surrender version will be destroyed.
  o Arrange for placement of the infant.

• Make reasonable efforts to locate the parents.
  o Initiate contact with law enforcement and request a search of the North Carolina
    Center for Missing Persons and other national and state resources to determine
    whether the infant is a missing child.
  o If the parent is identified:
    • Efforts must be made to counsel the parent about the relinquishment of the
      child for the purpose of adoption (DSS-1804) and the benefits of completing
      the relinquishment on behalf of the surrendered child. If the biological
      parent signs the relinquishment forms, DSS does not have to adjudicate or
      pursue TPR to clear the infant for adoption from that parent. See: Chapter
      VI: Adoption Services-Specifically Section 1302 Legal Guides.
    • Inquiries must be made as to the medical history of the mother and father.
    • A thorough CPS Assessment must be conducted, including an assessment
      of the safety of other children known to be in the family.

In situations where the identity of the parent(s) are known by any individual involved, the
identity must be included in the assessment. An individual who safely surrenders an
infant is free from criminal and civil liability; however, this does not change the
requirement to make reasonable efforts to locate the parents, to prevent placement, and
to reunify the family after placement.

The parent does not have to provide information as to their identity.

Case Decision for Safe Surrender Cases
All required activities and Structured Decision-Making forms must be completed prior to
making a case decision. Absent additional allegations, the case decision must reflect a
finding of dependency.

There must be documentation in the file indicating that the identity of the parent(s) is
unknown as this was a safe surrender.
CPS Assessments: Family & Investigative Assessments: MRS Requirements

<table>
<thead>
<tr>
<th>Adherence with the strategies of Multiple Response System (MRS) impacts CPS Assessments through:</th>
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<tbody>
<tr>
<td>• The ability to assign CPS Assessments to one of two tracks:</td>
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<tr>
<td>o The Family Assessment, and</td>
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<tr>
<td>o The Investigative Assessment.</td>
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<tr>
<td>• The requirement for collaboration between CPS and:</td>
</tr>
<tr>
<td>o WorkFirst, and</td>
</tr>
<tr>
<td>o Law Enforcement (LE).</td>
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</tbody>
</table>

The purpose of the two assessment tracks is to:

- Protect the safety of children in the most severe cases by not treating all reports in the same way, and missing some clear need for immediate action;
- Engage some families in services that could enable them to better parent their children;
- Not overlook vital information about the strengths of the family, the supports they have, and their motivation to change; and
- Better serve many of the families reported to CPS in ways that focus more on helping rather than "punishing" them.

Family-centered practice and the concept of involving parents in decision making throughout service provision is applicable to both Family Assessments and Investigative Assessments. County child welfare agency worker must take the time to engage the family, to recognize the family’s strengths, to pay attention to the words used when interacting with families, and to act as a change agent by giving the family choices that guide the family with planning and transitions.

Collaboration with Law Enforcement on Investigative Assessments supports:

- Achieving joint efforts in interviewing and ensuring safety of families and children;
- Ensuring an effective working relationship;
- Holding perpetrators accountable for harming children;
- Reducing the number of interviews children experience, preventing and reducing re-traumatization; and
- Enhancing collection of evidence for criminal prosecution.

Collaboration with WorkFirst on all CPS Assessments will impact families through:

- Reducing the number of times family members need to repeat the same information;
- Involving Work First as a preventative effort;
- Reducing the number of children needing CPS and Permanency Planning services; and
- Preventing recidivism of abuse, neglect and dependency by providing ongoing services through Work First.
Definition of Family Assessment and Investigative Assessment

FAMILY ASSESSMENT
The family assessment track is a response to selected reports of child neglect and dependency using a family-centered approach that is protection and prevention oriented and that evaluates the strengths and needs of the juvenile’s family, as well as the condition of the juvenile. The family assessment track is based on family support principles and offers a much less adversarial approach to a CPS report. The family assessment track focuses more on establishing a partnership with the family, and less on the authoritarian approach. The goal of this track is to develop true partnerships to ensure safety of the child.

INVESTIGATIVE ASSESSMENT
The investigative assessment track is a response to reports of child abuse and selected reports of child neglect and dependency using a formal information gathering process to determine whether a juvenile is abused, neglected, or dependent.

Protocol – What you must do

WHEN TO USE EACH APPROACH,
See Intake Policy for more information.

The following reports must be taken as an investigative assessment:
1. All reports of abuse;
2. Special types of neglect reports involving the following:
   o A child fatality when there are surviving children in the family;
   o A child in the custody of a county child welfare agency residing in a family foster home or residential facility;
   o A child taken into protective custody by a physician or law enforcement pursuant to N.C.G.S. § 7B-308 & N.C.G.S. § 7B-500;
   o The medical neglect of disabled infants with life threatening condition, pursuant to Public Law 98-457;
   o A child hospitalized (admitted to hospital) due to suspected abuse and/or neglect;
   o Abandonment (excludes Safe Surrender);
   o The suspected or confirmed presence of a methamphetamine lab where children are exposed; and

Guidance – How to do it

The county child welfare agency may assign any valid CPS report (abuse, neglect, and/or dependency) to the investigative assessment track, if deemed necessary to ensure the safety of the child.
### CPS Assessments: Family & Investigative Assessments: The Family & Investigative Assessment Approach

<table>
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<tr>
<th>A child less than a year old who has been shaken or subjected to spanking, hitting, or another form of corporal punishment.</th>
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<tbody>
<tr>
<td>An unharmed infant less than 7 days old who has been safely surrendered under the Abandoned Infants-Infant Homicide Act / Safe Surrender.</td>
</tr>
</tbody>
</table>

The county child welfare agency may assign any valid CPS report alleging neglect and/or dependency as a family assessment except for certain specific neglect cases noted above.

#### SWITCHING APPROACH/TRACK

All decisions to change assessment response tracks must be done with supervisory approval. Documentation in the record must clearly show why such a decision was made to switch approaches and how it helped ensure the safety of the child.

<table>
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<tr>
<th>The key point to remember is that each case should be assessed using the response track that best ensures the child's safety, permanence, and well-being.</th>
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<tbody>
<tr>
<td>A CPS Investigative Assessment may be switched to a family assessment response if the report could have been assigned as such if the true situation was known at CPS Intake.</td>
</tr>
</tbody>
</table>

Any report initially initiated using a Family Assessment response may be switched to an investigative assessment if the report should have been assigned as such if the true situation was known at CPS Intake.

Any instance in which the child's safety cannot be ensured through the family assessment response should be staffed with the supervisor for consideration of switching to the investigative approach. This may be due to lack of parental cooperation or changing circumstances. Switching tracks during a CPS Assessment should not be done frequently or without a thorough discussion of the case between the county child welfare worker and the county child welfare supervisor.

There may be instances during a Family Assessment that require the agency to file a petition with the Juvenile Court to protect the child. The agency is not required to switch to an Investigative Assessment in these cases. A finding of Services Needed would be appropriate to document the safety and risk issues, and how those safety and risk issues prevent the child from remaining safely in the home.
## Family Assessment Approach

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<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
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<tr>
<td><strong>Initial contact:</strong> The County child welfare worker must initiate face-to-face individual interviews with each child within 72 hours or sooner, based on the determination of the response timeframe. The county child welfare agency must decide with whom to make the initial contact based on the allegations and the situation.</td>
<td>The Family Assessment allows much latitude in how assessments are initiated and completed. In using a family-centered approach, the first face-to-face contact on most cases will be with all family members together, followed by individual contact with each child, separate from the parent, caretaker, and/or perpetrator. However, each case should be addressed as unique and distinctive, and the approach should be adjusted to the needs of each family.</td>
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<tr>
<td>The county child welfare agency must contact the parent/caretaker to schedule the initial family contact.</td>
<td>If the county child welfare agency is unable to reach the parent/caretaker to schedule the initial family contact, initiation with the child must still occur within designated timeframe. Initiation with the child(ren) can occur in this situation without scheduling the contact and without the need to switch assessment track/approach.</td>
</tr>
<tr>
<td>When the County child welfare worker is unable to initiate the assessment within the prescribed timeframe, there must be documentation in the case record describing the diligent efforts made and reasons why they were unsuccessful.</td>
<td>Attention should be paid to verbal and non-verbal cues from the child that might lead the county child welfare worker to feel that this child needs to be interviewed in a different setting as well. Each child should be interviewed in the way that will best provide safety and build rapport with the family for future services. As always safety is the first concern, while keeping in mind the goal of respecting and partnering with parents at all times.</td>
</tr>
<tr>
<td>For DV cases, refer to <a href="#">DV initiation protocol</a>.</td>
<td>If the CPS report alleges that the children have marks/injuries the county child welfare worker should observe the marks as a part of the Family Assessment. To remain as family centered as possible and ensure the parents are engaged in the Family Assessment, this should be done in the presence of the parents if the safety of the child is not compromised as a result.</td>
</tr>
</tbody>
</table>
| The Family Risk Assessment of Abuse/Neglect and Family Assessment of Strengths and Needs tools should be introduced to the family during the initial meeting while explaining the Family Assessment process. This will allow the family to be fully informed about the Family Assessment process and what...
Family Assessment Case Findings:
- Services Needed - This finding is appropriate for all CPS reports of neglect and dependency assigned to the Family Assessment response, where the safety issues and future risk of harm is so great that the agency must provide involuntary services to ensure the safety of the child. The finding of Services needed must be made, and the county child welfare agency must continue to provide involuntary CPS In-Home Services in every case the agency believes:
  - The family must be involved with services (of any type, provided by any agency or individual) in order for the child to safely remain in the home;
  - The child would not be safe if the family ever becomes non-compliant with services.

A finding of “Services Needed” must be made if the answer is yes to one or more of the questions on the North Carolina Case Decision Summary/Initial Case Plan concerning frequency and severity of:
- Maltreatment;
- Current safety issues;
- Risk of future harm; and
- Child in need of protective services

Family Assessment Case Decision-Making
While the family assessment approach is family-centered, the case decision is a decision that rests with the county child welfare agency. The family does not have equal decision-making power.

In determining severity of maltreatment, consideration should be given to the degree of harm, level of severity, extent of injury, egregiousness, gravity and the seriousness of maltreatment. In determining current safety, consider safety issues that exist at the time of making the case decision.

Findings of Services Needed should be made for situations in which the safety and risk of harm is so great that the agency cannot walk away from this family without either providing services, or monitoring those provided by another agency or provider. A finding of Services Needed is appropriate if the answer to the following question is yes: Would the child be at risk of removal if the family discontinued a service identified during the CPS Assessment as necessary to address safety or risk?

In Oct., 2012 the Federal government implemented changes to define eligibility for IV-E funding as those children who are
There must be documentation to support the answers included on the case decision tool.

Any case in which there is a finding of Services Needed must meet the criteria for opening 215, CPS In-Home Services, which includes that “without effective preventive services, the child is at risk of being placed in foster care.”

If the decision of the North Carolina Safety Assessment is “Safe,” and the findings of the North Carolina Family Risk Assessment of Abuse/Neglect and the North Carolina Family Assessment of Strengths and Needs are both “Low”, then the case would not be found “services needed,” unless there are unusual circumstances. In those cases, the supervisor must complete the “Rationale for Case Decision/Disposition” to justify the change.

- Services Recommended - This finding is appropriate for all CPS reports of neglect and dependency assigned to the Family Assessment response, where the safety of a child is not an issue and future risk of harm is not an issue. Some situations in which this finding would be appropriate include, but are not limited to the following:
  - When well-being (not safety related) needs were identified during the assessment and the family was engaged in services (either within the agency or in the community), but at no time during the assessment did the potential risk of child maltreatment approach the level that involuntary services would be required.
  - When at the culmination of the assessment, the risk level is “Low” and there are no identified safety issues, however some well-being issues have been identified, the county child welfare worker should recommend and offer assistance in linking the family to services that ameliorate the well-being issues. These services would be voluntary in nature.

- Some situations where this finding would not be appropriate include, but are not limited to the following:

  "candidates for removal from their homes and placement in foster care.” The two criteria must be met:

1. The services to be provided during In-Home Services with a decision of Services Needed are ones that will constitute reasonable efforts to prevent removal. In this context, Imminent Risk = Serious Risk = Per Administration of Children and Families, ACF, this is described as: There is serious risk of removal and the county is either pursuing removal or providing services to prevent removal. Without these reasonable efforts to prevent removal, a child may enter county child welfare custody (within the next few weeks to months, not necessarily hours or days), and

2. The requirements for “candidacy” must be met by one of the 3 following:
   - A defined case plan that is a written document developed jointly with the parents or guardian of the child that includes a description of the services offered and provided, and notes that county child welfare custody is the planned arrangement for the child if risks is not sufficiently reduced (met through In-Home Family Services Agreement).
   - Eligibility determination form (DSS-5120)
   - Evidence of court proceedings in relation to the removal of the child from the home.

For additional guidance, see “What Constitutes Candidacy for Foster Care?” Online webinar accessed from the DHHS Training.

The county child welfare worker should discuss the outcome of the Family Assessment with the family face-to-face after the case finding of services needed has been made. The family should also be notified in writing within seven working days.

Any recommended services, referred or provided, during the assessment should be documented along with the response of the family. Any recommendations made to the family should be explained thoroughly in a face-to-face contact, and the family should be given the option to accept or reject service recommendations. This face-to-face explanation may take place
CPS Assessments: Family & Investigative Assessments: Family Assessment Approach

- If the agency makes recommendations that, if not completed, would lead to the agency accepting a new report, or would lead the agency to believe that the risk of safety or harm to the child would be impending then the finding should be Services Needed.

- If at some point during the assessment the risk level would have been “Moderate” or higher and the family may have been appropriate for In-Home Services but services provided during the assessment brought the risk to a lower level, allowing the case to be closed. In this case, the most appropriate finding would be Services Provided, Protective Services No Longer Needed. The agency must document this finding for any service referral deemed appropriate to meet the family’s non-safety connected need.

If all the answers to the questions on the North Carolina Case Decision Summary are “no”, then the finding will be either “Services Provided, Protective Services No Longer Needed”, “Services Recommended” or “Services Not Recommended”.

- Services Provided, Protective Services No Longer Needed This finding is appropriate for all CPS reports of neglect and dependency assigned to the Family Assessment response, in which the safety of a child and future risk of harm were at some point in the assessment high enough to require involuntary services; and the successful provision of services during the assessment has mitigated the risk to a level in which involuntary services are no longer necessary to ensure the child’s safety.

- Services Not Recommended - This finding is appropriate for all CPS reports of neglect and dependency assigned to the Family Assessment response, in which not only is the safety of a child not an issue and there is no concern for the future risk of harm to the child; but the family also has no need for other non-safety related services.

For all Family Assessments, the case finding will be reported to the Central Registry with no perpetrator information entered.

during the assessment. However, in the rare instance that service recommendations are made at the time of case decision and have not been previously explained to the family, a visit within seven calendar days of the case decision must occur to thoroughly explain the new recommended service. The family still has the option to accept this new service.

If the initial assessment indicates a risk level of “Moderate” or higher, and the family receives services which lead to a reduction in the risk level at the close of the assessment, such that involuntary services are no longer needed, the finding should be Services Provided, Protective Services No Longer Needed. However, if the risk level was never “Moderate” or higher and non-safety related referrals are made the finding should be Services Recommended.
### CPS Assessments: Family & Investigative Assessments: Investigative Assessment Approach

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<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
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<tr>
<td><strong>Initiation</strong>&lt;br&gt;The interviewing sequence in an investigative assessment is:&lt;br&gt;- All children living in the home;&lt;br&gt;- The non-perpetrating parent;&lt;br&gt;- The perpetrator; and then&lt;br&gt;- Collaterals</td>
<td>Efforts should be made to establish rapport with the child and to help the child feel comfortable in disclosing information about himself or herself and family.</td>
</tr>
</tbody>
</table>

There are times when this order may not be feasible or the most appropriate. The county child welfare agency must consider the individuals and allegations involved in each situation and must conduct the interviews in the order that is least likely to increase the risk of harm to the alleged victim child or other children in the home.

The child must be interviewed:<br>- Individually; and<br>- Under no circumstances in the presence of the person or persons alleged to have caused or allowed abuse and/or neglect.

For DV cases, refer to [DV initiation protocol](#).

<table>
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<th>Coordination between law enforcement agencies and Child Protective Services for investigative assessments:</th>
<th>County child welfare workers should have another adult present when a full body assessment is necessary.</th>
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<tr>
<td>- Achieves joint efforts in interviewing and ensuring safety of families and children;</td>
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<tr>
<td>- Reduces the number of interviews children experience;</td>
<td>- Reduces the number of interviews children experience;</td>
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<tr>
<td>- Prevents or reduces the repeat traumatization of children;</td>
<td>- Prevents or reduces the repeat traumatization of children;</td>
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<tr>
<td>- Holds perpetrators accountable for harming children;</td>
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<tr>
<td>- Ensures an effective working relationship; and</td>
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</tr>
<tr>
<td>- Enhances the evidence process for criminal prosecution.</td>
<td>- Enhances the evidence process for criminal prosecution.</td>
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As it is appropriate, county child welfare agencies should also collaborate with their child advocacy centers. Doing so supports the identification and provision of needed services to children and their families. Such communication and collaboration also strengthens the county criminal system’s capacity to achieve timely arrests and prosecutions of those who intentionally harm children.

During a CPS Assessment, information received may reveal that the perpetrator is not a parent or caretaker. It is still important to interview the alleged perpetrator during the CPS Assessment, if possible. The alleged perpetrator may have information that is vital in helping to determine if the allegation is true. If other evidence indicates the harm was caused or allowed by the parent or caretaker, an interview with the alleged perpetrator may give insight into whether the parents/caretaker provided adequate care and supervision.
### CASE-DECISION MAKING

The findings in an investigative assessment must be either substantiated or unsubstantiated.

To make a case decision to substantiate, the answer to one or more of the following questions must be “yes” to one of the 4 questions on the case decision summary. See Case Decision.

When a report of neglect is being completed using the investigative assessment track, there are two points to consider when deciding on the case finding.

- The first decision is to determine if the case decision is to be substantiate.
- The second decision for substantiations of neglect is to determine if the neglect is “serious.” A definition for “serious neglect,” as well as, other information regarding the Responsible Individuals List can be found in Chapter VIII: Section 1427.

When the Identity of the Perpetrator is Unknown

There are instances when a child has been abused and/or neglected, but the identity of the perpetrator cannot be determined. In such situations, there must be a case decision that ensures the on-going safety of the child and data entries must reflect that the perpetrator is “unknown.”

### RIL

For case decisions of abuse or serious neglect, the case decision notice to the perpetrator must contain the following (in addition to the Case Closure Notifications):

- A statement, in accordance with N.C.G.S. § 7B-320(c)(3), informing the individual that unless the individual petitions for a judicial review within 15 calendar days, their name will be placed on the RIL, and
- The Judicial Review Petition but no instructions on how to file the petition, and

It is permissible for a county child welfare worker other than the county child welfare worker who conducted the CPS Assessment to deliver the case decision / RIL placement notice. In addition to documentation in the file, when possible, it is recommended that the notice include an acknowledgement by the alleged responsible individual that he or she received the case decision / RIL placement notice and the date received.

See Chapter VIII: Section 1427 for additional RIL information.
• That the North Carolina Department of Health and Human Services may provide information from that list to child caring institutions, child placing agencies, group home facilities, and other providers of foster care, child care, or adoption services (including Guardian ad Litem) that need to determine the fitness of individuals to care for or adopt children as permitted by N.C.G.S. § 7B-311.

The county child welfare worker must make face-to-face contact with the alleged responsible individual within five business days of the case decision to explain the reason for the substantiation and to provide written notice of the potential for their name to be placed on the RIL.

If it is not possible to make face-to-face contact with the alleged responsible individual to deliver the written notice within those five business days, the county child welfare worker must make diligent and persistent efforts to make contact. However, if the county child welfare worker is unsuccessful in contacting the alleged responsible individual to provide personal written notice within 15 calendar days of the case decision, the notice must be sent by registered or certified mail, return receipt requested, and addressed to the individual at the individual’s last known address.
Protocol – What you must do

Documentation of the CPS Assessment must:

- The Structured Documentation Instrument for CPS Assessments DSS-5010 must be used to:
  - Describe actions taken (contacts made) and services provided;
  - Include a description of the ongoing assessment of risk, safety, and health or well-being of the child;
  - Support the rationale for the involvement of the county child welfare agency and service delivery on an ongoing basis;
  - The basis for what the county child welfare agency considers sufficient contact:
    - Describe all diligent efforts to make contacts, if not achieved;
    - Describe the family’s progress or barriers toward addressing safety threats or risk;
    - Include supervisor/child welfare worker and group/unit case conferences, including any two-level decisions made;
    - Provide justification for any missed policy or protocol requirements (missed timeframes, etc.);
    - Document any new allegations and actions taken;
- Any other efforts by the county child welfare agency to achieve child safety and protection, family preservation, and prevention of future abuse, neglect and/or dependency;
- Include completion of the North Carolina Safety Assessment (DSS-5231);
- Include completion of the North Carolina Family Risk Assessment of Abuse / Neglect (DSS-5230);
- Include completion of the North Carolina Family Assessment of Strengths and Needs (DSS-5229); and
- Be current within seven calendar days.

The following information must be included for each documentation entry regarding a contact or attempted contact:

- Date of each contact and name of each person contacted;
- Purpose of the contact;
- Significant family/child/parent issues;
- Type of contact (phone, face to face, home visit, etc.) and location for all face to face contacts;
- Individual interview with each child present;
- Observations regarding each person and the environment for face to face contacts; and/or
- Diligent efforts to make a contact and date of the efforts, what were efforts to make this contact (telephone call, home visit but no one home, etc.).

When a child(ren) must be removed from the home (See Filing a Petition), the case record must document that the county child welfare agency completed the following.

- Efforts were made to protect the child in their own home and to prevent out-of-home placement.
- Relatives were assessed for willingness and ability to care for the child(ren) and whether such placement would be in the child’s best interests.
- Compliance with the following requirements occurred when temporary custody is initiated:
  - That the child would have been endangered if the county child welfare worker first had to obtain a court order;
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<td>- That the child was returned to the parents or persons from which the child was removed unless a petition or motion for review was filed and an order for secure or non-secure custody was obtained; and</td>
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<tr>
<td>- That the parents were notified that they could be with the child(ren) while the court determined the need for secure or non-secure custody.</td>
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<tr>
<td>- The juvenile petition alleges the conditions that required court jurisdiction.</td>
</tr>
<tr>
<td>- The non-secure custody order gives specific sanction to a placement other than a licensed provider; that the juvenile petition was filed because the child(ren) was at imminent risk; and that a hearing was held within seven calendar days.</td>
</tr>
<tr>
<td>- If a child is taken into agency custody as a result of an adjudication of undisciplined behavior or delinquency, the required language is in the court order or if appropriate language is not included, that the agency filed a motion to have such language included in the court order.</td>
</tr>
</tbody>
</table>

The county child welfare agency must submit a report of alleged abuse, neglect, and/or dependency cases or child fatalities that are the result of alleged maltreatment to the Central Registry. The county child welfare agency fulfills this requirement by submitting one Report to Central Registry / CPS Application (DSS-5104) to the North Carolina Division of Social Services for each victim child. Only one DSS-5104 per child is submitted (all reports open during an assessment are compiled into one case decision) for an assessment. All services provided to or referred for the family, as the result of the CPS Assessment, are to be documented on the DSS-5104 in Field 24. This documents service needs that began and continued for the child between the date of the CPS report and up to 90 calendar days after the case decision.

Case documentation must include completion and processing of a DSS-5027 (to be processed at the initiation and closure of every assessment) for every identified victim child.

See Cross Function topic of Documentation for definitions and additional protocol and guidance.

END OF CPS ASSESSMENTS POLICY, PROTOCOL, & GUIDANCE SECTION
In-Home Services: Purpose
The primary goal of the CPS In-Home Services is to support families in safely maintaining their child(ren) in their home by eliminating identified safety concerns and/or reducing or eliminating risk of maltreatment. In Home services are mandatory services provided when there is an identified safety or risk concern(s). This is achieved, using the System of Care principles, through engagement of the family, the support system, and other service providers to attain needed changes. When the court is involved in a case, the court may order the parent or caretaker to participate in services or to complete certain actions on behalf of the child (N.C.G.S. § 7B-904). If the child cannot be maintained safely in the home, then the agency must seek juvenile court intervention.

CPS In-Home Services provides interventions and services to families that have been substantiated for abuse, neglect and/or dependency, or with a finding of Services Needed. CPS In-Home Services are legally mandated and are provided to:

- Address child safety and protection;
- Preserve families (maintain child(ren) safely in their home); and
- Prevent further abuse or neglect by strengthening the family’s capacity to protect and nurture its children.

CPS In-Home Services:

- Provides the most intensive services and contacts to families with the greatest needs, while those with fewer needs receive less intensive services/contacts;
- Delivers services within the context of the family’s own community culture;
- Enables county child welfare workers to better identify risks in their work with families;
- Engages children, youth and families in the planning process while producing better outcomes of safety, permanence, and well-being for children; and
- Encourages families to develop a support network and how this support network can assist them in planning for coping with future challenges.
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## In-Home Services: Policy and Legal Basis

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<thead>
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<th>LEGAL BASIS</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPS In-Home Services are legally mandated for:</td>
<td>The director of each county Child Welfare Agency is required by law to establish protective services for children alleged to be abused, neglected, or dependent.</td>
</tr>
<tr>
<td>- Families who have had a:</td>
<td>N.C.G.S. § 7B-300 states:</td>
</tr>
<tr>
<td>o Substantiation of abuse, neglect, and/or dependency, or</td>
<td>“The director of the department of social services in each county of the State shall establish protective services for juveniles alleged to be abused, neglected, or dependent. Protective services shall include the screening of reports, the performance of an assessment using either a family assessment response or an investigative assessment response, casework, or other counseling services to parents, guardians, or other caretakers as provided by the director to help the parents, guardians, or other caretakers and the court to prevent abuse or neglect, to improve the quality of child care, to be more adequate parents, guardians, or caretakers, and to preserve and stabilize family life.”</td>
</tr>
<tr>
<td>o Finding of Services Needed, and</td>
<td></td>
</tr>
<tr>
<td>- Child(ren) remaining in the home:</td>
<td>10A NCAC 70A .0107 (d) When Abuse, Neglect or Dependency is Found states:</td>
</tr>
<tr>
<td>o While the parents/caretakers have custody, or</td>
<td>“In all cases in which abuse, neglect, or dependency is found, the county director shall determine whether protective services are needed and, if so, shall develop, implement, and oversee an intervention plan to ensure that there is adequate care for the victim child or children. The case plan shall:</td>
</tr>
<tr>
<td>o When the county child welfare agency has filed a juvenile petition (but not a nonsecure custody order) and the child(ren) has not been removed from the home, and</td>
<td></td>
</tr>
<tr>
<td>- Child(ren) who, in the absence of these services, would be candidate(s) for county child welfare custody.</td>
<td>(1) be based on the findings of the structured decision-making assessments;</td>
</tr>
<tr>
<td></td>
<td>(2) contain goals representing the desired outcome toward which all case activities shall be directed;</td>
</tr>
<tr>
<td>During the delivery of CPS In-Home Services the county child welfare agency must provide, arrange for, and coordinate interventions and services that focus on:</td>
<td>(3) contain objectives that:</td>
</tr>
<tr>
<td>- Child safety and protection;</td>
<td>(A) describe specific desired outcomes;</td>
</tr>
<tr>
<td>- Family preservation; and</td>
<td>(B) are measurable;</td>
</tr>
<tr>
<td>- The prevention of further abuse or neglect.</td>
<td>(C) identify necessary behavior changes;</td>
</tr>
<tr>
<td>CPS In-Home Services initiate the date of the assessment case decision. All the information from the CPS Assessment must be provided to the In-Home Services worker to include:</td>
<td>(D) are based on an assessment of the specific needs of the child or children and family;</td>
</tr>
<tr>
<td>- The Decision-Making Tools;</td>
<td>(E) are time-limited; and</td>
</tr>
<tr>
<td>- Any supporting information gathered during the assessment; and</td>
<td>(F) are mutually accepted by the county director and the client.</td>
</tr>
<tr>
<td>- The CPS Assessment documentation.</td>
<td>(4) specify all the activities needed to achieve each stated objective;</td>
</tr>
<tr>
<td>In-Home Services: Policy and Legal Basis</td>
<td></td>
</tr>
<tr>
<td>----------------------------------------</td>
<td></td>
</tr>
<tr>
<td>(5) have stated consequences that will result from either successfully following the plan or not meeting the goals and objectives specified in the plan; and</td>
<td></td>
</tr>
<tr>
<td>(6) shall include petitioning for the removal of the child or children from the home and placing the child or children in appropriate care when protection cannot be initiated or continued in the child's or children's own home.”</td>
<td></td>
</tr>
</tbody>
</table>
# In-Home Services: Timeframes

<table>
<thead>
<tr>
<th>Date of Case Decision</th>
<th>In-Home Services case begins</th>
</tr>
</thead>
<tbody>
<tr>
<td>Within 7 days of case decision</td>
<td>Face to face contact with family</td>
</tr>
<tr>
<td>Within 30 days of case decision</td>
<td>CFT for development of Family Services Agreement and integration of TPSA, if applicable</td>
</tr>
<tr>
<td>Within 4 months of case decision (90 days after development of initial Family Services Agreement/CFT) &amp; every 90 days thereafter</td>
<td>CFT to review/update the Family Services Agreement (including child well-being)</td>
</tr>
<tr>
<td>Risk Reassessment</td>
<td></td>
</tr>
<tr>
<td>Strengths and Needs Assessment</td>
<td></td>
</tr>
<tr>
<td>Within 6 months of development of the Family Services Agreement</td>
<td>Case review regarding family progress and county child welfare agency determination about status of In-Home Services case</td>
</tr>
<tr>
<td>Frequency of contacts with parent(s), child(ren), home visits, and collaterals</td>
<td>See Required Contact Section</td>
</tr>
<tr>
<td>Monthly attempts to locate absent parent(s), ICWA and Mexican Heritage inquiry</td>
<td></td>
</tr>
<tr>
<td>Documentation</td>
<td>Current within 7 days of any case activity or action</td>
</tr>
</tbody>
</table>

## When case involves a SAFETY PROVIDER

| Prior to placement of child with safety provider | Meet with family to develop a safety plan (hold CFT) |
| Complete background checks for all household members 16 years or older |
| Complete Initial Safety Provider Assessment (& approved by supervisor) |
| Within 30 days | Complete Comprehensive Provider Assessment (& approved by supervisor) in 30 days of: |
| Case decision (if placed during assessment) or |
| Placement of child(ren) with safety provider (if placed during In-Home) |
| Within 90 days of date when use of Safety Provider initiated | Case review regarding safety issue and continued need for safety provider, whenever possible at the time of the Family Services Agreement review |
| Within 6 months of date when use of Safety Provider initiated | Case review regarding safety issue and continued need for safety provider and/or filing of petition if safety issue has not been resolved, in a CFT meeting |

## If/When county files petition for custody

| Prior to filing petition | Hold a CFT. See Cross Function topic: File a Petition & Preparing Child(ren) and Parents |
| Prior to placing child(ren) out of the home | Locate placement in child(ren)’s best interest, consider relatives/kin for placement (complete Initial Provider Assessment), ICWA considerations, Mexican Heritage inquiry, address educational stability (Best Interest Determination) |
| At time of child(ren) placement | Provide to placement provider nonsecure custody order, all available child information & county child welfare agency contact information |
| Within 3 calendar days following out-of-home placement | Face to face visit with child(ren) |
## In-Home Services: Timeframes

<table>
<thead>
<tr>
<th>Event</th>
<th>Timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Within 7 calendar days of custody</td>
<td>• Child(ren) medical exam occurs (Child Health Status completed) &amp; Educational Stability addressed (Child Educational Status or Best Interest Determination form completed &amp; provided to placement)</td>
</tr>
</tbody>
</table>

### If/When county files petition (continued)

<table>
<thead>
<tr>
<th>Event</th>
<th>Timeframe</th>
</tr>
</thead>
</table>
| Within 7 calendar days of custody (continued) | • Visitation of child(ren) with parent(s) and siblings,  
• Face to face contact with the placement provider (all providers) in the provider’s home |
| Within 14 calendar days of custody | • Family Time and Contact Plan developed jointly with parent(s), Family Time and Contact Plan developed for sibling visits, Shared Parenting Meeting |

### Case Closure

<table>
<thead>
<tr>
<th>Event</th>
<th>Timeframe</th>
</tr>
</thead>
</table>
| Within 30 days prior to case closure | • Risk Reassessment & Strengths and Needs Assessment  
• Contact with collateral contacts regarding closure |
| Within 14 days prior to case closure | • Face to face contact with family to confirm safety and risk level in home, confirm family’s capacity to maintain child safety, & communicate with the family about closure |
| Within 7 days after case closure | • Closing letter to family & Complete all documentation, closing forms, and case file |
Child Protective Services – In Home Services

**Face to Face with Child(ren) & Parents/Caretakers within 7 days**: Discuss family needs, Engage family, Discuss CFT meeting

**Family ASSESSMENT & Engagement**

**DEVELOP Family Services Agreement within 30 days of Case Decision**

**SERVICES PROVISION & MONITORING**

- **Has safety & risk been addressed?**
  - **NO**
  - **YES**
    - **Case Closed. Possible referral to Prevention Services. Closing letter to Family.**

- **Is family failing to make progress, or has In-Home been open for greater than 6 months?**
  - **NO**
  - **YES**
    - **CFT: Is custody required to protect child?**
      - **NO**
      - **YES**

**Collaborate with family to modify FSA and/or services.**

**If custody required to protect child:**

- **File Petition & Transfer to Permanency Planning**

**DEVELOP the FSA in a CFT meeting which:**

- Identifies and builds upon the family’s strengths,
- Identifies the behaviors and/or conditions that put the child at risk of harm,
- Describes the desired behavior and/or condition, expected changes and what it will look like when the plan has been accomplished,
- Addresses child well-being needs,
- Identifies services to address child well-being needs,
- Establishes responsibility for the identified tasks, and
- Establishes a timeframe.

**ASSESSMENT which:**

- Builds upon the information obtained during the CPS Assessment,
- Assesses the concerns behind the presenting safety or risk issue,
- Expands on the family’s and family member’s strengths,
- Assesses any history of trauma,
- Increases knowledge regarding family’s and family member’s well-being needs (parents & children), and
- Engages family in the process, including preparation for the CFT meeting.

**SERVICES PROVISION & MONITORING, to include:**

- Ongoing monitoring of safety, risk of maltreatment and well-being,
- Ongoing contact with child(ren and parents/caretakers) (frequency determined by risk),
- Home visits, school visits, etc.,
- Refer for or Provide services to address identified needs,
- Contacts with service providers and extended family members as needed,
- Staffing with supervisor, and
- CFTs quarterly or more frequently if needed.
## Protocol - What you must do

Throughout the provision of In-Home Services the county child welfare agency must monitor and assess child(ren)’s **safety** and **risk**. Monitoring of safety and assessment of child(ren)’s safety and risk includes, but is not limited to:

- Ongoing contact, including a separate interview with every child, with all family members, **home visits**, and collateral contacts at the frequency required. All contact must include a review of safety and risk factors and progress toward alleviating those factors.
- Engagement with and ongoing reviews of the family and each family member that includes the determination and monitoring of family and family member’s strengths and needs (see **Parent Engagement and Needs Assessment**);
- Use of the Strengths and Needs Assessment and the Risk Assessment and Risk Reassessment;
- **Case staffing** between the assigned child welfare worker and supervisor;
- Use of **CFT, Family Services Agreement** and **safety planning** to address safety and risk; and
- Documentation of all the above.

## SAFETY

The county child welfare agency must make efforts to protect the child in his own home and to prevent placement. When a child’s **safety** in the child’s own home cannot be assured, the county child welfare agency must:

- Develop a plan with the family to address safety and/or risk, which may include use of a temporary safety provider OR **File a petition** for removal with supervisor approval.

Development of the plan, to include identification of other safety arrangements and possible placements if the child/ren and/or youth must be removed, must occur during a CFT meeting. If holding a CFT meeting would compromise the safety of the child, then the child(ren) must be made safe through the filing of a non-secure petition and a CFT must be held as soon as possible after the removal to begin planning for permanency.

## Guidance – How you should do it

CPS In-Home Services involves arranging for and providing services to help the family change the maltreating behavior. CPS In-Home Services include activities such as:

- Monitoring, expanding and updating the In-Home Family Services Agreement to address identified areas of need;
- Routine case supervisory activities;
- Maintenance of contact with the family and others significant to the case;
- Working with the parents on the status of the case and case goals;
- Giving information, instruction, guidance and mentoring regarding parenting skills;
- Referral or monitoring of service as appropriate, including referrals to county agency-provided clinical treatment;
- Ongoing determination of appropriateness of need for out-of-home placement; and
- Documentation of CPS In-Home Services activities.

CPS In-Home Services begin the date of the assessment case decision. However, the county child welfare agency has the authority to determine what worker provides these services, to include how and when the case transfers from an assessment worker to an in-home worker.

### INITIAL AND ONGOING DETERMINATION OF FAMILY MEMBER’S STRENGTHS AND NEEDS

The determination of strengths and needs should build upon the SEEMAPS completed during CPS Assessment and should include, but not be limited to, a review of:

- **Well-being** needs of all children in the home; and
- Family’s and parent(s)’s needs. See **Parent Engagement and Needs Assessment**.

---

**Revision Date:** 06/15/18
## In-Home Services: Assessing Safety and Risk of Maltreatment

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<th>Guidance – How you should do it</th>
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<tr>
<td><strong>Information on engaging a parent when child is placed with a guardianship/custodian.</strong></td>
<td><strong>FAMILY ENGAGEMENT</strong></td>
</tr>
<tr>
<td>The Temporary Parental Safety Agreement (TPSA) developed during the CPS Assessment to address</td>
<td>The effectiveness of In-Home Services can hinge on the county child welfare worker’s ability to build a relationship with the family. Use of effective interviewing and listening skills to understand the parent’s perspective is important. See also Parent Involvement.</td>
</tr>
<tr>
<td>safety threats must be monitored and modified throughout In-Home Services until the safety threat</td>
<td><strong>ROLE OF IN-HOME AGENCY WORKER</strong></td>
</tr>
<tr>
<td>has been addressed. This can be accomplished through the Family Services Agreement.</td>
<td>The role of in-home services county child welfare worker includes advocacy, education, motivation, and case manager, all of which should be based upon a professional partnership with families. To be effective the In-Home county child welfare worker’s relationship with the family will be one that engages the family in the change process. An effective In-Home county child welfare worker will apply methods and skills from motivational interviewing and strengths based, solution focused interventions.</td>
</tr>
<tr>
<td>Any new allegation and/or incident that meets the statutory definition of abuse, neglect, or</td>
<td></td>
</tr>
<tr>
<td>dependency received at any time during CPS In-Home Services must be documented and screened as</td>
<td></td>
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<tr>
<td>a <strong>new report</strong>.</td>
<td></td>
</tr>
<tr>
<td><strong>NEW MEMBER OF HOUSEHOLD</strong></td>
<td></td>
</tr>
<tr>
<td>If during an open In-Home Services case, someone moves into the household, the county child</td>
<td></td>
</tr>
<tr>
<td>welfare agency must:</td>
<td></td>
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<tr>
<td>• Review its Child Welfare Services records for previous contact with that person;</td>
<td></td>
</tr>
<tr>
<td>• Check criminal records for individuals 16 years of age or older, and</td>
<td></td>
</tr>
<tr>
<td>• Complete a review of 911 call logs on the person’s previous address(es).</td>
<td></td>
</tr>
<tr>
<td><strong>CHRONIC NEGLECT/REPEAT MALTREATMENT</strong></td>
<td></td>
</tr>
<tr>
<td>For families that have been provided CPS In-Home Services in the past and a new report is made,</td>
<td></td>
</tr>
<tr>
<td>accepted, and the case decision is to substantiate or a finding of Services Needed, a CFT must</td>
<td></td>
</tr>
<tr>
<td>be held within 30 days of the CPS Assessment case decision.</td>
<td></td>
</tr>
<tr>
<td>This cycle may happen several times leading to a description of the incidents or choices the</td>
<td></td>
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<tr>
<td>family makes as being chronic, a frequent recurrence of maltreatment. Based on the case risk</td>
<td></td>
</tr>
<tr>
<td>level, and history of compliance with past services provided, the county child welfare agency</td>
<td></td>
</tr>
<tr>
<td>must assess if <strong>filing a petition</strong> is appropriate.</td>
<td></td>
</tr>
<tr>
<td><strong>NORTH CAROLINA FAMILY RISK REASSESSMENT</strong></td>
<td></td>
</tr>
<tr>
<td>The Family Risk Reassessment (DSS-5226) must be completed at the following times with the family</td>
<td></td>
</tr>
<tr>
<td>during CPS In-Home Services:</td>
<td></td>
</tr>
<tr>
<td>• At the time of the Family Services Agreement updates;</td>
<td></td>
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</tbody>
</table>
### In-Home Services: Assessing Safety and Risk of Maltreatment

<table>
<thead>
<tr>
<th>Protocol - What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<td>• When there is a change in circumstance around risk or safety issues; and&lt;br&gt;• Within 30 days prior to case closure.</td>
<td>CASE STAFFING/SUPERVISION&lt;br&gt;Case staffing can occur in various forms. The focus of case staffing is to ensure that the case child welfare worker follows NC CW policy, addresses family needs, and monitors risk, safety, and family progress. Supervision provides coaching and support to the child welfare worker. Achieving these goals may be accomplished through an office meeting but could also occur when a supervisor attends a home visit or other family meeting with a county child welfare worker.</td>
</tr>
</tbody>
</table>

The Family Risk Reassessment must not be completed at the time of the development of the Family Services Agreement (FSA). The Risk Assessment completed during the CPS Assessment must be used for the FSA development.

### CASE STAFFING / TWO LEVEL DECISION MAKING / ROLE OF SUPERVISOR

The social work supervisor and assigned case child welfare worker must staff each in-home case:

- At least twice a month for all cases during the first three months;
- At least twice a month for all high-risk cases;
- At least once a month for all other case; and
- Whenever there is a change in circumstances that impacts safety or risk to a child(ren).

If the frequency of staffing is reduced for moderate risk cases after the first three months to a minimum of once a month, the decision to reduce the frequency of staffing must be documented with justification for that decision.

Staffing must cover but not be limited to:

- **Safety**;
- **Risk** of maltreatment;
- Family’s strengths and needs;
- Family’s progress; and
- Review of the ongoing family and collateral contacts.

Two level decisions/reviews must occur on every in-home case at the following times:

- At the time of the development and quarterly reviews of the In-Home Family Services Agreement (FSA);
- When the Risk Reassessment and Strengths and Needs Assessment are completed;
- Prior to any reduction in the required number of family contacts;
- Prior to initiating or terminating use of a Temporary Safety Provider;

Two level decisions for In-Home cases should involve the assigned case worker and that worker’s supervisor. However, there may be circumstances that require another county child welfare worker or another supervisor or a higher-level manager in the agency to participate in the decision making.

The case supervisor should review every in-home case file at least quarterly and within two weeks of case closure.
**In-Home Services: Assessing Safety and Risk of Maltreatment**

<table>
<thead>
<tr>
<th>Protocol - What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
</table>
| • Prior to ending a TPSA, when in effect;  
• At case closure;  
• Prior to filing a petition; and  
• Whenever there is a change in circumstance that impacts the safety or risk to a child(ren). |  
Two level reviews of the FSA, Risk Reassessment and Strengths & Needs must be indicated with signatures of the case child welfare worker and supervisor.  
The case supervisor must review every in-home services case file for compliance with policy and protocol.  

**TEMPORARY SAFETY PROVIDERS**  
When a case transfers from assessment to in-home services with a child(ren) in the care of a Temporary Safety Provider that will remain in use to address a safety threat, the Comprehensive Assessment (**DSS-5204**) must be completed within 30 days of the case decision.  

If a child(ren) is placed in the care of the Temporary Safety Provider during in-home services, the protocol to assess and approve that Safety Provider must be followed. The Comprehensive Assessment (**DSS-5204**) must be completed within 30 days after the child is placed with a Temporary Safety Provider if the child continues in the care of the Temporary Safety Provider.  

See In-Home Services Review of Services / Family Services Agreements, including use of CFTs, for required reviews of cases with Temporary Safety Provider in use.  

**TEMPORARY SAFETY PROVIDERS**  
Usually, use of a Temporary Safety Provider during In-Home Services begins during the CPS Assessment.  
However, there are circumstances when a new incident occurs or the conditions that lead to the opening of the In-Home Services case increase to the point of becoming a safety threat and/or an increase in risk of harm. Depending on the circumstances, the agency may:  
• Make a new report for a new incident;  
• Hold a CFT regarding the increased safety and/or risk issues; and/or  
• File a petition.  

If a CFT is held (no new report) and the decision is to initiate use of a Temporary Safety Provider to address a safety threat, the Safety Threat page of the Family Services Agreement should be used and the protocol to approve that Temporary Safety Provider must be followed.  
If a new report is made and accepted, the Safety Assessment will be used, and the TPSA implemented to address identified safety threats. At the completion of the CPS Assessment, if the case remains open for In-Home Services, a CFT should be held to incorporate the TPSA into the existing Family Services Agreement.
In-Home Services: Assessing Safety and Risk of Maltreatment

<table>
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<tr>
<th>Protocol - What you must do</th>
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</thead>
<tbody>
<tr>
<td><strong>TERMINATION OF IN-HOME SERVICES CASE</strong></td>
<td><strong>TERMINATION OF IN-HOME SERVICES CASE</strong></td>
</tr>
<tr>
<td>The agency must terminate CPS In-Home Services when:</td>
<td>When reviewing the safety and risk to the children, the agency case summary should document:</td>
</tr>
<tr>
<td>• Parents/caretakers are willing to provide a <strong>safe</strong> home and demonstrate their ability to do so; or</td>
<td>• Changes in behavior by the parents/caretakers related to the Needs on the In-Home Family Services Agreement. Although all the activities may not have been completed, the parents/caretakers should be able to demonstrate change for each of the identified Needs and</td>
</tr>
<tr>
<td>• The agency receives legal custody and/or placement responsibility (filing a petition).</td>
<td>• The reduction in risk to the child(ren). Documentation should describe what factors in the home will provide safety or a reduction in risk for the child(ren)</td>
</tr>
</tbody>
</table>

Once parents/caretakers demonstrate the ability to provide a safe home and the risk has been adequately reduced, CPS In-Home Services must be closed even if all activities on the In-Home Family Services Agreement have not been completed.

When the risk level for an In-Home case is low, the child(ren) is no longer a potential candidate for entering county child welfare custody. The county child welfare agency must close an In-Home case with low risk when the Risk Reassessment has been completed, scored low risk, and:

- Staffed with and approved by a county child welfare supervisor (or another manager), and
- There are no circumstances to justify an override to Moderate risk.

Any circumstances that justify an override of the risk level must be documented.

Refer to In-Home Services Documentation for closing documentation requirements.

CPS In-Home Services cannot be closed if children placed with a Temporary Safety Provider cannot return to the home from which they were removed because of safety.

When making any decisions on a domestic violence related child welfare case, it is important to realize that
### Protocol - What you must do

### Guidance – How you should do it

despite the county child welfare worker’s conscientious efforts towards safety planning, education, and referral services, some non-offending parents/adult victims will not be ready or able to escape from the abuser and may return to their violent relationships. It is also important to realize that leaving an abusive relationship does not necessarily equal safety of the child(ren) or the non-offending parent/adult victim. County child welfare agency efforts cannot ensure that the violence will not reoccur.
In-Home Services: Required Contacts

<table>
<thead>
<tr>
<th>Protocol - What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Every contact with the family must include:</strong></td>
<td></td>
</tr>
<tr>
<td>• An assessment of child safety and risk of maltreatment;</td>
<td></td>
</tr>
<tr>
<td>• A review of the Family Services Agreement (Initial or In-Home);</td>
<td></td>
</tr>
<tr>
<td>• An inquiry regarding child and family well-being needs; and</td>
<td></td>
</tr>
<tr>
<td>• An individual interview with each child, separate from the parent/caretaker.</td>
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</tr>
</tbody>
</table>

Assessment of safety and risk and the inquiry regarding child and family well-being needs are accomplished through face to face interviews and the:

• Visual observation of each person, their behavior, and the environment, especially related to safety, risk and/or well-being; and
• Visual observation of the interactions between family members.

**At least one contact per month with each child must:**

• Be in the home in which the child resides; and
• Be with the child(ren) and their parent/caretaker to observe the interaction and the relationship between the child(ren) and parent/caretaker.

**HOME VISITS**

At least once per month, the county child welfare worker must assess the physical home environment for safety and risk. The county child welfare worker must request to tour the home and property in order to assess the family’s living environment and how it impacts child safety and risk.

If an infant resides in the home, at least monthly, during a home visit, the county child welfare worker must specifically discuss safe sleeping and observe the sleeping arrangements.

If the request to tour the home or property is denied:

• The case must be staffed to determine if this tour is necessary to assess safety for the child(ren). If the decision is that a tour is necessary, the county child welfare agency must consult with their county attorney about filing for obstruction.
• The refusal and following decisions must be documented, specifically pertaining to all safety and/or risk concerns.

It is important to see the children in the home to assess their conditions, to gain a perspective as to the level of safety and continuing risk. A home visit provides firsthand knowledge of the home environment and facilitates the observation of family interactions in the everyday setting. A tour of the home and property, focused on where the child(ren) sleeps, eats, plays, etc., supports an assessment of the child(ren)’s physical environment.

The provision of In-Home Services, including visiting and interviewing the child in their home, must not infringe upon any individual's Fourth Amendment rights. Securing parental consent is vital. Efforts to secure voluntary consent should never be coercive. The In-Home worker should explain their role and express the desire to interview the child, and to tour the home and property, to assess safety, risk, and the strengths and needs of the family.
**In-Home Services: Required Contacts**

<table>
<thead>
<tr>
<th>Protocol - What you must do</th>
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</tr>
</thead>
</table>
| All parts of the Monthly In-Home Contact Record must be completed every month. The Monthly In-Home Contact Record must be reviewed by an agency supervisor. | MONTHLY IN-HOME CONTACT RECORD  
The Monthly In-Home Contact Record provides a guide for home visits. If there is more than one home visit in a month, not every aspect of this form needs to be completed at every home visit. However, every aspect is to be covered at least once during each month. |
| All the above must be documented. Explain the inability to interview any child, if appropriate, or to meet any other requirement above. | Review of the Monthly In-Home Contact Record by the supervisor could occur during the staffing that follows the home visit. Review by the supervisor should occur within two weeks of the visit when the form was completed. Waiting for a supervisor staffing should not occur if a safety or risk issue is identified. |
| If information has not already been obtained and documented in the case file, the agency must inquire during family contact, at least once a month, about:  
  • Any absent parent;  
  • Extended family members;  
  • Mexican heritage, and/or  
  • ICWA. | Family members should be provided the opportunity to sign the Monthly In-Home Contact Record. |

**Domestic Violence**

At no time is the non-offending parent/adult victim to be placed in danger by being interviewed or meeting with the perpetrator of violence against him or her. The children will also not be interviewed with or required to be in the presence of the violent adult.

If a direct threat is heard by the county child welfare worker, they must take immediate steps to protect themselves, the children and/or non-offending parent/adult victim.

**INITIAL FAMILY/CHILD CONTACT**

Within seven days of case decision (Substantiation or a finding of Services Needed for any report of abuse, neglect, and/or dependency), face to face contact with the family by a county child welfare worker must occur (the only exception is for cases that are substantiated and closed). This contact:

- Begins the transition from the CPS Assessment to CPS In-Home Services;
- Informs the parent(s) or caretaker(s) of the reason and purpose for In-Home Services;
- Must include a review of the Continuing Needs and Safety Requirements page with the family. This page must be signed by the parent/custodian to ensure the parents understand the agency’s concerns and the actions expected of the family.
## In-Home Services: Required Contacts

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</thead>
<tbody>
<tr>
<td>the agency believes will address those concerns and states requirements to maintain the child(s) safety (including use if necessary of a Temporary Safety Provider). If the parent refuses to sign and verbally refuses to agree to its provisions, the agency must ensure that the child is safe whether the child is in his or her own home or in another type of arrangement; and</td>
<td>parent refuses to sign, the social worker should try to address the parent’s concerns and stress the need for working together to address the safety and risk for the child. The parent may verbally agree even if he or she refuses to sign the agreement. The social worker must note the parent has agreed to comply if he or she refuses to sign.</td>
</tr>
<tr>
<td>• Includes discussion about the development of the In-Home Family Services Agreement within 30 days of the case decision.</td>
<td></td>
</tr>
</tbody>
</table>

Documentation must include the diligent efforts made and/or rationale for the delay if this 7-day contact does not occur.

### REQUIRED ONGOING CASE CONTACTS

All In-Home Services must include at a minimum:

- Face to face contact with both the victim child(ren) and all parents or primary caretakers at least twice a month and a minimum of 7 days apart;
- Contact with at least two collaterals each month; and
- Face to face contact with any non-victim child(ren) and any other household members at least once a month.

### HIGH RISK

When the risk is high, additional contacts as compared to the minimum above to monitor safety and risk must occur, to include:

- Face-to-face contact at a minimum must include:
  - All children substantiated as abused, neglected, and/or dependent, or identified as “Services Needed”, their parents or primary caretakers, and all maltreating parent(s) or caretaker(s) must be seen face to face at least three times per month and a minimum of 7 days apart.
  - All other children (Unsubstantiated or found “Services Recommended” or “Services Not Recommended”) residing in the home must be seen face-to-face twice per month.
- If the children substantiated as abused, neglected, and/or dependent, or identified as “Services Needed”, are not placed with a Temporary Safety Provider at least two of the face to face contacts each month must be in the home where the children reside.

### REQUIRED ONGOING CASE CONTACTS

Ongoing Contact

Ongoing contact with the family and significant others is critical in maintaining the child’s safety and in knowing which services are most relevant.

Building a bond of trust and rapport with the child and parent/caretaker is important to gathering information.

Examples of a non-victim child living in the home could be, but are not limited to:

- A child born to the family during In-Home services with no finding of substantiation or Services Needed;
- A child that moved into the home after the In-Home Services case opened and after the abuse or neglect occurred; and
- A circumstance with a case decision to substantiate, but not for every child in the home.

When meeting with each child, the county child welfare worker should use interviewing strategies and techniques appropriate to the child’s developmental level. Workers should use their professional judgment in deciding how to interview a child.
## In-Home Services: Required Contacts

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<tbody>
<tr>
<td>Contacts must remain as set forth above until:</td>
<td>Interviewing the family together provides vital information about family dynamics and may trigger discussions that otherwise would not be held. The county child welfare worker must be observant of verbal and non-verbal cues from the child that might indicate topics to discuss during the separate child interview.</td>
</tr>
<tr>
<td>• The risk level in the home is reduced or</td>
<td>A review of the Family Services Agreement with all family members should occur at each family contact.</td>
</tr>
<tr>
<td>• The case is staffed for a reduction of contacts and the reason for that reduction is documented.</td>
<td><strong>Collateral Contacts</strong>/ Service Collaboration</td>
</tr>
<tr>
<td>Contacts with the maltreating parent(s)/caretaker(s) must emphasize the behavior change addressed in the Family Services Agreement.</td>
<td>Significant persons to the case include service providers, such as: mental health therapists or case managers, school staff, childcare staff, Work First workers, or other professionals working with the family.</td>
</tr>
<tr>
<td>Documentation must include the <strong>diligent efforts</strong> made and/or rationale for contacts not completed at the frequency specified above.</td>
<td>Collateral contacts may occur at a CFT if the child’s safety can be ensured in the process.</td>
</tr>
<tr>
<td>Contacts with a nonresident parent must at the frequency stated above.</td>
<td>Service collaboration is a vital part of providing comprehensive, family-centered services to families. The focus of service collaboration between agencies is a comprehensive, coordinated community response to address child safety and risk. This may be especially valuable on cases that involve domestic violence.</td>
</tr>
<tr>
<td>Exceptions follow:</td>
<td>Child Placed with a Temporary Safety Provider</td>
</tr>
<tr>
<td>• A nonresident parent who has not been identified or located: Attempts to identify and/or locate must occur at least monthly.</td>
<td>When a child is placed in the home of a Temporary Safety Provider, that provider should be seen, along with the child at the required frequency for the child and caretaker as specified in protocol. As stated in protocol the frequency of contacts for a high-risk case when a child is placed with a Temporary Safety Provider can be reduced. The protocol, face to face contact with any non-victim child(ren) and any other household members at least once a month, should be applied to all members of the household of the Temporary Safety Provider.</td>
</tr>
<tr>
<td>• A nonresident parent who has been located but was not responsible or associated with the safety or risk of harm for the child: There must be a determination about the level of involvement of that parent with the child(ren). A staffing must occur and based on the level of involvement, a decision must be made and documented about the frequency of contact. Face to face contact must be at least once per month to assess and/or monitor that parent’s ability to parent their child(ren). That parent must be engaged in the CFT process.</td>
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### REDUCTION OF REQUIRED FREQUENCY OF CONTACT

The option to reduce the number of required monthly contacts on a moderate risk case must only occur with supervisor and child welfare worker discussion of rationale and must:

- Occur after a discussion with the family and collaterals and there is a clear reduction in risk.
- Be based on the family’s progress on changing the identified behaviors, and the lessening of safety concerns in the home.
- Be clearly documented.

The option to reduce contacts for high risk cases must only occur upon supervisor and child welfare worker discussion of rationale and must only occur when:
### In-Home Services: Required Contacts

<table>
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<tbody>
<tr>
<td>• A child is in a safe, stable arrangement with a Temporary Safety Provider. The frequency of</td>
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<tr>
<td>contacts with the parent(s) or any child not in the Temporary Safety Provider placement must</td>
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<tr>
<td>not be reduced.</td>
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<tr>
<td>• <strong>Intensive Family Preservation Services (IFPS)</strong> is in place. Contacts by IFPS must</td>
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<tr>
<td>documented and shared with the In-Home services county child welfare worker. Contact by the In-</td>
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<tr>
<td>Home services child welfare worker must be a minimum of twice per month while IFPS is involved.</td>
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</table>

Required contacts must never be reduced to less than once a month:

- Including face to face contact with both the victim child(ren) and all parents or primary caretakers in the home in which the child resides; and
- To observe the interaction and the relationship between the child(ren) and the primary caretaker(s).

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### PARENT INVOLVEMENT / NONRESIDENT PARENT ENGAGEMENT

Throughout In-Home Services, the county child welfare worker must engage all parents of a child. All parents, not just the parent(s) that was substantiated or with a finding of Services Needed, whether or not the parent(s) live in the home with the child, must be engaged during In-Home Services. Engagement includes:

- Ongoing contacts;
- Participation in development and review of Family Services Agreement;
- Assessment and monitoring of needs (See Parent Engagement & Needs Assessment);
- Provision of services to address identified risks and needs;
- Assessment of progress in addressing identified safety, risks and needs;
- Completion of Risk Re-assessment and Strengths and Needs Assessment;
- Determination of ability to safely parent their child;
- Diligent efforts to complete engagement of both parents; and
- Documentation of this work.

When there are two households involved on a case, a separate Risk Re-Assessment, Strengths and Needs Assessment and Family Services

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**PARENT INVOLVEMENT**

The residential parent may report that the non-residential parent has not been involved with the child to limit the non-residential parent’s interactions. This may provide a good opportunity to discuss the parents’ relationship with each other, as well as, information about the non-residential parent’s last contact with the child and what the quality of the contacts has been. The child may also be able to report on their own relationship with the non-residential parent, as well as, the contacts.

Discuss with the non-residential parent the level of their involvement with the child, and discuss if relatives may be a resource in supporting the child. If the non-residential parent or the family is not involved in the child’s life, it may be beneficial to ask what it would take for him or her to become involved.

See Parent Engagement & Needs Assessment for additional guidance regarding parent involvement, including absent and/or non-resident parents.
## In-Home Services: Required Contacts

<table>
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</table>
| Agreement must be developed for each household. The only exception to this requirement is:  
  • A nonresident parent who has not been identified or located, or  
  • A nonresident parent who has been located but was not responsible or associated with the safety or risk of harm for the child: A risk assessment for the nonresident parent’s home must be completed. There must be a determination about the level of involvement of that parent with the child(ren). A staffing must occur and based on the risk assessment and level of involvement a decision must be made regarding the need for a separate Family Services Agreement.  |

When contact with the non-residential parent may involve a safety threat and/or risk of harm to the child or to the residential parent, the county child welfare agency must:  
• Specify the safety threat and/or risk of harm;  
• State the reason(s) why contact is not in the best interest of the child and/or custodial parent’s safety;  
• Indicate the decision was reviewed and approved by a supervisor/manager; and  
• Document all the above.  

When a child is in the custody or guardianship of someone other than the parent, identification, contact, and engagement of that parent must occur. Only when parental rights have been terminated, there is a court order that specifies no contact, or a safety issue is identified, should attempts to locate or contact the parent not occur. For specific requirements, refer to all protocol regarding nonresident parents. Staff and document all decisions.
# In-Home Services: Family Services Agreement

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
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<tbody>
<tr>
<td>When an allegation is substantiated or found to be Services Needed, and the family is transferred for ongoing services, the agency must:</td>
<td>The CPS In-Home Services county child welfare worker should achieve a balance between helping families by performing tasks for them and by empowering them to perform the required tasks themselves. The CPS In-Home Services county child welfare worker is an active participant in the identification and implementation of services with the family.</td>
</tr>
<tr>
<td>- Make best efforts to engage the family;</td>
<td>Timeframes for reviews are the maximum time allowed between reviews.</td>
</tr>
<tr>
<td>- Coordinate, provide for, and arrange interventions and services that focus on child safety and protection, family preservation and the prevention of further abuse or neglect; and</td>
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<tr>
<td>- Document efforts to gain participation from the family.</td>
<td>The Family Services Agreement developed with the family should be the result of formal and informal assessments with the family, as well as, taking into consideration what they see as important to them. Other assessments by the In-Home county child welfare worker or other profession providers should be utilized in the development and/or review of the In-Home Family Services Agreement.</td>
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</table>

The In-Home Family Services Agreement (DSS-5239 and DSS-5239ins) must be developed with the family in a CFT to provide a basis for providing services to the family with the primary goal of maintaining the child(ren) safely in the home of the parent/caretaker. It must:

- Be based on the information obtained from the Family Risk Assessment, Family Assessment of Strengths and Needs, Temporary Parental Safety Agreement (TPSA), and other assessments regarding the needs of the child(ren) and family;
- Incorporate relevant components of the Plan of Safe Care should the family include a substance affected infant;
- Be developed jointly with parents or primary caretakers, other persons who are involved in and critical to completion of the agreement, and the child if cognitively and emotionally able to participate;
- Include input from each child;
- Contain objectives;
- Describe the specific behaviors that created safety and/or risk to the children;
- Describe specific desired outcomes;
- Identify necessary behavior changes;
- Identify activities that are measurable, time-limited, that support achievement of each stated objective, and that address all identified safety, risk and/or needs;
- Specify how child safety will be maintained and monitored;

Utilizing the following techniques will support family engagement and improved FSAs:
- Building on family strengths;
**In-Home Services: Family Services Agreement**

<table>
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<tr>
<td>• Specify the consequences resulting from following the plan successfully or not;</td>
<td>• Discussing with the family ways in which they have successfully solved problems previously;</td>
</tr>
<tr>
<td>• Reflect progress or lack of progress of the family in each of the updates or revisions;</td>
<td>• Writing goals and objectives using the families’ own words, acknowledging their culture, and supporting their ownership;</td>
</tr>
<tr>
<td>• Identify child well-being needs and the services to address those needs;</td>
<td>• Creating concrete, behaviorally specific goals and objectives tailored to the individual and family needs; and</td>
</tr>
<tr>
<td>• Clearly state that the child(ren) are at imminent risk of entering county child welfare custody absent specified services (The child is only eligible for IV-E funded in-home services if agency services are critical to prevent removal from the home); and</td>
<td>• Tracking progress with the family and celebrating success along the way</td>
</tr>
<tr>
<td>• Include signatures of:</td>
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<tr>
<td>o the parent/caretaker;</td>
<td>See the Family Services Agreement instructions for more requirements on use of this form.</td>
</tr>
<tr>
<td>o the child, if cognitively and emotionally able to participate. If the child participated but did not sign the agreement, the county child welfare worker must include an explanation of why the child did not sign;</td>
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<tr>
<td>o the county child welfare worker; and</td>
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<td>o the supervisor.</td>
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Both residential and nonresidential parents must participate in the development of an agreement.

The household where the maltreatment occurred (or where the alleged perpetrator lived) must have a Family Services Agreement. The determination regarding whether separate In-Home Family Services Agreements should be developed for each parent must be case dependent. When the parents have separate households and each parent provides care independently, separate Family Services Agreements based on the needs of their household must be considered. If the plan is for parents to provide care in the same household, one plan is appropriate, unless domestic violence is involved.

Input from all family members (parents/caretakers and each child) must be documented in the In-Home Family Services Agreement or justification of why input wasn’t included must be documented. If...
**In-Home Services: Family Services Agreement**

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<tr>
<td>the child participated but did not sign the agreement, the county child welfare worker must include an explanation of why the child did not sign. Attending the CFT by a child is not adequate; their input must be prompted. The parent/caretaker may verbally agree even if he or she refuses to sign the agreement. The county child welfare worker must document that the parent/caretaker has agreed to each need and activity if he or she refuses to sign the agreement. If the parent/caretaker refuses to sign the agreement and verbally refuses to agree to its provisions, the county child welfare agency has the responsibility to ensure that the child is safe.</td>
<td>contact with the parent should include a discussion of the progress on the Family Services Agreement and a review of any aspect of the TPSA still in effect. The formal assessment should bring few surprises. It is important to document the successes and the items that remain to be accomplished.</td>
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<tr>
<td>Copies of the In-Home Family Services Agreement must be provided to all parties that participated in development.</td>
<td>As the work with the family progresses, changes to the Family Services Agreement will be necessary. It is important to reiterate with the parent the accomplishments that have been made. This is particularly important if other risk factors have surfaced. Changes to the Family Services Agreement should be indicated on the Agreement throughout the case during contact with the family. The county child welfare worker will also need to address next steps with the parent at the time of the quarterly review. Of importance are the discussions about how long the county child welfare agency has been involved with the family, what changes have or have not been made, and what next steps will be needed.</td>
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</table>
| For CPS In-Home Services, the In-Home Family Services Agreement must be completed in a CFT and:  
  - Be completed with the family within 30 days of the assessment case decision to Substantiate or a finding of Services Needed;  
  - Be updated at least every three months thereafter (to coincide with the Family Assessment of Strengths and Needs and Risk Reassessment updates) or whenever family circumstances warrant a change;  
  - Be updated if major changes occur that affect the objectives or activities, or the safety or risk to the child;  
  - Include a review of the TPSA and use of Temporary Safety Provider if still in effect regarding ongoing safety threats;  
  - Signed by all parties, including supervisor, within above timeframes. | If the parent has been intermittently successful or successful only on minor items and the agency continues to have concerns for the child’s safety, see Lack of Progress and Stuck Cases. |
|
| If the In-Home Family Services Agreement is not completed within 30 days, documentation must reflect diligent efforts made by the county child welfare agency or rationale for extra time to develop the plan. If the Agreement is not updated within timeframe, documentation must reflect diligent efforts by the county child welfare agency to engage the family or rationale for continuing the previous plan. | |
## In-Home Services: Family Services Agreement

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</thead>
<tbody>
<tr>
<td><strong>NORTH CAROLINA FAMILY ASSESSMENT OF STRENGTHS AND NEEDS</strong></td>
<td>Completion of the Strengths and Needs Assessment should not be completed when the Family Services Agreement is developed. An exception may occur when strengths or needs are uncovered that were not identified during the CPS Assessment and should be addressed in the FSA.</td>
</tr>
<tr>
<td>The Identified Needs in the In-Home Family Services Agreement must be based on the completed Strengths and Needs Assessment.</td>
<td></td>
</tr>
<tr>
<td>The North Carolina Family Assessment of Strengths and Needs (DSS-5229) must be completed with all parent(s) (custodian and non-custodial) and/or caretaker(s) at the following times during a CPS In-Home Services case:</td>
<td></td>
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<tr>
<td>• At the time of the In-Home Family Services Agreement updates; and</td>
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<tr>
<td>• Within 30 days prior to case closure.</td>
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</table>

### Domestic Violence

Separate Family Services Agreements must be completed with the non-offending parent/adult victim and the perpetrator of domestic violence.

The perpetrator of domestic violence must not have access to the non-offending parent/adult victim’s Family Services Agreement.

Family Services Agreements in domestic violence cases must focus on:
- Reducing the risk of child maltreatment, and
- Strengthening parenting ability.

By including activities that:
- Foster perpetrators of domestic violence taking responsibility to stop their acts of violence and their own behavioral change and
- Enhance the non-offending parent’s/adult victim’s capacity and willingness to protect the children.

The capacity and willingness of the non-offending parent/adult victim to take appropriate actions to protect the child are issues.

### Domestic Violence

The recommended domestic violence scaled assessment tools (Children’s Domestic Violence Assessment Tool DSS-5237, Non-Offending Parent/Adult Victim DV Assessment Tool, DSS-5235, DV Perpetrator Assessment Tool DSS-5234) should be considered in ongoing assessment of whether safety and risk factors have been addressed. The Personalized DV Safety Plan, DSS-5233, should be considered for use and updated with the domestic violence victim parent/caretaker.

There is not a specific timeframe for when the home environment is safe or risk free due to the difficulty in assessing the likelihood that the domestic violence perpetrator’s violent behavior has ceased. Factors to consider in assessing change in behavior include:
- Family interaction;
- Criminal behavior; and
- Environment of the home.
In-Home Services: Family Services Agreement

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<tr>
<td>that must be assessed and monitored during the provision of CPS In-Home Services.</td>
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<tr>
<td>The non-offending parent/adult victim must not be held responsible for the domestic violence perpetrator’s failure to follow through with services.</td>
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</table>

CHILD WELL-BEING
Every In-Home Services case must identify and document child well-being within the first thirty days. If not applicable, note why not applicable.

Every well-being need identified must be addressed on the In-Home Family Services Agreement.

CHILD AND FAMILY TEAM MEETINGS
County child welfare agencies must use Child and Family Team meetings during In-Home Services:
- To develop the Family Services Agreement (within 30 days of the case decision) to include a review of Temporary Parental Safety Agreement (TPSA) and incorporation into the Family Services Agreement;
- For quarterly reviews of the Family Services Agreement;
- To update the Family Services Agreement to address safety or high-risk concerns, including, but not limited to:
  - Identification of a new safety threat;
  - High risk “stuck cases”;
- When requested by the family;
- At critical decision points, to include possible out of home placement;
- When a child is placed with a Temporary Safety Provider and the parent cannot be located and/or there is no parent to make decisions regarding the child;
- At six months after development of the Family Services Agreement:
  - There is a lack of progress as indicated by no activities completed nor any behavioral changes demonstrated that mitigate risk or

CHILD AND FAMILY TEAM MEETINGS
All county child welfare agencies should use Child and Family Team Meetings to develop the Family Services Agreement and for quarterly updates. Refer to CFT policy regarding introduction of the CFT meeting to the family, discussion relating to who should be a member of the CFT, and documentation regarding this process.

Both the Assessment & In-Home child welfare worker should participate in the initial CFT to develop the Family Services Agreement.

Use of a neutral facilitator is best practice for all CFT meetings. While a facilitator is not required in moderate risk cases, it remains best practice as there are many benefits to a facilitated meeting.

When conducting the Child and Family Team meeting, it is important to allow each participant to discuss their concerns of the recurring neglect, as well as if he or she can support the family in hopes of providing safe care for the child.
## In-Home Services: Family Services Agreement

### Protocol – What you must do

- The child(ren) in the care of a temporary provider are unable to return home;
  - Prior to and within 30 days of case closure in cases that are repeat recipients of CPS In-Home or received Permanency Planning services to specifically address the plan the family will follow to prevent repeat maltreatment.

A facilitator, who is neither the county child welfare worker for the family nor the supervisor of that child welfare worker, must be used in all cases:

- With a current high-risk rating and
- For cases open for six months with a lack of progress and/or use of a temporary safety provider.

### Guidance – How you should do it

One of the underlying beliefs of the family-centered approach continues to be that the safety of the child is the first concern. The county child welfare worker should explain that the primary goal is to maintain the child safely in the home of the caretaker, but if the child’s safety is compromised, the agency will take steps to ensure the safety of the child. This may include filing a juvenile petition for custody.

If an immediately safety threat is identified, the agency must respond to that threat. See Safety Planning protocol.

### LACK OF PARENT/LEGAL CUSTODIAN

When an allegation is substantiated or found to be Services Needed, and the family is transferred for ongoing services, the agency must:

- Make best efforts to engage the family;
- Coordinate the necessary remedial services; and
- Document efforts to gain participation from the family.

Cases open for six months with a lack of progress, with an ongoing TPSA, or with children in the care of a temporary safety provider must:

- Schedule a facilitated CFT,
- Review the barriers that prevent progress, and
- Advise the family that court action will be pursued by the filing of a petition.

The county child welfare agency must consider filing a juvenile petition when:

- Efforts to engage a family are not successful; or
- A family refuses to follow through with services; or

### LACK OF PROGRESS

If there is a lack of progress or behavior change that mitigates safety or risk after three months, there should be a facilitated Child and Family Team meeting to address the behavior change issues, set deadlines for change and to outline the court process.

When conducting the Child and Family Team meeting, it is important to allow each participant to discuss their concerns of the recurring neglect, as well as if he or she can support the family in hopes of providing safe care for the child. A discussion should be held with the family regarding issues of behavior change or lack of that could affect the safety and future risk of harm of the children. When discussing issues of behavior change, it is important to discuss the behaviors of the parent/caretaker that are continuing to create risk. Safety and repeat maltreatment concerns must be addressed. Consequences of a lack of behavior change should also be clearly stated so that the alternative process is outlined. The CFT meeting is an opportunity to bring the family, along with both formal and informal supports, to the table to make a plan to keep the child safe, in their community, without court intervention.
In-Home Services: Family Services Agreement

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<td>• A family participates only marginally, receiving virtually no benefits from the process; or</td>
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<tr>
<td>• Families do not make sufficient and timely progress in addressing the issues that led to the child abuse, neglect, and/or dependency, AND</td>
<td></td>
</tr>
<tr>
<td>• The child(ren) continues to be at risk of maltreatment.</td>
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The county child welfare agency must determine if non-secure custody must occur based on if the child(ren) can remain safely in their home.

A county child welfare agency must intervene through filing of a petition when it determines that the level of care provided by the parent(s)/caretaker(s) is below a minimally sufficient level of care. The minimum sufficient level of care is the level of physical and emotional care that each child must have to grow and develop.

The agency must remove children when the family cannot or will not improve the level of care, despite services provided, or when the level of care is so far below an acceptable minimum level that the child is in risk of harm. Evaluation of safety and risk must include consideration of cultural practices that meet the safety needs of the child.

At times, despite an agency’s best efforts to engage the family and coordinate the necessary remedial services during the provision of CPS In-Home Services, families may not make sufficient and timely progress in addressing the issues that led to the child abuse, neglect, and/or dependency. In these cases, the agency should consider the impact of filing a petition alleging that the child is abused, neglected, and/or dependent as well as the risk to the child(ren) if CPS services were no longer provided.

A petition may be filed, asking for an adjudication of abuse, neglect, and/or dependency and not request removal of the child from the legal custody of the caretaker. This may be the case when dealing with families who, despite diligent efforts made by both the agency and the Child and Family Team, remain uncooperative, refuse to work with the agency, or do not make sufficient or timely progress, but the child is determined to remain safe in their home.

STUCK CASES
Stuck cases are defined as situations where the risk remains moderate and the family is not making progress or simply not cooperating. If there are no high-risk issues present, the following course of actions should occur:

• Discussion between the county child welfare worker and supervisor.

• With the Assessment Tools as a guide, evaluate the:

  1. Safety - Have other reports been received, assessed, and a finding of substantiated or “Services Needed” found? Are there current safety issues?
### In-Home Services: Family Services Agreement

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<tr>
<td>All cases Substantiated or found to be Services Needed and transferred for ongoing services must indicate there was an inquiry about a parent/caretaker’s American Indian ancestry. See <a href="#">ICWA</a> for protocol and guidance if American Indian ancestry is identified.</td>
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<tr>
<td>If an American Indian child is the identified victim child, it remains the responsibility of the county child welfare agency to provide CPS In-Home Services, if applicable.</td>
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**Mexican Heritage**

All cases Substantiated or found to be Services Needed and transferred for ongoing services must indicate there was an inquiry about a child’s Mexican heritage.

| 2. Future Risk- Using the Risk Re-assessment, what is the risk, in what areas and how does risk affect the children now and since working with them? |
| 3. Family Strengths/Needs- Using the Family Strengths and Needs Assessment, what identified family issues remain unaddressed? |
| • Utilize the Child and Family Team meeting to determine possible resolutions to bring down the risk and allow the family to achieve its objectives. |
| • If safety and risk issues warrant, file a juvenile petition to have the case adjudicated in juvenile court. |
| • After discussion of the issues, it is decided to close the case at moderate risk and with no safety concerns in the parent’s home, all services offered to the family, as well as the response and any progress, should be documented. A letter should be sent to the family notifying them of the closure decision, and indicating that the lack of progress will be considered if future protection issues should arise. |
In-Home Services: Documentation

**Protocol - What you must do**

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<th>Documentation of CPS In-Home Services must:</th>
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<td>• Describe actions taken, to include but not limited to:</td>
<td>All the following items should be included in your case documentation even though the supporting documentation may be also in the case file:</td>
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<td>o Home visits, school visits, and any other family member contact,</td>
<td>• The date case was assigned to the county child welfare worker;</td>
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<tr>
<td>o Collateral contacts with extended family, services providers, etc.;</td>
<td>• The date any decision-making tool was completed;</td>
</tr>
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<td>o Meetings held and decisions made;</td>
<td>• Any discussion with agency attorneys regarding the case including the date;</td>
</tr>
<tr>
<td>o Observations regarding family interaction and relationships, engagement in services and parent and child behaviors; and</td>
<td>• Any court hearings attended and date attended;</td>
</tr>
<tr>
<td>o Services or interventions provided, arranged for or coordinated;</td>
<td>• Information obtained from professional providers, for example, medical and mental health diagnosis and/or medication prescribed; and</td>
</tr>
<tr>
<td>• Describe all diligent efforts to make appropriate contacts, if not achieved;</td>
<td>• Any meetings/conferences regarding the case including the date.</td>
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<tr>
<td>• Support the need for continuing agency involvement;</td>
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<tr>
<td>• Describe the family’s progress or barriers toward case goals (through use of Family Services Agreement);</td>
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<tr>
<td>• Include supervisor/child welfare worker and group/unit case conferences, including any two-level decisions made;</td>
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<tr>
<td>• Provide justification for any missed policy or protocol requirements (missed timeframes, etc.);</td>
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<tr>
<td>• Discuss ongoing safety and/or risk of maltreatment, including the risk level (through use of Risk Reassessment);</td>
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<tr>
<td>• Document any new allegations and actions taken;</td>
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<tr>
<td>• Discuss well-being needs of the child(ren);</td>
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<tr>
<td>• Any other efforts by the county child welfare agency to achieve child safety and protection, family preservation, and prevention of future abuse, neglect and/or dependency; and</td>
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<tr>
<td>• Be maintained in the case record and be prompt and current within seven days of any case activity or action.</td>
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The following information must be included for each documentation entry regarding a contact or attempted contact:

- Date of each contact and name of each person contacted;
- Purpose of the contact;
- Significant family/child/parent issues;
- Type of contact (phone, face to face, home visit, etc.) and location for all face to face contacts;
- Individual interview with each child present;
- Observations regarding each person and the environment for face to face contacts; and/or
- **Diligent efforts** to make a contact and date of the efforts, what were efforts to make this contact (telephone call, home visit but no one home, etc.).
In-Home Services: Documentation

Protocol - What you must do

In-Home Services closing documentation must:

- Support the rationale for case closure;
- Reflect either that the parents or caretakers are willing to provide a safe home and demonstrate their ability to do so, or the agency obtained legal custody or placement responsibility (see next paragraph for additional documentation requirements).
- Indicate that the decision was a shared decision made by the county child welfare worker and the CPS supervisor or supervisor’s designee:
- Must include notification of the family in writing that the case is closed within seven days of the agency’s decision to close the case.

When a child(ren) must be removed from the home (See Filing a Petition), the case record must document that the county child welfare agency completed the following.

- Efforts were made to protect the child in their own home and to prevent out-of-home placement.
- Relatives were assessed for willingness and ability to care for the child(ren) and whether such placement would be in the child’s best interests.
- Compliance with the following requirements occurred when temporary custody is initiated:
  - That the child would have been endangered if the county child welfare worker first had to obtain a court order;
  - That the child was returned to the parents or persons from whom the child was removed unless a petition or motion for review was filed and an order for secure or non-secure custody was obtained; and
  - That the parents were notified that they could be with the child(ren) while the court determined the need for secure or non-secure custody.
- The juvenile petition alleges the conditions that required court jurisdiction.
- The non-secure custody order gives specific sanction to a placement other than a licensed provider; that the juvenile petition was filed because the child(ren) was at imminent risk; and that a hearing was held within seven days.
- If a child is taken into agency custody as a result of an adjudication of undisciplined behavior or delinquency, the required language is in the court order or if appropriate language is not included, that the agency filed a motion to have such language included in the court order.

Case documentation must include completion and processing of a DSS-5027 (to be processed at the initiation and closure of every In-Home Services case) for every identified victim child.

See the Cross Function of Documentation for definitions, and additional protocol and guidance.
Policy | Legal Basis
--- | ---
Any new allegation and/or incident that meets the statutory definition of abuse, neglect, or dependency received at any time during CPS In-Home Services must be documented as a new report and the agency must conduct a CPS Assessment. | N.C.G.S.§7B-302

Section 106 (b)(2)(A)(xviii) of the Child Abuse Prevention and Treatment Act (CAPTA)

See Assessment Policy and Protocol.

Protocol – What you must do

See Assessments for policy, protocol and guidance for completing the CPS Assessment.

The report must be assessed independently of the In-Home Services case.

If there is an existing Temporary Parental Safety Agreement (TPSA), the outcome of the Safety Assessment for the new CPS Assessment must be:

- A modification to the existing TPSA to address any new safety threat identified, or
- A modification to the existing TPSA if the current TPSA is inadequate to address an existing, ongoing safety threat, or
- A new TPSA that incorporates the actions from the existing TPSA, or
- No change to existing TPSA. The current TPSA must continue if:
  - There are no additional safety threats associated with the new report.
  - The existing TPSA addresses all safety threats identified.

Any required modifications of the TPSA must occur when the Safety Assessment for the new CPS Assessment is completed. Before terminating the TPSA the county child welfare agency must:

- Hold a CFT, and
- Modify the In-Home Family Services Agreement.

CASE DECISIONS FOR INVESTIGATIVE ASSESSMENTS (open CPS In-Home cases)

If it is determined that the new allegations are found regarding abuse, neglect or dependency,

- The finding must be to Substantiate;
- The county child welfare worker must notify the family of the decision; and
- The identified safety and risk factors must be incorporated into the existing In-Home Family Services Agreement (DSS-5239).

If it is determined that the there are no safety or risk factors,

- The agency’s case decision must be to Unsubstantiate and
In-Home Services: New Report (Allegations) During In-Home Services

- The county child welfare worker must notify the family of the decision not to substantiate the new allegations but explain that the ongoing CPS In-Home Services would continue based on the original allegations until successful completion of the In-Home Family Services Agreement.

CASE DECISIONS FOR FAMILY ASSESSMENTS (open CPS In-Home cases)
If it is determined that the new allegations require CPS In-Home Services,
- The agency’s case decision must be Services Needed.
- The county child welfare worker must notify the family of the decision and
- The identified safety and risk factors must be incorporated into the existing In-Home Family Services Agreement (DSS-5239).

If the only needs that are identified are those that were uncovered during the previous assessment and none related to the new allegations,
- The case decision must be additional Services Not Recommended.
- There must be concise documentation in the record stating that the risk and safety factors related to the original assessment continue and services must continue to reduce the original risk level through the provision of CPS In-Home Services.
- The county child welfare worker must notify the family of the decision of Services Not Recommended regarding the new allegations but explain that the ongoing CPS In-Home Services would continue based on the original allegations until successful completion of the In-Home Family Services Agreement.

BIRTH OF CHILD TO FAMILY OPEN TO IN-HOME SERVICES
Whenever a child is born in a family open for In-Home Services, a new report must be generated and referred for to Intake for screening.
In-Home Services: Transfer to Another County

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<td>When the family relocates to another county in the state, the agency must request the new county of residence accept the In-Home Services case, and provide CPS In-Home Services to the family.</td>
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<tr>
<td>When a county learns that a family has relocated and the county has the new address for the family:</td>
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<td>• The original county must notify the new county within 24 hours for high risk or 48 hours for moderate risk cases;</td>
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<td>• The new county of residence must confirm the family’s address within 72 hours;</td>
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<tr>
<td>• The original county must share its entire case record with the new county within seven business days;</td>
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<tr>
<td>• The new county of residence is responsible for the provision of CPS In-Home Services as soon as the agency is aware that the family has moved into the county, including responsibility for overall case management responsibilities and updating the Family Services Agreement.</td>
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</tr>
<tr>
<td>Both counties should discuss whether immediate contact should be made with the family to assure the safety of the child. The child should be seen within 72 hours of the notification to the new county that the family has relocated to their area, unless there is an immediate need for the child and family to be seen,</td>
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Exception Due to Court Involvement

When there is juvenile court involvement,

• CPS In-Home Services should not transfer to another county.

• If the original county determines that transfer is appropriate due to the circumstances of the case, then prior to the transfer of custody or a change of venue, a hearing must be held giving each involved county the right to appear and plead their position.

   Should a county elect not to be present at the change of venue hearing, all rights to argue against the transfer are forfeited.

   The county with venue must notify all involved counties of any changes in venue.

END OF CPS IN-HOME SERVICES POLICY, PROTOCOL, & GUIDANCE SECTION
Permanency Planning Services: Purpose

Permanency Planning Services are provided to children who must be separated from their own parents or caretakers when the parents or caretakers are unable or unwilling to provide adequate protection and care. As a result, the child enters the custody of a North Carolina county child welfare agency. The county child welfare agency has legal custody and/or placement responsibility, whether the child has been removed from their home, and regardless of the type of placement.

County child welfare custody must not be considered until reasonable efforts have been made to preserve a child’s safety, health, and well-being in their own home. County child welfare agencies are required to provide services to preserve or reunify families until parental rights have been terminated by the juvenile court.

When county child welfare custody is necessary, it is the responsibility of the child welfare agency to ensure the child remains in its custody for the shortest time possible. Permanency Planning Services require a thorough assessment of the child and family’s needs and careful planning prior to and throughout a child’s experience in county child welfare custody.

Permanency planning services must be provided to any child in the custody or placement responsibility of a county child welfare agency. Permanency planning services include but are not limited to:

- Careful planning and decision making with the family about placement, when necessary, and preparing the child, the child’s family, and the foster family for separation and placement, including developing a visitation agreement;
- Assessing children’s needs to ensure appropriate placement and services;
- Arranging and monitoring a placement appropriate to the child’s needs;
- Involving the kinship network to provide planning, placement and other support for the child and family;
- Assessing family strengths and needs to determine the appropriate plan for service;
- Developing and arranging community-based services to support the child and family;
- Collaborating with other community service providers working with the family to ensure continuity of services and to prevent duplication of services;
- Referring the child and family to needed services, including clinical treatment;
- Collaborating with educational agencies to ensure school stability for the child and that all factors relating to the child’s best interest are considered in determining the child’s educational setting, that all appropriate educational services are provided to the child, and that educational planning is in the case file;
- Providing ongoing risk assessment to determine risk to the child and to guide the case planning process;
- Working with the family to develop and implement the Family Services Agreement;
- Helping the family meet Family Services Agreement objectives by providing information, instruction, guidance and mentoring on parenting skills, and monitoring and updating the agreement with the family;
- Providing case planning and management;
- Concurrent permanency planning with the family to develop alternative options to provide a permanent home for a child should reunification fail;
- Supervising the placement to ensure the child receives proper care during placement;
- Preparing for and participating in court proceedings;
**Permanency Planning Services: Purpose**

- Preparing for and facilitating Child and Family Team/Permanency Planning Review meetings;
- Providing transportation for children in county child welfare agency custody when needed and not otherwise available, including visits with parents, siblings, and relatives;
- Providing LINKS services to assist older youth in learning life skills necessary to make a successful transition from foster care to living on their own;
- Ensuring placements across state lines are in compliance with the Interstate Compact on the Placement of Children;
- Recruiting and assessing relatives and other kin as potential caregivers;
- Involving foster parents in the planning and decision making for children in county child welfare agency custody;
- Preparing children for adoptive placements and maintaining life books; and
- Maintaining the permanency planning case record and thorough documentation of case activities.

Foster care can be defined as a situation in which for a period of time a child lives with and is cared for by people who are not the child's parents. There are different forms of foster care, including but not limited to:

- Family foster homes,
- Therapeutic foster homes, and
- Residential care.

For the purpose of child welfare, foster care refers to children in the legal custody of a child welfare agency; however, a child may also be placed in foster care by their parent without involvement of a county child welfare agency.
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<tr>
<td><strong>Record Keeping and Documentation</strong></td>
</tr>
<tr>
<td><strong>Maintenance of the Permanency Planning Record</strong></td>
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<tr>
<td><strong>Contents of the Permanency Planning Record</strong></td>
</tr>
<tr>
<td><strong>Documentation</strong></td>
</tr>
</tbody>
</table>
## Permanency Planning Services: Policy and Legal Basis

<table>
<thead>
<tr>
<th>POLICY</th>
<th>LEGAL BASIS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanency Planning Services must be provided to any child in the custody or placement responsibility of a county child welfare agency.</td>
<td>Foster care services are provided in compliance with the statutory requirements of Federal and State laws. Federal and State law is intended to provide protections for children in foster care, who need safety and permanency, and for their families to ensure that their legal rights are maintained.</td>
</tr>
<tr>
<td><em>Reunification with the parents or caretakers from whom the child is removed must be the primary plan unless the juvenile court determines it is inconsistent with the child’s needs for safety.</em></td>
<td><em>N.C.G.S. § 108A-14</em> states the County Director of Social Services has the responsibility and the duty to investigate reports of child abuse, neglect, and dependency; to take appropriate action to protect such children and to accept children for placement in foster homes and to supervise placements for as long as such children require foster care.*</td>
</tr>
<tr>
<td>When removal is necessary to preserve a child’s safety and care, the child welfare agency must:</td>
<td><em>N.C.G.S. § 108A-48</em> states the Department of Health and Human Services is authorized to establish a State Foster Care Benefits Program with appropriations by the General Assembly for the purpose of providing assistance to children who are placed in foster care facilities by county departments of social services in accordance with the rules and regulations of the Social Services Commission. Such appropriations, together with county contributions for this purpose, shall be expended to provide for the costs of keeping children in foster care facilities.*</td>
</tr>
<tr>
<td>• provide services to preserve or reunify families until the juvenile court has determined reunification would be futile or inconsistent with the child’s need for safety and permanency within a reasonable length of time;</td>
<td><em>N.C.G.S. § 7B-505.1</em> states that unless the court orders otherwise, when a juvenile is placed in the non-secure custody of a county department of social services, the director may arrange for, provide, or consent to any of the following:</td>
</tr>
<tr>
<td>• ensure the child is in county child welfare custody for the shortest time possible;</td>
<td>(1) Routine medical and dental care or treatment. treatment, including, but not limited to, treatment for common pediatric illnesses and injuries that require prompt intervention. (2) Emergency medical, surgical, psychiatric, psychological, or mental health care or treatment.</td>
</tr>
<tr>
<td>• provide family centered services that are time limited and goal oriented;</td>
<td>(3) Testing and evaluation in exigent circumstances. It further states, the court may authorize the director to consent to a Child Medical Evaluation upon written findings. In addition, the director shall obtain authorization from the juvenile’s parent, guardian, or custodian to consent to all care or treatment not covered above, except that the court may authorize the director to provide consent after a hearing at which the court finds by clear and convincing evidence that the care, treatment, or evaluation requested is in the juvenile’s best interest. Care and treatment includes: prescriptions for psychotropic medications, participation in clinical trials, immunizations when it is known that the parent has a bona fide religious objection to the standard schedule of immunizations, CME’s, comprehensive clinical assessments or other mental health evaluations, surgical, medical, or dental procedures or test that require informed consent, psychiatric, psychological, or mental health care or treatment that requires informed consent. For any care or treatment</td>
</tr>
<tr>
<td>• complete a thorough assessment of the child and family’s needs; and</td>
<td></td>
</tr>
<tr>
<td>• provide careful planning prior to and throughout a child’s placement.</td>
<td></td>
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</tbody>
</table>

Ensuring a child’s safety and working to achieve permanency must always be parallel functions.
**Permanency Planning Services: Policy and Legal Basis**

<table>
<thead>
<tr>
<th>Each child placed in county child welfare agency custody must have concurrent permanency plans.</th>
</tr>
</thead>
<tbody>
<tr>
<td>A permanency planning hearing in court must occur within twelve (12) months of a child entering care, and every six (6) months thereafter. A hearing is required for all children under the responsibility for placement and care of a county child welfare agency.</td>
</tr>
<tr>
<td>If the child is 14 years or older, the child must be consulted regarding any permanency planning arrangements.</td>
</tr>
<tr>
<td>provided, the director shall make reasonable efforts to promptly notify the parent, guardian, or custodian that care or treatment will be or has been provided and give the parent or guardian frequent status reports on the juvenile’s treatment and the care provided. Upon request of the juvenile’s parent, guardian, or custodian, the director shall make available to the parent, guardian, or custodian any results or records, except when prohibited. Except as prohibited by federal law, the department may disclose confidential information deemed necessary for the juvenile’s assessment and treatment to a health care provider serving the juvenile.</td>
</tr>
<tr>
<td>Unless the court has ordered otherwise, except as prohibited by federal law, a health care provider shall disclose confidential information about a juvenile to a director of a county department of social services with custody of the juvenile and a parent, guardian, or custodian.</td>
</tr>
<tr>
<td>N.C.G.S. § 7B-903.1 states the director of a county department of social services with custody of a juvenile shall be authorized to make decisions about matters not addressed herein that are generally made by a juvenile’s custodian, including, but not limited to, educational decisions and consenting to the sharing of the juvenile’s information. The court may delegate any part of this authority to the juvenile’s parent, foster parent, or another individual.”; “When a juvenile is in the custody or placement responsibility of a county department of social services, the placement provider may, in accordance with G.S. 131D-10.2A, provide or withhold permission, without prior approval of the court or county department of social services, to allow a juvenile to participate in normal childhood activities. If such authorization is not in the juvenile's best interest, the court shall set out alternative parameters for approving normal childhood activities.”; “If a juvenile is removed from the home and placed in the custody or placement responsibility of a county department of social services, the director shall not allow unsupervised visitation with or return physical custody of the juvenile to the parent, guardian, custodian, or caretaker without a hearing at which the court finds that the juvenile will receive proper care and supervision in a safe home.”</td>
</tr>
<tr>
<td>Public Law 96-272, Adoption Assistance and Child Welfare Act of 1980, is one of the most significant Federal laws shaping the provision of services to children needing foster care. The requirements of this law were developed to ensure that children do not linger unnecessarily in foster care placements. It also frames many requirements for receipt of Federal Title IV-E funding.</td>
</tr>
</tbody>
</table>
Public Law 105-89, The Adoption and Safe Families Act of 1997, expands and clarifies the intent of P.L. 96-272. This legislation establishes unequivocally that our national goals for children in the child welfare system are safety, permanency and well-being.

The Fostering Connections to Success and Increasing Adoptions Act of 2008, P.L. 110-351, addresses outcomes for children who have entered foster care.
## Permanency Planning Services: Required Timeframes

<table>
<thead>
<tr>
<th>Timeframe</th>
<th>Tasks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Non-Secure Custody Order</td>
<td>Permanency Planning Services case begins</td>
</tr>
</tbody>
</table>
| Within 3 calendar days following out-of-home placement | • Face to face contact with child(ren)  
• Determination of Foster Care Assistance Benefits and/or Medical Benefits Only (DSS-5120) initiated |
| Within 7 calendar days of placement | • Visitation for child(ren) with parent(s) and sibling(s)  
  • Complete the following:  
    • Face-to-face contact with parent(s)  
    • Face-to-face, in home contact with all placement providers  
    • Initial physical examination  
    • Educational Status (DSS-5245) and Best Interest Determination (DSS-5137), and provide a copy to the placement provider  
    • NOTE: BID meeting must be held within 7 days of placement (within 5 school days) before school change  
  • SIS Client Entry Form (DSS-5027) completed  
  • Child Placement and Payment System Report (DSS-5094) completed |
| Within 14 calendar days of placement | • Shared Parenting meeting  
• Family Time and Contact Plan developed jointly with parent(s)  
• Family Time and Contact Plan developed for siblings to visit each other (if in separate placements) |
| Within 30 calendar days of placement | • CFT meeting to assess the strengths and needs of the family and child(ren) and develop the Family Services Agreement (DSS-5240)  
• Develop the Transitional Living Plan for any child 14 years old or older  
• Complete the following:  
  • Relative Notifications  
  • Comprehensive physical examination  
  • Health History Form (DSS-5207), and provide copies to the placement provider  
  • Review and update (if needed) the Child Education Status (DSS-5245)  
  • Review of the Family Assessment of Strengths and Needs (DSS-5229)  
  • Review of the Risk Assessment (DSS-5230)  
• Begin the child(ren)’s Life Book |
| Within 60 calendar days of placement | • Adjudicatory Hearing (within 60 days of the filing of the petition, unless the judge orders it be held at a later date) |
### Permanency Planning Services: Required Timeframes

<table>
<thead>
<tr>
<th>Timeframe</th>
<th>Activities</th>
</tr>
</thead>
</table>
| Within 90 calendar days of placement, and every 90 days thereafter (throughout the life of the case) | Complete the following:  
- Permanency Planning Review (DSS-5240)  
- Review and update the Family Services Agreement (DSS-5240);  
- Family Strengths and Needs Assessment (DSS-5229);  
- Family Reunification Assessment (DSS-5227) |
| Every 12 months | Update the Education Status (DSS-5245)  
- Update the Health History Form (DSS-5207)*  
- Complete Redetermination of Foster Care Assistance Benefits and/or Medical Assistance Only (DSS-5120A)  
- Complete credit check for any youth 14 years old or older  
- Photograph of the child |
| Frequency of contacts with parent(s), child(ren), home visits, and collaterals | See Required Contacts Section |
| Documentation | Current within 7 days of any case activity or action |

### Other Required Timeframes

<table>
<thead>
<tr>
<th>Activity</th>
<th>Frequency</th>
</tr>
</thead>
</table>
| Case Staffing | Twice a month for the first 12 months of placement, and once a month thereafter  
- Whenever there is a change in circumstance that impacts permanency |
| Review Hearing and Permanency Planning Hearing | Review hearing held within 90 days of Disposition; subsequent review within 6 months  
- Permanency planning hearing within 12 months of the child entering agency custody; every 6 months thereafter |
| Child and Family Team (CFT) Meetings | In addition to the timeframes noted above, a CFT must be held:  
- Any time there is a change in the permanent plan  
- Any time there is a need to change placement  
- Any time there is a significant change in the case, including a school change  
- Any time the family requests a meeting |
| Family Reunification Assessment (DSS-5227)  
Family Strengths and Needs Assessment (DSS-5229) OR Family Risk Reassessment (DSS-5226) | Track with required Permanency Planning Review / Family Services Agreement Updates  
- See Decision-Making Tools Section for additional requirements |
| Case Closure | Close SIS Client Entry form (DSS-5027)  
- Close Child Placement and Payment System Report (DSS-5094) |
Permanency Planning Services: Required Timeframes

**Permanency Planning – Timeframes in Year 1**

**Child Welfare**
- **Nonsecure custody order issued & Permanency planning begins**
  - **Within 72 hours:**
    - Face to Face with Child(ren)
    - Eligibility Form Initiated
  - **Within 7 days:**
    - Face to face with parents
    - Face to face with placement provider (with all placement providers) in provider’s home
    - Visitation with parents and siblings
    - Child physical exam completed
    - Educational stability addressed
    - SIS Entry Form Completed
    - CPPS Form Completed
  - **Within 14 days:**
    - Shared parenting meeting
    - Visitation plan written (parents & siblings)

**Within 30 days**
- CFT Meeting to develop Family Services Agreement
- Transitional Living Plan (TLP) developed for youth 14-17
- Child comprehensive physical exam & health history form
- Begin child’s life book
- Relative notification
- Review Family S/N Assessment & Risk Assessment/Reassessment
- Educational Services Meeting if needed

**Within 90 days**
- Permanency Planning Review
- CFT meeting to update Family Services Agreement
- Complete S&N Assessment & Family Reunification Assessment

**ongoing**
- Every 90 days
  - CFT meeting to update Family Services Agreement
  - Permanency Planning Review
  - Complete required assessment forms,
  - Update TLP
- Every 12 months
  - Credit checks for youth 14 & older
  - Annual Physical Well-Visit check, Health & education forms
  - Photograph of child

**Court**
- **Nonsecure custody order issued**
  - **Within 7 days:**
    - Nonsecure hearing

**Within 72 hours:**
- Face to Face with Child(ren)
- Eligibility Form Initiated

**Within 14 days:**
- Shared parenting meeting
- Visitation plan written (parents & siblings)

**Within 30 days**
- CFT Meeting to develop Family Services Agreement
- Transitional Living Plan (TLP) developed for youth 14-17
- Child comprehensive physical exam & health history form
- Begin child’s life book
- Relative notification
- Review Family S/N Assessment & Risk Assessment/Reassessment
- Educational Services Meeting if needed

**Within 90 days**
- Permanency Planning Review
- CFT meeting to update Family Services Agreement
- Complete S&N Assessment & Family Reunification Assessment

**Court Reports**
Provide documentation pertaining to:
- Child (needs and strengths),
- Parents (needs, strengths, progress on issues),
- Placement providers
That support recommendations regarding:
- Services needed,
- Visitation, and
- Permanent plan.

**Court Hearings**
Court orders dictate:
Permanent plan, services ordered for children & parent(s), visitation, placement authority, & next court hearing.

**Within 60 days:**
- Adjudication hearing
- Disposition hearing
  (immediately following Adj. or within 30 days of Adj. hearing)

**Within 180 days**
- Review hearing
  (with subsequent review within 6 months)

**Within 12 months:**
- Permanency Planning hearing
  (may be combined with review hearing)

**Case Closure:**
Determined by Court when the permanent plan is achieved.

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### CASE STAFFING / TWO LEVEL DECISION MAKING / ROLE OF SUPERVISOR

The county child welfare supervisor and assigned county child welfare worker must staff each permanency planning case:

- At least twice a month for all cases during the first 12 months of placement;
- At least once a month thereafter; and
- Whenever there is a change in circumstance that impacts safety and/or permanency of the child.

Staffing must cover but not be limited to:

- Safety, **Well-Being** and Permanence;
- Family's strengths and needs;
- Family's progress; and
- Review of the ongoing family and collateral contacts.

Two level decisions/reviews must occur on every permanency planning case at the following times:

- At the time of the development and required reviews of the Family Services Agreement;
- At required Permanency Planning Review (PPR) meetings;
- Whenever there is a potential placement disruption and/or placement change;
- Whenever there is a change in circumstance that impacts the safety or risk to a child(ren);
- Whenever there is a change in circumstance that impacts permanency; and
- Prior to any court review or permanency planning hearing.

Two level reviews of the OHFSA, Family Reunification Assessment, and Family Strengths & Needs must be indicated with signatures of the county child welfare worker and supervisor.

The supervisor must review every permanency planning services case file for compliance with policy and protocol.

### CASE STAFFING

A change in circumstance that impacts safety and/or permanency includes, but is not limited to the following:

- A new safety threat has arisen;
- The child is an **abducted or runaway child**;
- There is a need for a change in placement or a placement disruption has occurred;
- The child's permanent plan has changed, or a review of the plan is needed;
- Preparation for court.

Case staffing can occur in various forms. The focus of case staffing is to ensure that the case county child welfare worker follows NC CW policy, addresses child and family needs, and monitors risk, safety, and family progress. Supervision provides coaching and support to the county child welfare worker. Achieving these goals may be accomplished through an office meeting but could also occur when a supervisor attends a home visit or other family meeting with a county child welfare worker. Participation in the case CFT/PPR Meeting by both the case worker and the supervisor could be considered as a staffing during that month.

### TWO LEVEL DECISION MAKING / ROLE OF SUPERVISOR

Two level decisions for Permanency Planning cases should involve the assigned county child welfare worker and that worker's supervisor. However, there may be circumstances that require another county child welfare worker or another supervisor or a higher-level manager in the agency to participate in the decision making.

The child welfare supervisor should review every permanency planning case record at least quarterly and within two weeks of case closure.
## Permanency Planning Services: Required Forms: Planning Forms

### Legal Basis

**Fostering Connections to Success and Increasing Adoptions Act of 2008, P.L. 110-351** requires county child welfare agencies to exercise *due diligence* to notify all close adult relatives of a child (including any other adult relatives suggested by the parents) within 30 days of the child’s removal from the parent of their options to participate in the care and placement of the child.

**N.C.G.S. § 7B-505(b)** requires county child welfare agencies to make diligent efforts to notify relatives and any custodial parents of the juvenile’s siblings that the juvenile is in non-secure custody and of any hearings scheduled to occur, unless the court finds such notification would be contrary to the best interest of the juvenile. County child welfare agencies are also required to make diligent efforts to notify relatives and other persons with legal custody of a sibling of the juvenile that the juvenile is in non-secure custody and of any hearings scheduled to occur, unless the court finds the notification would be contrary to the best interests of the juvenile.

### Protocol – What you must do

County child welfare agencies must notify all adult relatives of the child within 30 days of the child’s removal from the his/her parent(s)/caretaker(s).

The following are the Relative Notification forms:

- Relative Notification Letter (DSS-5317)
- Relative Interest Form (DSS-5316)

For the purpose of this section, *diligent efforts* mean those efforts are reasonably likely to identify and provide notice to:

- adult relatives and kin suggested by parents;
- adult maternal and paternal, grandparents, aunts, uncles, siblings, great grandparents, nieces and nephews;
- all parents of a sibling where such parent has legal custody of such sibling; and
- relatives and other persons with legal custody of a sibling

Per federal law, individuals are considered siblings of a child even if termination or disruption of parental rights, such as death, has occurred.

### Notification Requirements

The following must be included in relative notifications:

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<td>Notification to relatives is subject to exceptions due to family circumstances such as domestic violence.</td>
<td>The Relative Search Information form (DSS-5318) should also be used to document relative information for the case file.</td>
</tr>
<tr>
<td>The purpose of relative notification is to ensure adult relatives of children under the care and supervision of county child welfare agencies are given the consideration and opportunity to be placement resources and/or to be able to participate in the child’s care plan.</td>
<td>The Relative Notification Letter and the Relative Interest Form should be sent together to identified relatives and kin as they complement each other. The Relative Search Information Form should also be sent with the Relative Notification letter to obtain additional relative information.</td>
</tr>
<tr>
<td>Efforts to notify should include, but are not limited to:</td>
<td></td>
</tr>
<tr>
<td>• Interviewing the child and the child’s parents or caretakers about the child’s relatives and their preferences for placement;</td>
<td></td>
</tr>
</tbody>
</table>
Permanency Planning Services: Required Forms: Planning Forms

- that the child has been removed from the custody of the parent;
- the options the relative has under federal, state, and local law to participate in the care and placement of the child;
- the options that may be lost by failing to respond to the notice;
- the requirements to become a family foster home;
- the services and supports that are available for children in a foster home; and
- how the relative guardians of the child may receive kinship guardianship assistance payments, if the county child welfare agency has elected to offer such payments.

County child welfare agencies may choose an alternate format to notify relatives; however, it must include the minimum criteria listed above to ensure compliance with the federal law.

Relative notification must be an ongoing process. Documentation must include the agency's ongoing efforts to locate and notify relatives.

County child welfare agencies must provide documentation at each permanency hearing of thorough efforts that utilize search technology (including social media) to find biological family members for children.

For more information on placement with relatives see Kinship Care.

- Using family decision-making meetings such as Child and Family Team (CFT) Meetings to ask participants to help identify other relatives of the child;
- Contacting identified relatives and requesting names of other relatives, divulging only information necessary to help identify additional relatives and assess their interest in accepting placement of the child or providing connections;
- Accessing internal county agency databases such as child welfare and child support; and
- Utilizing internet based search tools including social media.

The county child welfare agency should work with parents and caretakers to notify relatives and kin they have suggested, in addition to pursuing those close relatives that are mandated to receive notification.

The county child welfare agency should inform parents of the requirement to notify relatives beyond those they have identified. Parents may be able to provide necessary background and history of these relatives to assist the county child welfare agency in determining their suitability.

In situations of family domestic violence, it may not be appropriate to notify such relatives if it is deemed that it would pose a risk to the child or caretaker. If after a thorough assessment of domestic violence, the county child welfare agency deems that it is not in the child’s best interest to contact a relative or kin, then the justification should be thoroughly documented in the case file.

Upon receipt of the Relative Interest Form, county child welfare workers should follow up with relatives to discuss their desires and options in becoming resources for children.

Relatives who demonstrate ambivalence should receive support from the county child welfare agency to assist them in determining their level of interest and commitment.
Additional relatives and kin may be identified or come forward later in the case and should be afforded the same information and notification as those relatives identified earlier in the case.

The Permanency Planning Review & Family Services Agreement must guide all the agency’s work in providing permanency planning services to children and families at all stages of a permanency planning case.

The Permanency Planning Review and Family Services Agreement form must document all recommendations made by the Permanency Planning Review Team and the Child and Family Team. It must also document the objectives and action steps that guide all of the agency’s work in providing permanency planning services at all stages of the case.

The purpose of the Permanency Planning Review & Family Services Agreement planning process is:

- To clarify with the family reasons for county child welfare agency involvement;
- To focus on the safety, permanency, and well-being needs of the child;
- To identify resources within the family that will help the child achieve a safe, permanent home;
- To involve the family in identifying areas that need improvement;
- To clarify expectations for behavioral change with all persons involved;
- To acknowledge the family’s strengths and commitment to their child; and
- To facilitate the sharing of information, and ensure the appropriateness of the permanency plan, the child(ren)’s placement, the parent(s)’ progress, and the effectiveness of agency and community services are reviewed regularly.

Permanency Planning Review Meetings must be held periodically in order to review the strengths, needs, placement, and permanent plan of each child placed in the custody of a county child welfare agency. The Permanency Planning Review (DSS-5240 Parts I, II &
II) must be completed prior to each Permanency Planning Review Meeting. Recommendations made by the team must be documented on this form.

Permanency Planning Review Meetings must be held:

- within 90 days of removal of the child from the home; and
- every 90 days thereafter until permanency is achieved.

The development of the Family Services Agreement (Parts I, III, IV, & V) must include:

- Involving the entire family, including the parent(s)/caretakers, child(ren), and any other significant family member, in the process;
- Identifying goals that are both realistic and achievable;
- Using family strengths when outlining objectives and activities to attain the goals;
- Spelling out the steps necessary for success; and
- Documenting who will do what and when they will do it.

Family Services Agreements must identify the desired changes and provide documentation of the changes that have or have not occurred. The agreement must address the services to be provided or arranged, expectations of the family, agency, placement provider and community members, target dates, and expected outcomes.

Efforts must be made to involve both parents in the development of the Family Services Agreement. The Agreement must be current and relevant at all times.

Documentation must include the progress or lack of progress in meeting stated objectives and in accomplishing planned activities.

For children in the legal custody of the agency, the Family Services Agreement must:

The Family Services Agreement should reflect both the strengths and needs of the child and family identified in the Family Assessment of Strengths and Needs and the Family Reunification Assessment. The Family Services Agreement should document what must change in order for the parents to meet the needs of the child.

The county child welfare worker should immediately engage the family, both maternal and paternal, in the planning process, which is focused on correcting the conditions that caused the county child welfare agency to be involved in the family.

The information contained in a well-prepared Family Services Agreement should:

- Assure attention to critical needs in the family;
- Guide overall planning and service delivery for families and children;
- Provide structure for the involvement of all parents and relatives;
- Document objectives that parents must meet for reunification and documents behaviorally specific activities necessary to meet objectives;
- Assign responsibility for activities;
- Document the level of progress of the family toward reunification;
- Meet the requirements of Federal and State law;
### Permanency Planning Services: Required Forms: Planning Forms

- Be completed within 30 days of removal of the child from the home;
- Be updated within 90 days of removal of the child from the home, and every 90 days thereafter (these updates track with required Child and Family Team / Permanency Planning Review meetings);
- Be updated within 30 days of the court’s decision to change the child’s permanent plan; and
- Be developed in consultation with any youth who has attained the age of 14 years or older.

**NOTE:** Time frames for reviews are the maximum period of time between reviews. If major changes occur that impact the objectives or activities, a review must be scheduled and the plan updated as soon as possible.

If an Agreement is not completed within 30 days, documentation must reflect diligent efforts made or the rationale for extra time to develop the plan. If an Agreement is not updated, documentation must reflect diligent efforts to engage the family, or the rationale for continuing the previous plan.

The Agreement must be updated at least every 90 days or when circumstances change. The development of the Family Services Agreement documents the implementation of the concurrent plans. If the plan is not updated, documentation must reflect the rationale for continuing the current plan.

The Agreement must be updated at required intervals even if reunification is no longer the primary or secondary plan.

Please refer to the [Permanency Planning Review and Family Services Agreement Instructions](DSS-5240ins) (DSS-5240ins) for more information on how to complete this form.

See [Parent Engagement & Needs Assessment](#) for more information.

- Provide documentation necessary to draw Federal IV-E funding for agency staff;
- Provide documentation for the Court; and
- Document reasonable efforts by the agency, in preparation for termination of parental rights.

The youth may select up to two individuals, other than the placement provider and county child welfare worker, to assist and support the youth in the Family Services Agreement planning process. If the agency has good cause to believe an individual selected by the youth would not act in the best interests of the youth it may reject said individual. One of the individuals selected by the youth may be designated to serve as the youth’s advisor and as necessary advocate for application of the reasonable and prudent parent standard to the youth.

To locate a parent that is in prison, contact the NC Department of Corrections Records Office at 919-716-3200. Contact numbers and addresses for specific prisons can be found on the [NC Division of Prisons](#) website. A public tool for searching offenders is also available online through the [NC Division of Public Safety](#) website. All inmates have a case manager or county child welfare worker that can assist in contacting a prisoner.

If a parent has expressed a desire not to be involved in the child’s life, has never had any involvement in the child’s life, or who refuses any contact with the child, the county child welfare worker should engage that parent to see if there are any possible relatives that may be a resource in supporting the child.
**Family Time and Contact (Visitation) Plan** (DSS-5242)

Within 14 days of placement, a Family Time and Contact Plan for the parents to visit their children must be jointly developed with the child's parents and placed in the record.

A signed Family Time and Contact Plan must be current at all times. If the Family Time and Contact Plan is not signed, there must be documentation as to why it is not signed. Whenever circumstances warrant a change in visitation, a new Family Time and Contact Plan must be developed with the parents within 7 days. Any unsupervised visitation must be approved by the court.

The Family Time and Contact Plan must comply with current court order at all times.

A Family Time and Contact Plan must be developed within 14 days for siblings to visit each other, if placed in separate placements.

A signed sibling Family Time and Contact Plan must be current at all times. Whenever circumstances warrant a change in visitation, a new Family Time and Contact Plan must be developed within 7 days. The agency must review, at least quarterly, the ability to place siblings together.

**Transitional Living Plan** Part A (DSS-5096a); **Transitional Living Plan** – 90 Day Transition Plan Part B (DSS-5096b)

**Transitional Living Plan** – 90 Day Transition Plan Part C (DSS-5096c)

**Transitional Living Plan** – Helpful Resources Part D (DSS-5096d)

The Transitional Living Plan (TLP) must be:
- developed no more than 30 days following the youth’s 14th birthday, or within 30 days of entering custody if 14 years old or older; and

A Transitional Living Plan is specifically designed with youth ages 14 to 17 who are in the custody of the county child welfare agency.

This plan is jointly developed between the agency, youth, placement provider, youth supporters and others who are involved with the youth. It is based on the *life skills assessment* (see 1201. Child Placement Services, VII. Adolescent Services: NC LINKS, Section F., page 17 for information about the life skills assessment) and should directly target those areas that need to be addressed before the youth becomes an adult.
Permanency Planning Services: Required Forms: Planning Forms

- updated at least every 90 days thereafter.

The TLP is required by Federal law as well as state policy.

Fostering Connections Act of 2008 requires that within 90 days prior to a youth aging out of foster care custody at age 18, the agency must develop a plan with the youth to discuss their plans for emancipation from agency custody, therefore Part B of the Transitional Living Plan – 90 Day Transition Plan for Youth in Foster Care (DSS-5096b) – must be developed with the youth that includes the required elements mandated by federal law.

Part D of the Transitional Living Plan – Helpful Resources for Young Adults (DSS-5096d) must be provided to all youth exiting foster care upon their 18th birthday.

The 90 Day Transition Plan should be personalized at the direction of the youth, be as detailed as he or she chooses, and include specific options regarding how to access housing, health insurance, education, local opportunities for mentoring services and continuing services, sexual health, services and resources to ensure the youth is informed and prepared to make healthy living decisions about their lives.

While the Transitional Living Plan is developed to address independent living needs of the youth while in care, the 90 Day Transition Plan for Youth in Foster Care is considered an extension of the Transitional Living Plan as it provides details and resources for the youth after he or she exits care.

The Transitional Living Plan – Helpful Resources for Young Adults should include contact information for resources within the youth’s community. Information from the youth regarding their plans upon exiting care as well as contact information should also be obtained.

### Decision-Making Tools

- **Family Reunification Assessment** (DSS-5227)
- **Family Assessment of Strengths and Needs** (DSS-5229)
- **Family Risk Reassessment** (DSS-5226)

NOTE: When a child enters the custody of a child welfare agency, the Family Assessment of Strengths and Needs and Family Risk Assessment/Risk Reassessment must be reviewed within 30 days by the assigned permanency planning worker.

FAMILY REUNIFICATION ASSESSMENT

The Family Reunification Assessment must be completed when the agency holds legal custody, and the child has been placed outside of the home with a goal of reunification.

The form must be completed at the following intervals:

- At the time of required scheduled **Permanency Planning Review Meetings**;

Before the development of the Family Services Agreement, it is important to review the most recent Family Strengths and Needs Assessment and Family Risk Assessment/Risk Reassessment completed by the Assessor or In-Home Services worker. This will help to inform the development of the plan.

FAMILY REUNIFICATION ASSESSMENT

The Family Reunification Assessment consists of the Family Risk Reassessment, Visitation Plan Evaluation, Reunification Safety Assessment and the Recommendation Summary.

The Family Reunification Risk Reassessment (Part A) results and the Visitation Plan Evaluation (Part B) results indicate if a child(ren) is able to return home, or if a new recommendation regarding another permanent plan should be made to the court.
The Family Reunification Assessment must be completed until parental rights have been terminated or until the children are placed in the home with their biological parents, at which time the Family Risk Reassessment would be completed in its place.

NOTE: When a child has been placed back in the home for a trial home visit, the Family Risk Reassessment is completed in place of the Family Reunification Assessment.

FAMILY ASSESSMENT OF STRENGTHS AND NEEDS
The Family Assessment of Strengths and Needs must be completed when the agency holds legal custody and the child remains in the home, or the child is placed outside of the home.

The form must be completed at the following intervals:
- At the time of required scheduled Permanency Planning Review Meetings; and
- When a child is placed back in the home for a trial home visit, the Family Assessment of Strengths and Needs must be completed within 30 days of recommending legal custody be returned to the parent(s)/caretaker(s).

The Family Assessment of Strengths and Needs must be completed until parental rights are terminated or until case closure.

If families have effectively reduced risk to low or moderate and have achieved at least Moderate compliance with visitation, a reunification safety assessment is conducted, and results are used to determine if the home environment is safe.

The permanency plan guidelines and recommendation sections should guide decisions to return a child(ren) home, to continue with current/concurrent planning, or proceed with a new recommendation for a new permanent plan goal for the next court hearing.

FAMILY ASSESSMENT OF STRENGTHS AND NEEDS
A Family Assessment of Strengths and Needs should be completed with each parent that wants to be involved in the child’s life. This includes completing the Family Assessment of Strengths and Needs with a parent that has had limited contact/involvement with their child. Their needs should be addressed within the Out-of-Home Family Services Agreement either on the same one or on a separate agreement. If a parent expresses they do not wish to be involved in the planning of their child, it is important to ask what it would take for them to become involved. Documentation should reflect the discussion with the parent.

FAMILY RISK REASSESSMENT
The Risk Reassessment should be used to guide decision making following the provision of services to clients. While the initial assessment projects a risk level prior to agency service provision, the reassessment takes into account the provision of services. The reassessment of each family provides an efficient mechanism to assess changes in family risk due to the provision of services. At reassessment, a family may be continued for services or the case may be closed.
### Permanency Planning Services: Required Forms: Planning Forms

- within 30 days of recommending legal custody be returned to the parent(s)/caretaker(s).

NOTE: If a Permanency Planning Review Meeting is not held within 30 days prior to a court hearing, the child welfare agency must prepare the case for court by updating the required decision-making forms, as needed, or document there are no changes.

### OTHER CHILDREN IN THE HOME

As a part of the risk assessment, county child welfare workers must remember the other children that may remain in the parents' home. Frequently, these children have service needs of their own. In many cases, once the "identified child" has been removed, the other children in the home are at greater risk. Thus, the county child welfare worker must continually assess the risk of harm to the remaining children and to incorporate their needs into the Family Services Agreement as necessary. Documentation of these ongoing services and risk assessment must be incorporated into the court report.

For more information, please see Risk and Use of Assessment Tools.

### Child Health Summary Components

The following are the Child Health Summary Components that must be completed at the required intervals:

- **Health Summary Form – Initial** (DSS-5206);
- **Health History Form** (DSS-5207);
- **Health Summary Form – Comprehensive** (DSS-5208); and
- **Health Summary Form – Well Visit** (DSS-5209)

The Child Health Summary Components document current, critical health information about the child. These components must be maintained in the record. A copy of each of the forms, as well as updates to the forms, must be provided to each placement provider and physician that cares for the child.

The Health Summary Form – Initial (DSS-5206):

The American Academy of Pediatrics (AAP) and Child Welfare League of America (CWLA) published standards for healthcare for children and youth in foster care. These standards are designed to help professionals from all disciplines understand the complexity of health problems and the quality of care issues in foster care.

Children and youth in foster care should be seen by a medical provider early to:

- assess for presence of acute and chronic illness;
- assess for signs of acute or severe mental health problems;
- monitor and/or adjust any medications;

Note: Whenever possible, the foster child’s connections and relationships with health care professionals should be maintained. This is especially true if the child has a previously established medical home. If the child comes into care without these
Permanency Planning Services: Required Forms: Planning Forms

- completed by the medical provider at the 7-day physical examination

The Health History Form (DSS-5207):
- completed by the county child welfare worker within 30 days of a child’s initial placement;
- updated every 12 months (in conjunction with the Permanency Planning Review & Family Services Review 12 month update); and
- updated whenever medical circumstances change.

Documentation must reflect dates the revisions were made and the information was given to the placement providers.

Please refer to Health History Form Instructions (DSS-5207ins) for additional information.

The Health Summary Form – Comprehensive (DSS-5208):
- completed by the medical provider at the 30-day comprehensive medical appointment

The Health Summary Form – Well Visit (DSS-5209):
- completed by the medical provider at each well visit
- follow up appointments must occur as recommended by the medical provider

Children in foster care must undergo a physical examination at least every 12 months, or more frequently as recommended by the medical provider.

Within 30 days of entry into foster care, children must have the following comprehensive evaluations scheduled:
- A mental health evaluation, with ongoing monitoring and assessment as needed;
- A developmental health evaluation if under the age of 6, with ongoing monitoring and assessment as needed;
- An educational evaluation if over the age of 5;
- A dental evaluation (NOTE: if known, this should be based on the last time the child had a dental evaluation)

Connections, a medical home for the child should be established and maintained.

All known medical records of the child should be requested as soon as possible.

Copies of health records should be given to the parent/custodian when permanency is achieved.

The Health History Form (DSS-5207) should be an ongoing effort from the time custody is taken to a week prior to the 30 day comprehensive medical visit.
Permanency Planning Services: Required Forms: Planning Forms

<table>
<thead>
<tr>
<th>If, after assessing the child, one or more of the above evaluations are determined to be not needed, documentation as to why must be provided.</th>
</tr>
</thead>
<tbody>
<tr>
<td>If the child ages out of foster care at age 18 or otherwise emancipates from custody, the agency must provide the youth with copies of his/her health records, including all completed Health Status Components, at the point of discharge.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Child Education Status Form (DSS-5245)</th>
<th>Best Interest Determination Form (DSS-5137)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Child Education Status documents current education information about the child. It is maintained in the record and a copy must be provided to each placement provider that cares for the child.</td>
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</tbody>
</table>

**The Child Education Status Form or Best Interest Determination Form**
- within 7 days of a child's initial placement and subsequent placements.
- The Child Education Status Form must be updated:
  - every 12 months (in conjunction with the Permanency Planning Review & Family Services Review 12 month update), and
  - anytime there is a change in schools or when other circumstances change.

A Best Interest Determination (BID) Meeting must be held within 7 days of the child’s initial placement and subsequent placements (within 5 school days).

NOTE: If the child's initial or subsequent placement occurs during a holiday or summer break, a BID meeting must occur within 5 days of school resuming.

If the child is not school age, any developmental needs must be documented on the Child Education Status Form.

Copies of school records should be given to the parent/custodian when permanency is achieved.

For more information regarding education stability, please see [ESSA](#) requirements.
**Permanency Planning Services: Required Forms: Planning Forms**

Documentation must reflect dates the revisions were made and the information was given to the placement providers.

If the child ages out of foster care at age 18 or otherwise emancipates from custody, the agency must provide copies of his/her school records at the point of discharge.

Please see the [Best Interest Determination Form Instructions](DSS-5137ins) and [Child Education Status Form Instructions](DSS-5137ins) for additional information.

**Monthly Permanency Planning Contact Record** (DSS-5295)

**Monthly Permanency Planning Contact Record Instructions** (DSS-5295ins)

Monthly face-to-face contacts with children in county child welfare agency custody must be documented on the Permanency Planning Contact Record.

- The majority (4 out of 6) of the monthly visits must occur in the place where the child lives.
- Time must be spent speaking privately with the child; and
- Observations of interactions between the child and foster/kinship parents must be made.

Supervisors must review and sign the completed Monthly Permanency Planning Contact Record.

Monthly face-to-face contacts must be documented on the Monthly Permanency Planning Contact Record until the child has achieved permanency. The form must continue to be completed when a child has been returned home, but the county child welfare agency retains custody.

Discussion and attention during monthly face-to-face contacts should be on safety and well-being for children in county child welfare agency custody and placement providers. Each item on this tool should be assessed thoroughly, however, exactly how each item is addressed or assessed should be decided by the worker on a case-by-case basis.

Although speaking with the child privately is a requirement, when and how this is done should be decided by the worker on a case-by-case basis.

Any concerns or needs identified during the monthly contact and documented on the Monthly Permanency Planning Contact Record should be addressed during monthly staffing between the child welfare worker and supervisor.

After the Monthly Permanency Planning Contact Record has been signed by the supervisor, the worker should distribute copies of the form to relevant members of the team serving the child, including the agency’s licensing worker, county child welfare agency worker, and the foster/kinship parents caring for the child.
## Protocol – What you must do

### ELIGIBILITY/PAYMENT/REPORTING FORMS

- **Child Placement and Payment System Report** (DSS-5094)
  - **Child Placement and Payment Report Continuation Page** (DSS-5094c)

All data on the Child Placement and Payment System Report must be completed for all children in a county child welfare agency’s custody/placement responsibility, regardless of the child’s living arrangement within 7 calendar days of the child entering county child welfare agency custody.

In addition, the form must be completed on children from other states who are placed in the county under an Interstate Compact Agreement.

The Child Placement and Payment System Report must be maintained and updated as required and when there are any changes related to any field.

Entries on this form are critical for accurate payments to foster placements. Data is collected from other fields that are used for statistical analysis.

### SIS Client Eligibility Form (DSS-5027)

The Services Information System Client Entry Form must be completed within 7 calendar days of the child entering county child welfare agency custody, and updated as required and when there are any changes related to any field. All fields are important and are used for statistical analysis.

The SIS Client Eligibility Form must be used to:
- transmit authorization to service providers to claim reimbursement for services provided;
- open a service client information record in the Services Information System; and

Prior to completing the SIS Client Eligibility Form, agencies should search to see if the child already exists in the system so the information is not duplicated creating two different client identifications.

### Guidance – How you should do it

Every effort to report accurate information on the Child Placement and Payment System Report should be made. Data from this report is used for the Children’s Services Outcomes Reports for counties, and for the Report on Experiences of Children Entering Child Welfare Custody in NC. Data from county child welfare agencies is being scrutinized in identifying strengths in the child welfare system and areas for program improvement. The accuracy of data is critical in this analysis. Data is provided on request to the NC General Assembly, county commissioners, county managers, media, public officials, etc.

For more information on completing this form, please see the **Child Placement and Payment Manual**.
- update service client information in the Services Information System

<table>
<thead>
<tr>
<th>Determination of Foster Care Assistance Benefits and/or Medical Assistance Only (DSS-5120)</th>
<th>Redetermination of Foster Care Assistance Benefits and/or Medical Assistance Only (DSS-5120A)</th>
</tr>
</thead>
</table>

The Determination of Foster Care Assistance Benefits and/or Medical Assistance Only form is the required form used for gathering the information which will assist in eligibility determination for children, under the age of 18, entering county child welfare agency custody.

The form must be initiated by the county child welfare worker within 72 hours of the child entering county child welfare agency custody, and then submitted to the Income Maintenance Case Worker, for a determination regarding AFDC need. The actual determination of IV-E eligibility must be made based on the combination of circumstances around removal, the AFDC eligibility and the contents of the court orders or Voluntary Placement Agreement.

The Redetermination of Foster Care Assistance Benefits and/or Medical Assistance Only form must be completed in order to document ongoing eligibility for minors in county child welfare agency custody. Eligibility for IV-E must be determined every 12 months. At a minimum, redeterminations of IV-E eligibility must be completed before the end of the 12th month.
### Protocol – what you must do

**DOMESTIC VIOLENCE AND PERMANENCY PLANNING**

Assessment for the presence of domestic violence and its impact on the safety of children must occur throughout Permanency Planning Services.

Careful consideration must be given to cases involving domestic violence when:

- Developing the Family Services Agreement;
- Developing and implementing the Family Time and Contact Plan;
- Scheduling and holding combined Child and Family Team (CFT) Meetings and Permanency Planning Review (PPR) meetings;
- Planning Shared Parenting meetings; and
- Assessing the family for reunification.

For more information, please see [Domestic Violence](#).
## Permanency Planning Services: Placement Decision Making: Maintaining One Single, Stable Placement

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<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
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</thead>
<tbody>
<tr>
<td><strong>CHOOSING THE BEST PLACEMENT RESOURCE</strong></td>
<td><strong>PREVENTING PLACEMENT DISRUPTION</strong></td>
</tr>
<tr>
<td>Placement Preparation and Follow-Up</td>
<td>The county child welfare agency should have a plan to manage placement disruption. Documenting the disruptions in both the child’s record and the foster parent’s record can provide valuable information as to what kinds of behaviors a particular foster parent cannot handle. This analysis can guide future placement decisions, as well as identify training needs of the foster parents.</td>
</tr>
<tr>
<td><strong>PREVENTING PLACEMENT DISRUPTION</strong></td>
<td>One of the best tools to manage placement disruption is to plan for placement supports such as regular and consistent respite care. The county child welfare worker should have sufficient contact with the placement provider to know when conditions exist that could lead to disruptions. <strong>Intensive Family Preservation Services</strong>, as available, are also a resource for preventing placement disruptions.</td>
</tr>
<tr>
<td>Placement disruptions must be documented in both the child’s record and in the foster parent’s record.</td>
<td>When a CPS report involves an allegation against a placement provider and the child is placed in the home at the time of the report, the child must only be removed from the home prior to the case decision if a safety threat to the child exists. If the child remains in the home, the county child welfare agency must develop and monitor a Safety Plan that ensures safety until the case decision is made.</td>
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</table>

## PLACEMENT WITH SIBLINGS

### Legal Basis

The [Fostering Connections to Success and Increasing Adoptions Act of 2008, P.L. 110-351](https://wwwacrobat.com) requires that agencies make reasonable efforts to place siblings removed from their home in the same foster care, adoptive or guardianship placement, unless it is contrary to the safety or well-being of any of the siblings to do so.

### Protocol – What you must do

<table>
<thead>
<tr>
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<th>Guidance – what you should do</th>
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</thead>
<tbody>
<tr>
<td>Siblings must be placed together, whenever possible, unless contrary to the child’s well-being or safety.</td>
<td><strong>NOTE</strong>: siblings refer to full or half-siblings, including any relinquished or removed at birth, as well as step-siblings.</td>
</tr>
<tr>
<td>There are times when it is not in the child’s best interest to be placed with siblings because of each child’s developmental, treatment, and/or safety needs. In some situations, for example, children may be endangered by unsupervised contact with their more aggressive or sexually active sibling.</td>
<td>To be separated from siblings adds to the impact of loss and trauma. When siblings are able to remain together in an out-of-home placement, there can be a greater sense of continuity of family. Frequently older children will have had some responsibilities for caring for younger siblings when in their own home, and they may feel worried and protective regarding these siblings if separated from them. Likewise, the</td>
</tr>
<tr>
<td>County child welfare workers must document the basis for the decision not to place siblings together.</td>
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Ongoing efforts to place siblings together must be made and documented in the case record at least quarterly.

Whenever a placement disruption occurs, county child welfare agencies must make diligent efforts to place/keep siblings together.

When siblings are not able to be placed together, county child welfare agencies must arrange and provide frequent supervised or unsupervised visitation and ongoing contact for the siblings in order to maintain their connection to one another. See Sibling Visitation for additional information.

**PLACEMENT OPTIONS**

**Legal Basis**

N.C.G.S. § 7B-505 states:

A juvenile may be placed in a temporary residential placement in:

- A licensed foster home or a home otherwise authorized by law to provide such care; or
- A facility operated by a county child welfare agency; or
- Any other home or facility, including a relative’s home approved by the court and designated in the order.

The statute further states, in placing a juvenile in non-secure custody, the court shall first consider whether a relative of the juvenile is willing and able to provide proper care and supervision of the juvenile in a safe home. If the court finds that the relative is willing and able to provide proper care and supervision in a safe home, then the court shall order placement of the juvenile with the relative unless the court finds that placement with the relative would be contrary to the best interests of the juvenile. If the court does not place the juvenile with a relative, the court may consider whether non-relative kin or other persons with legal custody of a sibling of the juvenile are willing and able to provide proper care and supervision of the juvenile in a safe home. The court may order the department to notify the juvenile’s State-recognized tribe of the need for non-secure custody for the purpose of locating relatives or non-relative kin for placement. The court may order

**Definition of Kinship**

Kinship is the self-defined relationship between two or more people and is based on biological, legal, and/or strong family-like ties. Most people have loosely structured kinship networks that are available in times of difficulty.

When children cannot be assured safety in their own homes, the best alternative resource can often be found within the extended family and other kin.

Informal kinship care arrangements are commonplace in times of shared crisis for many families. Such arrangements are most effective when other members of the family and community resources provide emotional and tangible support to the care provider.

A kinship care placement can be a licensed or unlicensed home of a relative or non-relative kin.
### Permanency Planning Services: Placement Decision Making: Maintaining One Single, Stable Placement

<table>
<thead>
<tr>
<th>Placement of the juvenile with non-relative kin if the court finds the placement is in the juvenile's best interest.</th>
<th><strong>N.C.G.S. § 7B-101(15a)</strong> defines non-relative kin as an individual who has a substantial relationship with the child.</th>
</tr>
</thead>
</table>

**Protocol – What you must do**

**KINSHIP CARE (RELATIVE AND NON-RELATIVE KIN)**

County child welfare agencies must strive to strengthen and preserve the family. Parents must be given a reasonable opportunity to identify and come together with their kinship network to plan for and provide safety, care, nurture, and supervision for the child.

The county child welfare agency must assess the suggested resource to ensure the child will receive appropriate care and must give preference to an adult relative or other kin when determining placement, provided that:

- The placement is assessed by the county child welfare agency to be in the best interest of the child in terms of both safety and nurture; and
- The prospective kinship care provider and the living situation are assessed and determined to meet relevant standards.

The agency must address available and appropriate relatives in each court report, and whether a relative is willing and able to provide proper care and supervision for the child. If the home is assessed to be appropriate, placement must be approved by the court and designated in the court order.

Potential kinship care providers must be informed of:

- the option to become a licensed foster parent, and receive monthly foster care board payments;
- available agency resources, such as Child-Only Work First funds, Child Only Medicaid, childcare, and food and nutrition services benefits;
- any available community resources for free or low-cost clothing or furniture, minor home repairs, or other such incidental needs that may unnecessarily prohibit their approval to provide care for children; and
- child specific needs and agency expectations, including a child-specific alternative discipline plan.

**Guidance – How you should do it**

Whether licensed as a foster home or not, kinship care providers should be valued and treated as partners with the birth family and the county child welfare agency. This includes notifying relatives providing care for a child of any court review or hearing to be held about the child and of their opportunity to be heard in court.

County child welfare workers should use family-centered practice tools, such as **Child and Family Team** (CFT) meetings. CFT meetings provide a model for engaging the kinship network at the earliest stages of agency involvement.

Families, along with the kinship network, should be fully involved in the decision-making process from the point of initiation of services so that the resources and wisdom of the family and its culture can be tapped. The family's understanding incorporates a historical perspective of the problems faced by the family, as well as the efforts to remedy those problems. They are in a position to confront the problems and to help provide realistic supports needed to help the child and their family of origin move toward healing.

The county child welfare agency should engage with the members of the kinship network and share responsibility for planning. This model helps the family, the relatives, and other kin to take ownership of the family's needs, to bring their own resources to address those needs, to reduce the
Permanency Planning Services: Placement Decision Making: Maintaining One Single, Stable Placement

For more information, please see Kinship Providers Protocol and Guidance.

KINSHIP CARE ASSESSMENT: LINCENSURE AND APPROVAL
A thorough assessment must be conducted to evaluate the suitability of the placement, for any potential kinship care provider. The following forms must be completed when assessing potential kinship placements:

- **Initial Safety Provider Assessment** (DSS-5203)
  - completed prior to placement

- **Kinship Care Comprehensive Assessment** (DSS-5204)
  - completed within 30 days of the child entering custody if the child is already placed out of the home; or within 30 days of the child’s placement in the home of the kinship provider (if placed after entering custody).

Refer to the Instructions for Provider Assessments (DSS-5204ins) for additional information.

The status of kinship care assessments must be included in documentation and the court report.

When necessary and appropriate to the needs of the child, the county child welfare agency must make efforts to provide or procure reasonable assistance to help relatives and kin meet assessment and/or licensing standards so they can provide care for the child.

If the kinship care provider wishes to be licensed as a foster parent, the county child welfare agency must determine whether the family meets state licensing requirements; thus, enabling them to receive foster care board payments, Medicaid, and other benefits.

Note: If a placement is determined to be suitable for the care and nurturing of the child, but the home cannot meet all foster care licensing requirements, the county child welfare agency may submit justification for a waiver to the licensing authority. In North Carolina,

likelihood of child placement outside the kinship network, and to provide a system of oversight to the family’s progress in the resolution of the issues.

Kinship care providers should be assessed for their interest and ability to adopt the child or to assume guardianship or legal custody in the event reunification does not occur.

Assessments of potential kinship placements should be based on an understanding of the kinship family’s culture and community, child rearing approaches, and family dynamics, and should focus on the ability of the family to meet the immediate and ongoing needs of the child.

If the child is placed with a non-licensed relative or non-relative kin, services should be provided to assure the kinship care provider has the best chance of meeting the child’s needs for physical and emotional security.

Kinship care providers may need agency supportive services. Some services that are frequently requested by kinship care providers are:

- Relative or “grandparent” support groups open to all kinship care providers regardless of age;
- Assistance navigating the social services system to get approved for food and nutrition services benefits, Work First funds, Medicaid or state supported insurance coverage for the child, child support, or childcare services; and
- Information and referral services to connect with informal and formal services providers in the local community.
Permanency Planning Services: Placement Decision Making: Maintaining One Single, Stable Placement

<table>
<thead>
<tr>
<th>Many licensure requirements may be considered for waiver if approval is in the best interest of the child(ren); if the health, safety and protection of the child is assured, and if the county child welfare agency recommends the waiver(s) be granted.</th>
</tr>
</thead>
</table>

Whether or not the home is licensed as a foster home, county child welfare workers must meet minimum requirements regarding contacts with the child and placement provider to assure the basic physical and emotional needs of the child are being met and the kinship care provider is receiving adequate informal and formal support to meet those needs.

OTHER PLACEMENT RESOURCES

If a relative or non-relative kin cannot be identified as an appropriate placement resource for the child, a licensed foster care placement must be chosen for the child that ensures the child is placed in the least restrictive, most family-like setting available that best meets the needs of the child.

Licensed foster care placement resources must be carefully evaluated and prepared prior to placement to help assure the child will remain in that placement until reunification or another permanent home is achieved.

Licensed Foster Care Placement Resources include:

- A foster family home or group home supervised by the county child welfare agency and licensed by the NC Department of Health and Human Services;
- A child-caring institution which is licensed or approved by the NC Department of Health and Human Services and is in compliance with Title VI of the Civil Rights Act;
- A foster care facility under the auspices of a licensed or approved private childcare or child placing agency. Such foster care facilities must be licensed by the NC Department of Health and Human Services and be in compliance with Title VI of the Civil Rights Act;
- A foster care facility licensed by the NC Department of Health and Human Services as a public or private group home and is in compliance with Title VI of the Civil Rights Act;

If there are no relatives or non-relative kin who are willing and/or able to care for the child long-term, the foster family should be considered the first alternative for permanent placement through adoption.
**Permanency Planning Services: Placement Decision Making: Maintaining One Single, Stable Placement**

- A foster care facility located in another state. The child's placement must have been approved and in compliance with the **Interstate Compact on the Placement of Children (ICPC)**. The other state must agree to supervise the child and the facility must be in compliance with Title VI of the Civil Rights Act and must be licensed or approved by that state;

- A therapeutic home that is a residential facility primarily located in a private residence that provides professionally trained parent substitutes and is licensed by the NC Department of Health and Human Services (NC DHHS);

- A licensed residential treatment facility that provides a structured living environment for children and adolescents who are primarily mentally ill and who may also be multi-handicapped and for whom removal from the home is essential to procure appropriate treatment;

- A licensed residential therapeutic camp that is a residential treatment facility provided in a camping environment which is designed to help individuals develop behavior control, coping skills, self-esteem, and interpersonal skills; or

- A school or institution operated by the NC DHHS
### Permanency Planning Services: Placement Decision Making: Special Legal Considerations in Placement Decision Making

<table>
<thead>
<tr>
<th>Multiethnic Placement Act of 1994 and Amendment (MEPA-IEP)</th>
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<tr>
<td>Indian Child Welfare Act of 1978</td>
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<tr>
<td>Mexican Heritage</td>
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</table>
## Legal Basis

**Reasonable and Prudent Parent Standard**

**N.C.G.S. § 131D-10.2A** states the Reasonable and Prudent Parent Standard is the standard characterized by careful and sensible parental decisions that are reasonably intended to maintain the health, safety, and best interests of the child while at the same time encouraging the emotional and developmental growth of the child that a caregiver shall use when determining whether to allow a child in foster care under the responsibility of the State to participate in extracurricular, enrichment, cultural, and social activities.

In this context, “placement provider” means a foster parent, relative, or non-relative kin with whom a child in the custody or placement responsibility of a county child welfare agency has been placed, or a designated official for a child care institution in which a child in the custody or placement responsibility of a county child welfare agency has been placed.

## Protocol – What you must do

The county child welfare agency must use the reasonable and prudent parent standard when determining whether to allow a child in county child welfare agency custody to participate in extracurricular, enrichment, and social activities.

- This means activities or items that are generally accepted as suitable for children of the same chronological age or level of maturity or that are determined to be developmentally-appropriate for a child, based on the development of cognitive, emotional, physical and behavioral capacities that are typical for age or age group; and in the case of a specific child, activities or items that are suitable for the child based on the developmental stages attained by the child with respect to the cognitive, emotional, physical and behavioral capacities of the child.

Normal childhood activities include, but are not limited to, extracurricular, enrichment, and social activities, and may include overnight activities outside the direct supervision of the caregiver for a period of over 24 hours and up to 72 hours.

## Guidance – How you should do it

Placement providers should be adequately prepared for the placement of the child by being informed of the specific needs of the child. Preparation should be continued after placement of the child, and includes knowledge and skills relating to the reasonable and prudent parent standard for the participation of the child in age or developmentally-appropriate activities, including:

- knowledge and skills relating to the developmental stages of the cognitive, emotional, physical, and behavioral capacities of a child, and
- applying the standard to decisions such as whether to allow the child to engage in social, extracurricular, enrichment, cultural and social activities, including sports, field trips and overnight activities lasting one or more days and involving the signing of permission slips and arranging transportation for the child to and from extracurricular enrichment and social activities.

**Reasonable and Prudent Parent Activities Guide**
County child welfare agencies must verbally inform and provide placement providers with written policy addressing the following issues regarding discipline:

- Corporal punishment is prohibited;
- Child discipline must be appropriate to the child’s chronological age, intelligence, emotional make-up, and experience;
- No cruel, severe, or unusual punishment must be allowed; and
- Deprivation of a meal for punishment, isolation for more than one hour, verbal abuse, humiliation, or threats about the child or family will not be tolerated.

**Applying the Reasonable and Prudent Parent Standard**
**Permanency Planning Services: Out of Home Placement Services: Required Contacts**

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<tr>
<td><strong>REQUIRED CONTACTS</strong></td>
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<tr>
<td>Every contact with a family member and/or placement provider must include:</td>
<td>During the early stages of placement, the child should have close contact with the county child welfare worker, until a relationship with the placement provider is established. Children removed from their homes need special attention and frequent contacts at the time of placement in county child welfare agency custody, as well as any time a move from one placement to another is made.</td>
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<tr>
<td>• An assessment of child safety, risk of maltreatment, and well-being; and</td>
<td>The placement provider and the child should know as early as possible when the next face-to-face contact with the county child welfare worker will be, and when the first visit for the child with the birth parents and/or siblings will be.</td>
</tr>
</tbody>
</table>
|   • An individual interview with each child, separate from the parent/caretaker. | ABSENT PARENTS (See also Parent Engagement & Needs Assessment)

Documentation regarding absent parents and relatives should be reviewed and supplemented. The court will ask about the whereabouts of absent and/or non-residential parents, including legal and biological fathers, at the 7-day non-secure custody hearing, as well as at subsequent hearings. Available information should have been recorded during the child protective assessment phase, but unknown or unsearched information should be updated. The Child Support Enforcement Unit and the Internet White Pages are two useful sources to locate the addresses of missing persons.

**INITIAL CONTACT WITH CHILD (FOLLOWING PLACEMENT)**

A face-to-face contact with the child must occur within 3 calendar days following initial out-of-home placement and any subsequent placements (any time there is a change in placement).

|   • The visit can take place in the home of the placement provider, at school, or in the community. |
|   • Prompt contact following placement provides reassurance to the child and the placement provider. It also allows the county child welfare worker to answer any early questions about the care of the child. |
| NOTE: The 3-day contact with a child(ren) is in addition to any contact or interaction with the child(ren) on the day of placement. |
| Documentation of diligent efforts made and/or rationale for the delay must be provided if the 3-day contact does not occur. |

**INITIAL CONTACT WITH PARENTS (FOLLOWING PLACEMENT)**

Contact must be made with all parents or caretakers within 7 days of initial placement.
### Permanency Planning Services: Out of Home Placement Services: Required Contacts

#### Documentation of diligent efforts made to contact the parents or caretaker(s), and/or rationale for the delay must be provided if the 7-day contact does not occur.

**INITIAL CONTACT WITH PLACEMENT PROVIDER**  
**FOLLOWING INITIAL PLACEMENT OR PLACEMENT CHANGE**  
Face-to-face contact with the placement providers (including both spouses and caretakers, if two are in the home) in the provider's home within 7 days.

**NOTE:** The 7-day contact with the placement provider is in addition to any contact or interaction with the placement provider on the day of placement.

### ONGOING CONTACTS
Out of Home Placement Services must include at a minimum:

**CHILD:**
- Face-to-face contact with the child at least monthly  
- The majority (4 out of every 6) of these visits must be held in the child's residence.  
- The county child welfare worker must have more frequent contact when indicated by the child's needs.  
- The county child welfare worker must spend time meeting with the child alone.  
- The contact must be documented on the **Monthly Permanency Planning Contact Record**.

**PARENT:**
- Face-to-face contact with all parents or caretakers at least monthly, if reunification is the primary permanent plan;  
  - The majority (4 out of every 6) of these contacts must be held in the parent's residence.  
  - If the parent is not residing in the home in which the child will return if reunification occurs, the above requirement must still be met.

**CHILD:**
When meeting with each child, the county child welfare worker should use interviewing strategies and techniques appropriate to the child's developmental level. Workers should use their professional judgment in deciding how to interview a child.

**PARENT:**
If reunification is neither the primary nor secondary permanent plan, the county child welfare worker should maintain contact with the parent(s), at least monthly, until termination of parental rights.

A quality visit with a parent consist of one-on-one contact to discuss all the aspects of the case. This contact should not be made in a group setting, or in the presence of the child. A review
### Permanency Planning Services: Out of Home Placement Services: Required Contacts

- Contact at least monthly, if reunification is the secondary permanent plan.

**NOTE:** If the TPR is on appeal, the above requirements remain in effect.

#### PLACEMENT PROVIDER (LICENSED OR KINSHIP):
- Face-to-face contact with all placement providers (including both spouses and any other adult caretakers, who reside in the home) at least monthly.
  - 4 out of 6 of these visits must occur in the home of the placement provider.
- At least once per quarter, the county child welfare agency worker must assess the home of the placement provider to ensure safety.
  - This must include a tour of the entire home and other buildings on the property.

**NOTE:** If a child is placed in a group home or residential placement, a face-to-face contact must occur with the caregiver(s) that is present at the time of the visit.

#### COLLATERALS:
- Contact with at least two persons significant to a child’s case, other than the placement providers, such as family members who reside outside of the home, relative or non-relative kin, service providers, or others who have information regarding the family, at least once a month.
- The agency must have more frequent contact with collaterals when indicated by the child’s needs.
- Diligent efforts made and/or rationale for the delay must be documented if the minimum requirements for ongoing contacts are not met.

of the Family Services Agreement with the parent should occur at each contact.

#### PLACEMENT PROVIDER:
All members of the home, including adult and minor children of the placement provider should be seen at least quarterly. This will allow the county child welfare worker to observe interactions between all family members and address any concerns more timely.

County child welfare permanency planning workers and licensing workers should coordinate and conduct quarterly visits with licensed foster parents together whenever possible.

If the child is placed through a private child placing agency, the county child welfare worker should make every effort to coordinate and conduct home visits with the private agency worker whenever possible.

#### COLLATERALS:
**Collateral Contacts / Service Collaboration**

Significant persons to the case include service providers, such as; mental health therapists or case managers, school staff, childcare staff, Work First workers, or other professionals working with the family.

The GAL can only be considered a collateral when they provide information regarding the family that the social worker had not previously known.

There should be an effort to speak to a variety of collaterals from month to month and over the life of the case in order to gather
### GUARDIAN AD LITEM:
- Contact with the child’s guardian ad litem at least monthly.

### OTHER REQUIRED CONTACTS WHEN REUNIFICATION IS THE PRIMARY PLAN

When reunification is the primary plan, county child welfare agencies must make contact with all adult household members residing in the home in which the child will return if reunification is achieved, at least 30 days prior to the child’s return home. Background checks on all adult household members must also be conducted prior to the child’s return home.

### OTHER REQUIRED CONTACTS WHEN REUNIFICATION IS THE PRIMARY PLAN

Household members include, but are not limited to, relatives, romantic partners, family friends, roommates, and any other adult residing in the home.

Service collaboration is a vital part of providing comprehensive, family-centered services to families. The focus of service collaboration between agencies is a comprehensive, coordinated community response to address child safety and risk. This may be especially valuable on cases that involve domestic violence.
Permanency Planning Services: Out of Home Placement Services: Ongoing Placement Services

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<tr>
<td>The first thirty days of permanency planning are critical in the child's transition and to the family's engagement in the change process. Assessment and planning are the activities that lay the foundation for the future work with the family and are important tasks in the initial placement process. Assessment and planning should involve collaborative efforts by all the parties involved with the family. The county child welfare worker should obtain as much information about the child and family as soon as possible so appropriate resources may be chosen and so the county child welfare worker can help the placement provider meet the child's needs.</td>
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**REQUIRED SERVICES FOR CHILDREN**

For children who are placed in out-of-home placement, county child welfare agencies must provide the following services:

- evaluate and supervise the placement of children to ensure they are receiving proper care;
- make, at a minimum, monthly visits with children in foster care placement;
- ensure visitation occurs for children and parents to visit each other;
- ensure visitation occurs for siblings to visit each other, if placed in separate placements;
- ensure the child’s well-being needs are met, including emotional and developmental needs;
- engage children in the planning process of the case, including participation in CFT meetings, Permanency Planning Review meetings, and developing Family Services Agreements;
- assist children in mitigating the feelings of grief and loss that result from removal from the home;
- ensure children receive all needed evaluations, educational services, medical care and psychological treatment services through referral to other agencies and providers;
- encourage participation in activities that are age and developmentally-appropriate;
- youth 12 and older must be provided a copy of the **Understanding Foster Care – A Handbook for Youth** (DSS-1516);

Special attention should be given to changes affecting the relationship between the worker and the child/youth, such as changes in frequency of contact, vacation, transfer, or termination of contact through the worker leaving the agency. Changes of the county child welfare worker may bring up the child or youth’s fears of separation and abandonment. These fears can lead to disturbances in behavior and subsequent consequences in their relationships with placement providers, teachers, friends, and others.

Children need and deserve adequate preparation for changes in service delivery and need to understand why changes are taking place. The child’s participation in team planning can help reduce the anxiety both the child and family experiences when individual county child welfare workers leave the agency.

Children, should be given an opportunity to discuss openly their feelings about a placement. This exchange should occur prior to a placement and during the placement. Often the county child welfare worker is the only person the child feels he/she can talk to.

Children under the age of 12 should be provided a copy of the Understanding Foster Care – A Handbook for Youth (DSS-1516), if developmentally-appropriate.
**Permanency Planning Services: Out of Home Placement Services: Ongoing Placement Services**

- youth 14 and older must have a credit report run annually, from each of the three credit reporting bureaus (Equifax, Transunion and Experian);
- develop a Transitional Living Plan with youth ages 14 and older and provide services to help them transition to successful adulthood;
- assess youth ages 16 and 17 to determine their needs for services to prepare them for making the transition from foster care to independent living;
- explain the child’s rights while in foster care placement, and
- create and maintain a life book for each child in foster care.

**AUTHORIZATION FOR HEALTHCARE SERVICES**

Unless the court orders otherwise, county child welfare agencies have the authority to arrange for, provide or consent to the following:

- routine medical and dental care and treatment, including, but not limited to, treatment for common pediatric illnesses and injuries that require prompt intervention;
- emergency medical, surgical, psychiatric, psychological, or mental health care or treatment; and
- testing and evaluation in exigent circumstances.

Counties must obtain authorization to consent from the parent/caretaker for the following:

- prescriptions for psychotropic medications;
- participation in clinical trials;
- immunizations when it is known that the parent has a bonified religious objection to the standard schedule of immunizations;
- child medical evaluations not otherwise authorized by the court;
- surgical, medical, or dental procedures or tests that require informed consent; and
- psychiatric, psychological or mental health care or treatment that requires informed consent.
NOTE: The court may authorize the director to provide consent after a hearing at which the court finds by clear and convincing evidence that the care, treatment, or evaluation requested is in the juvenile’s best interest.

For more information regarding authorization for consent, please refer to General Authorization for Treatment and Medication (DSS-1812) and General Authorization for Treatment and Medication Instructions (DSS-1812ins).

ONGOING NEEDS ASSESSMENT
Physical, dental, developmental, psychological, and/or educational assessments must be scheduled, when needed, within one week from the identification of the need.

LIFEBOOKS
County child welfare agencies must create and maintain a lifebook for each child in out-of-home placement.

The child’s lifebook must be initiated within 30 days of the child entering custody, and updated on an ongoing basis.

The following are items that must be in each child’s lifebook:
- A copy of a certified birth certificate (or date and time of birth, location of birth, and weight and length at birth)
- Schools/daycare centers the child has attended
- Medical information, including immunizations, diseases, and allergies
- Medical history of birth family
- Pictures of the child at various ages
- Names and pictures of siblings
- Pictures of birth parents

LIFEBOOKS
Lifebooks should be updated at least every 90 days, and whenever a significant event occurs, including but not limited to a change in placement or school, graduation, birth of a sibling, and changes to the child’s medical history.

A Lifebook is a tool and a process. It can be applied as a therapeutic tool by assisting the child to cope with their emotions which are a result of the child’s experiences. It can also be beneficial for the child’s therapist to assist in processing exposure to traumatic events. The collecting, recording and processing of the child’s feelings enlightens the “how” and “why” of what has happened. Life books should be used by county child welfare workers as a tool to assist the child to grieve over losses, celebrate successes, begin to heal in preparation for building trust and attachments in foster care, and to prepare for reunification or adoptive placement if reunification is not possible.

Building the life book is a process that involves the continuous collaborative efforts of the child, county child welfare worker, birth parent(s) and foster/adoptive parents. It allows everyone to focus on the child’s current, historical and memorable events and their effects on their life.
Creating a lifebook is a process that continues for the duration of the child’s journey to permanency. The lifebook is one page, one picture, and one story at a time. It can start in the present moment and proceed forward with future events. Early in the work with the child and family, the county child welfare worker should begin building the child’s life book by taking and procuring photographs of the child, birth family and foster placement. Gradually, prior history should be collected from the birth parents (such as pictures and stories) regarding the child to be placed in the life book. Involving the birth parents demonstrates what the child had prior to being placed in an out of home placement as valuable, and imperative to maintain a part of their life. Children will continue to need physical documentation of their histories throughout their time in county child welfare agency custody. It is important to allow the child to personalize their life book by allowing the child to design and capture their story and/or memories that connects to the pictures in the book. The creation of the pages of the life book can be either digital or traditional or a combination of the two formats. The traditional life book can be a three-ring photo album or an expandable scrapbook. Additional items to be placed in the life book should include, but are not limited to:

- The child’s family tree (genogram, dates and locations of parents’ births, physical description of parents, educational/employment experiences of parents, special health information about parents, statements of reason for placement away from parents, number of siblings of parents, and number/ages of other children of the parents)
- Names and pictures of social workers and agencies involved with the child and family
- Names and addresses of foster families or other placement providers, if appropriate
- Letters and/or mementos from parents/relatives or significant others
### Permanency Planning Services: Out of Home Placement Services: Ongoing Placement Services

<table>
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<tr>
<th>Required Services for Parents</th>
<th>Services should be supportive of the parents and the parents should be made aware of the behavioral changes expected as a result of the service.</th>
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<tr>
<td>Parents of children in county child welfare agency custody retain many of their rights, including the right to visit their child, unless the court has ordered that visitation is not allowed.</td>
<td>Risk factors identified during the risk assessment process should be clearly discussed with the parents and extended family. It should be stated clearly to the parents from the beginning that, although reunification is the desired outcome (in cases where reunification is the primary permanency plan), a concurrent permanency plan will also be developed. The parents need to know that the goal is to achieve permanency for their child within one year and that it is in their control to determine whether their child’s permanent home will be with them or in another permanent placement.</td>
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<td>County child welfare agencies must ensure parents:</td>
<td>The family should be informed of the CFT process to develop the Family Services Agreement. The county child welfare worker should assure the parents that they will be treated as partners and full participants in the planning for their child, whenever possible. Parents also have the right to know</td>
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<tr>
<td>• are provided a copy of the Understanding Foster Care – A Handbook for Parents (DSS-5201)</td>
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<td>• have the information to which they are entitled, including a copy of the Family Services Agreement and Family Time and Contact Plan;</td>
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<td>• have information regarding their child’s circumstances, adjustment in placement, and in school;</td>
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<tr>
<td>• are involved in making decisions regarding their child’s placement, whenever possible;</td>
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<tr>
<td>• are included in the development of the Family Services Agreement;</td>
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<tr>
<td>• are invited to participate in every Permanency Planning Review of their child’s case, and are provided adequate notice of meetings;</td>
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- Pictures (birthparents’ home, friends, foster family, pets, schools, special occasions such as birthdays, graduation, Christmas, vacation, awards, etc.)
- Drawings by the child (include any comments by the child regarding drawings or feelings)
- Achievements of child (school, church, athletics, hobbies, activities, developmental milestones)
- Report cards (comments of teach, samples of school work)
- Stories from foster parents / social workers
- Anecdotes (a funny occasion, a scary time, an important experience, jokes)
- Friends’ comments about the child
- Health and medical information (process of dealing with loss, separation and attachment, past abuse, therapists’ names, frequency and duration of therapy, therapy goals, correspondences)
### Permanency Planning Services: Out of Home Placement Services: Ongoing Placement Services

- are notified of their right to attend judicial review hearings and of their **right to be represented by counsel**; and
- are offered services that are appropriate to the needs of the individual and designed to best address the behavior or condition that necessitated the removal of their child.

### PROCEDURAL NOTICE TO PARENTS OF A PLAN TO CHANGE PLACEMENT

Parents must be given written notice of any intended change in the placement of their child. The exceptions to the advance notice are:

- the child’s health or well-being would be endangered by delaying the action; or
- the child would be endangered if prior notice were given.

To comply with the above requirement, the agency must complete the following forms:

- **Notice to Parent Regarding a Proposed Change in the Placement of the Child (DSS-5189I)**
  - This form must be completed by the agency when the decision is made to move the child.
  - This notice specifies the parent has 10 days within which to advise the agency of his/her desire to discuss with the county child welfare worker or the Permanency Planning Review team the plan for the proposed change.
  - If the parent does not agree with the decision of the county child welfare worker or the Permanency Planning Review team, he/she has the right to request the agency file with the Court a motion for review. Pending the hearing on the motion for review, the agency may move the child as planned; however, the court review will determine if the child should continue in the new placement.
  - If the parents of the child are not living together, each parent must be given this notice.

honestly what the agency will do if they do not follow through with the activities and objectives of the Family Services Agreement.

All parents of the child have the same rights and should be involved in case planning for their child. Therefore, it is the duty of the county child welfare worker to make diligent efforts at the time of placement (if not accomplished before) to locate parents, including legal and biological fathers.

Even after legal custody has been removed, parents continue to have the right to information about their child’s living situation and condition as long as reunification is the plan. The parents should be told appropriate details about the placement. When appropriate, the parents should have the opportunity to meet the foster care provider or to see pictures of the home and family where their child will be living.
### Permanency Planning Services: Out of Home Placement Services: Ongoing Placement Services

- **Notice to Parent Regarding a Change in Placement of the Child** (DSS-5189II)
  - This form must be completed by the agency when a child has been moved without prior notice to the parent.
  - This notice specifies the parent has 10 days within which to advise the agency of his/her desire to discuss concerns about the change with the county child welfare worker or the Permanency Planning Review team. If the parent does not agree with the decision of the county child welfare worker or the Permanency Planning Review team, he/she has the right to request the agency file with the Court a motion for review. The court review will determine if the child should continue in the new placement.
  - If the parents of the child are not living together, each parent must be given this notice.

For more information, please see [Parent Engagement & Needs Assessment](#).

### REQUIRED SERVICES FOR PLACEMENT PROVIDERS

All children who are in the custody and placement responsibility of a county child welfare agency must be in a placement licensed by the state, or in a relative or non-relative kinship care placement specifically approved by the court. This includes placement with unlicensed relatives.

County child welfare agencies must provide the following services to all placement providers:

- provide the placement provider with information about the child’s medical needs, medication, any special conditions, and instructions for care prior to or at the time of placement;
- monitor the level of care offered in the placement to ensure the child’s needs are being met;
- provide consistent and ongoing support to the placement provider and facilitate the resolution of problems that occur while the child is placed in their home.
- child-specific training and respite care, as needed;

Placement providers need agency support and the support of one another. The agency should help placement providers to meet by providing space and arranging childcare for meetings on a regular basis. The agency should participate in these meetings so placement providers’ concerns are communicated to the agency.

Placement providers should be valued as partners with the county child welfare agency and family in providing for the best interests of the child. Relatives, non-relative kin, and foster parents who are actively involved in the planning for the child are better prepared to provide a stable placement and often become the best permanency option for children if reunification is unsuccessful.

Good foster parents are valuable assets to every aspect of child welfare services. They are resources for birth families learning to parent appropriately. They are resources for adoptive families learning to care for the child whose
**Permanency Planning Services: Out of Home Placement Services: Ongoing Placement Services**

- referrals to community resources, as needed;
- education and information regarding shared parenting;
- education and information regarding the Reasonable and Prudent Parent Standard;
- work cooperatively with the placement provider in helping the child to overcome the trauma of placement; and
- engage in discussions that are supportive of the placement provider/agency relationship.

**RESPONSIBILITIES OF THE LICENSING WORKER**

The licensing worker must:

- Make a minimum of quarterly visits with the foster parents (including both spouses and caretakers, if two are in the home), and at least half of these visits must be in the foster home.

For more information, please see [Placement Preparation and Follow-Up](#).

**ONGOING RISK ASSESSMENT**

interests they share, or they themselves may become adoptive parents. They have the best access to teach children skills as they learn to be self-sufficient.

Placement providers often hold more credibility as trainers for other placement providers and new county child welfare workers than do professional trainers. Placement providers give their time, their energy, their creativity, their love, and their own resources to care for children in custody and placement responsibility of county child welfare agencies.

When a child is placed out of his/her home, information about the child's medical needs, medication, any special conditions, and instructions for care should be given to the placement provider prior to or at the time of placement.

The licensing worker and permanency planning worker should conduct quarterly visits with foster parents together whenever possible.
Policy

SCHOOL ATTENDANCE

County child welfare agencies must ensure that every child in foster care who has attained the minimum age for compulsory school attendance under state law must be enrolled as a full-time elementary or secondary school student or has completed secondary school.

“Elementary or secondary school student” is defined to include a child that is:

- enrolled in an institution which provides elementary or secondary education in compliance with state law;
- instructed in elementary or secondary education at home in accordance with state law on home schools;
- in an independent study program in elementary or secondary education that is administered by the local school or school district and is in accordance with state law; or
- incapable of attending school on a full-time basis due to the medical condition of the child, which incapability is supported by regularly updated information in the child’s case plan.

EVERY STUDENT SUCCEEDS ACT

Legal Basis

The Every Student Succeeds Act (ESSA) (P.L.114-95) reauthorized the 1965 Elementary and Secondary Education Act (ESEA) and includes new provisions that promote educational stability for children in foster care.

Effective December 10, 2016, these provisions complement those in the Fostering Connections Act and require state educational agencies and local educational agencies to work with child welfare agencies to ensure the educational stability of children in foster care. In particular 42 U.S.C. 671 (a)(30) and 42 U.S.C. 675(1)(G) require both county child welfare agencies and local education agencies collaborate to ensure school changes are minimized, and children in care who do change schools are promptly enrolled. With ESSA “awaiting foster care placement” was removed from the McKinney Vento Act definition of homeless.

ESSA requires assurances that children enroll or remain in their school of origin unless a determination is made that it is not in their best interest. That determination must be based on all factors relating to the child’s best interest including consideration of the appropriateness of the current educational setting and the proximity to the school in which the child is enrolled at the time of the foster care placement. For child welfare county agencies, this requires:

N.C.G.S. §7B-903.1 states that when a child is in the custody of the county child welfare agency, the county director may arrange for, provide, or consent to decisions about matters that are generally made by a juvenile’s custodian, including, but not limited to, educational decisions and consenting to the sharing of the juvenile’s educational information, without obtaining parental consent.
County child welfare agencies are entitled to all educational records of a child in non-secure custody through the **Uninterrupted Scholars Act** (P.L. 112-278).

Each child’s privacy and confidentiality are ensured by the **Federal Educational Records Privacy Act** (FERPA) (20 U.S.C § 1232g; 34 CFR Part 99) and the confidentiality of information provisions in the **Individuals with Disabilities Education Act** (IDEA) (20 U.S.C. §§ 1400-1444).

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<tr>
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<th>Guidance – How you should do it</th>
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<tbody>
<tr>
<td>Every child in the custody of a North Carolina county child welfare agency must have a plan for educational stability. The plan must address:</td>
<td></td>
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<tr>
<td>• School stability;</td>
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<tr>
<td>o A child must remain in their school of origin upon entering the custody of a county child welfare agency or experiencing a placement change, and/or</td>
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<tr>
<td>o A Best Interest Determination meeting must occur before a child changes schools.</td>
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<td>• School enrollment must be completed in a timely manner;</td>
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<tr>
<td>• Educational needs and services;</td>
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<tr>
<td>o A child’s ongoing educational needs must be reviewed at least every 90 days and documented on the Permanency Planning Review/Family Services Agreement (DSS-5240); and</td>
<td></td>
</tr>
<tr>
<td>o Services to address a child’s educational needs must be provided in a timely manner.</td>
<td></td>
</tr>
<tr>
<td>• Documentation regarding educational stability must be maintained in every case file.</td>
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</tr>
</tbody>
</table>

Every child welfare agency must monitor and ensure educational stability for the children in its legal custody.

**ESSA** requires county child welfare agencies must provide assurances that:

- the child’s placement decisions by child welfare agencies consider the appropriateness of the current education setting and the proximity to the school in which the child was enrolled at the time of the placement;

- the county child welfare agency has coordinated with appropriate local educational agencies to ensure the child remains in the school in which the child is enrolled at the time of placement; and
### Permanency Planning Services: Out of Home Placement Services: Educational Stability

- If remaining in the school is not in the child’s best interest, the child welfare agency and the local educational agencies provide immediate and appropriate enrollment in a new school, with all the educational records of the child provided to the school.

Additional requirements with ESSA include each county child welfare agency must:

- Designate a point of contact and notify the school district(s), in writing, that the county child welfare agency has designated an agency point of contact and request the school district(s) designate a corresponding point of contact;

- Develop and implement clear, written procedures to maintain children in agency custody in their current school when in their best interest, and if a determination is made that it is not in the child's best interest to remain in the current school, the county child welfare agency will notify the new school so the child will be immediately enrolled, even if all records normally required for enrollment are not available;

- Document efforts to maintain the child in their current school or if not feasible, document why a change of school was in the child’s best interest;

- Develop and implement clear, written procedures for educational stability that are addressed in each child’s case plan; and

- Collaborate with local school agencies regarding funding for any additional cost of the school transportation for children in agency custody.

### CHILD AND FAMILY TEAM (CFT) MEETING AND BEST INTEREST DETERMINATION (BID)

When it is determined a child must enter the custody of a county child welfare agency, or a child currently in the custody of a county child welfare agency requires a placement change outside of the child’s current school district, the county child welfare agency must schedule a CFT meeting. The following decisions impact educational stability:

- The decision regarding the child’s placement; and
- The Best Interest Determination (BID) regarding the school the child will attend.

Once the decision is made regarding placement for the child, the BID will determine what school the child will attend. Educational professionals must participate in this decision. If the outcome of a CFT is that a child must enter the custody of a county child welfare agency or a placement change is needed, the county child welfare worker should notify the county child welfare agency point of contact whenever an initial placement, placement change, or school change occurred. Each county child welfare agency is responsible for the process to ensure this notification occurs in a timely manner. One of the responsibilities of the county child welfare agency point of contact is data collection regarding compliance with educational stability policy for all children in a county child welfare agency’s custody.
is required, and the BID did not occur during the CFT, the child must remain in their current school until the BID is held.

The outcome of the BID must be documented on the Best Interest Determination Form (DSS-5137). For additional information, please see Best Interest Determination Form Instructions (DSS-5137ins)

School Notification
When the outcome of the BID is that the child will remain in the same school OR if a BID meeting was not held prior to the child’s placement, the Foster Care Notification of Placement (Change) form (DSS-5133) is provided to the current school by either the child welfare agency or the placement provider within one school day of the BID meeting, or within one school day of the child’s placement, if a BID meeting was not held prior to placement. This ensures:
- The school’s records are updated;
- The county child welfare agency obtains the child’s educational records;
- The school determines the mode of transportation for the child; and
- If a BID did not occur prior to the placement, a BID meeting occurs within five school days.

If the outcome of the BID is that the child will enroll in a new school, the Foster Care Immediate Enrollment form (DSS-5135) is provided to the new school by either the child welfare agency or the placement provider within one school day. This ensures:
- The child is immediately enrolled;
- The school’s records are updated;
- The county child welfare agency obtains the child’s educational records;
- The school determines the mode of transportation for the child; and
- An Educational Services (ES) meeting is scheduled by the county child welfare agency within one month (or 20 school days).

When there is a placement change or school change, the county child welfare agency must arrange for transportation until school transportation can be provided for the child to and from the placement and their school (at a minimum until the BID meeting has occurred).

NOTE: The Best Interest Determination Meeting can be waived upon the child welfare agency Director’s approval. Please see the Best Interest Determination Meeting Override form.
**Permanency Planning Services: Out of Home Placement Services: Parent/Child Visitation/Family Time**

### Legal Basis

**N.C.G.S. 7B-905.1** states if the juvenile is placed or continued in the custody or placement responsibility of a county department of social services, the court may order the director to arrange, facilitate, and supervise a visitation plan expressly approved or ordered by the court. The plan shall indicate the minimum frequency and length of visits and whether the visits shall be supervised.

### Protocol – What you must do

<table>
<thead>
<tr>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEVELOPING THE FAMILY TIME AND CONTACT (VISITATION) PLAN</td>
</tr>
<tr>
<td>The Family Time and Contact (Visitation) Plan (DSS-5242) must:</td>
</tr>
<tr>
<td>• state, for each child, the type, level of supervision, frequency, duration, and location of visits</td>
</tr>
<tr>
<td>• be current at all times;</td>
</tr>
<tr>
<td>• revised as often as necessary; and</td>
</tr>
<tr>
<td>• signed by all parties.</td>
</tr>
</tbody>
</table>

**NOTE:** The Family Time and Contact Plan must be signed by the parents. If the parents refuse to sign, the county child welfare worker must document their refusal on the form.

Separate Family Time and Contact Plans must be developed for each parent, if they are not visiting the child together, and for siblings, if placed separately.

Any instance in which there are circumstances that necessitate a change in the Family Time and Contact Plan, the parents must be notified and a new plan developed with them within 7 days.

In addition to the above requirements, the Family Time and Contact Plan must address the following critical elements:

- Attendees/Participants approved by the child welfare agency to attend the visits;
- Transportation arrangements for the parents and the child;
- Family Time and Contact Plans should be addressed in every court hearing and reflected in every court order, particularly when unsupervised visits are considered.

Often, parent attorneys advise parents not to sign anything. In that case, the parents’ attorney should be involved in developing the Family Time and Contact Plans.

Visitation between parents and their children is a right and a responsibility retained by parents. It has been demonstrated that children who have frequent, meaningful visits with their parents are more likely to return home. Visits provide a good indicator of the possibility of reunification, and they provide the court and other agencies with documentation of the parent's progress.

Frequent and meaningful visitation between parent/child should occur because:

- Visits maintain and improve the parent/child relationship;
- Visits enable children to see their parents realistically and rationally and can help to calm separation fears;
- Visitation is often the only means of maintaining, improving, or developing the child’s relationship with his/her parents;
- Visits provide the opportunity for parents to improve their parenting skills and to demonstrate their ability to care for their child; and
• Individuals, other than the parents, with whom the child may visit;
• Whether visits will be supervised or monitored, and by whom; and
• Whether other kinds of contacts are appropriate such as telephone calls, emails or letters, skype, or social media, and if monitoring of them is needed.

Parents must also be informed of the following regarding visitation:
• Anticipated changes in the visiting arrangements as the case progresses;
• Advance request for visits other than those regularly scheduled;
• Explanation of possible consequences if the parties do not carry out their responsibilities; and,

Unsupervised visitation between the parent(s) or caretaker and child must not occur without prior court approval.

• Visits provide the county child welfare worker the opportunity to observe and to evaluate the parent-child relationship.

Visits can be a motivator for parents who are making progress on the objectives of their Family Services Agreement. When county child welfare workers have observed parent’s progress, they can ask the Court to review the Family Time and Contact Plan and revise it to allow more frequent visits, longer visits, or unsupervised visits, as appropriate.

Children need visits to:
• Keep a connection to their family;
• Mitigate their grief;
• Have their worth reaffirmed;
• Have the assurance that their parents “exist”; and
• Re-establish and strengthen a relationship with their parents.

Parents Need Visits To:
• Remain attached to their children;
• Stay motivated to work for reunification;
• Practice what they have learned in treatment and improve their parenting skills;
• Understand the unique needs of their children;
• Mitigate their grief;
• Re-establish and strengthen a relationship with their child; and
• Demonstrate their attachment and parenting abilities.

During the development of the Family Time and Contact (Visitation) Plan, parents should be made aware of the child welfare agency’s expectations around bringing extended family members and friends to the parent/child visitation. Visits should be focused on the connection between a parent(s) and their child(ren). The court and/or Family Time and Contact Plan should indicate who (in addition to the parent(s)) can participate in visits, including the frequency and length of time.
CONDUCTING VISITATION
County child welfare workers must observe and document the following during visits:
- Who participated in the visit;
- How long the visit lasted;
- How the parent(s) greeted the child(ren);
- What the child(ren)’s response was;
- How the parent(s) and child(ren) interacted;
- What activities took place / how the time was spent;
- Whether the parent(s) set limits or disciplined the child(ren);
- Whether the parent(s) was attentive to the child(ren)’s needs;
- Whether the parent(s) and child(ren) displayed affection;
- How the child(ren) behaved;
- Whether it was necessary for the child welfare worker to intervene at any point;
- How the parent(s) and child(ren) separated;
- What happened after the visit; and
- Whether the worker provided coaching or modeling for the parent(s).

RESTRICTION OF FAMILY TIME AND CONTACT (VISITATION)
Family Time and Contact Plans are required, and parent/child visitation must continue until the court orders termination of visitation, or termination of parental rights. Before visits can be limited or terminated, the agency must:
- Identify specific parental behaviors which are upsetting to the child;
- Demonstrate the child’s difficulties are not a child’s normal anxiety response to parent-child visits, and they have destructive effects;
- Assess parents’ ability to respond to their children’s needs;
- Prepare the child and parent for reunification;
- Assist parents to understand the child’s needs and behaviors;
- Guide and observe parents’ responses to child’s behaviors;
- Observe parents’ relationship with their child;
- Observe changes in parents’ behavior over time;
- Observe child’s reactions and responses to parents; and
- Document all the above and thus provide evidence to support the permanent plan.

The physical separation that is created by foster care placements does not eliminate the attachment between the parent and the child. Separations will have a marked effect on both the child and the parents. The emotions created by separation and the grieving that results may be difficult and will be intensified during and after visits. Thus, parental behavior during visits may be unpredictable and disturbed and may have damaging effects on the child. When problems and negative reactions occur, they should be handled first by clarifying why the problems are occurring and what can be done about them. If this does not lessen the problems, limiting different aspects of the Family Time and Contact Plan should be tried before considering terminating visits completely.

Visitation should occur frequently and in a positive, natural setting. County child welfare workers should be creative in implementing visitation to assure frequent and positive visitation. Limiting visits to what is convenient for the agency limits the agency’s knowledge of the parent’s ability and limits the parent’s opportunity to learn and demonstrate how to care for their children. County child welfare workers should think creatively about visitation to make visitation a real tool for assessing families and for mitigating the grief and loss experience of children who have been removed from their homes.

Strategies for creative visitation include:
- Ask the foster parents. Visits in the foster home allow the parent to observe a positive approach to child care; allow the
- Demonstrate reasonable efforts have been made to explain to parents the implications of not working to improve visits;
- Support the decision through consultation with medical, psychiatric, or other appropriate professionals;
- Petition for a court order limiting visitation, even if parents agree with this plan.

Visitation must not cease or be withheld based on a parent’s substance use or a positive drug screen alone. There must be other factors supporting the agency’s recommendation to cease visitation.

NOTE: County child welfare agencies must continue to have contact with the parent(s) even if visitation has been ceased, unless there has been a completion of termination of parental rights.

| Demonstrate reasonable efforts have been made to explain to parents the implications of not working to improve visits; |
| Support the decision through consultation with medical, psychiatric, or other appropriate professionals; |
| Petition for a court order limiting visitation, even if parents agree with this plan. |

child to see all those who care for him/her as allies; and begin the building of a potential permanent resource for the future. This promotes a sense of partnership between the foster parents and birth parents.

- Think about school and day care. Most children would welcome lunch with their parents and most schools not only allow it but encourage this. Day care providers may also cooperate with encouragement. The parent can learn about this most important aspect of their child’s life, and meet the teacher or day care provider.

- Include the parents at the doctor or dentist appointments. This provides the parent with the opportunity to take the responsibility for medical concerns when possible and keeps the parent informed. It can also reassure the child who may be fearful.

- Take the visits outside the agency. Parks, playgrounds, fast-food restaurants, and other places allow for visits that more closely resemble normal parent child interaction.

- Recruit volunteers and make them visitation specialists. Transportation and the need for supervision should not limit the opportunity for visits. Volunteers may also become role models and mentors.
## Legal Basis

The [Fostering Connections to Success and Increasing Adoptions Act of 2008, P.L. 110-351](https://www.gpo.gov/fdsys/pkg/PLAW-110publ351/pdf/PLAW-110publ351.pdf) requires that agencies make reasonable efforts to facilitate visitation or ongoing contacts with those that cannot be placed together, unless it is contrary to the safety or well-being of any of the siblings to do so.

### Protocol – What you must do

<table>
<thead>
<tr>
<th>Siblings who are not placed in the same placement together must have frequent and ongoing visitation, unless it is contrary to the siblings’ well-being or safety.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sibling visitation includes visits between the child and any sibling, including biological and/or step-siblings with whom they have a significant bond, and whom they are not currently placed with. This also includes adult siblings of the child.</td>
</tr>
</tbody>
</table>

### Guidance – how you should do it

<table>
<thead>
<tr>
<th>Preserving connections between siblings is critical for children who have been removed from their family.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sibling bonds are among the strongest bonds humans ever experience. They are emotionally powerful, and critically important not only in childhood but over the course of a lifetime. Sibling relationships can provide a significant source of continuity, which allows children to maintain a positive sense of identity as well as knowledge of their family history. It also keeps them connected with their cultural background.</td>
</tr>
<tr>
<td>When siblings are placed separately, placement providers should be encouraged to plan for and host sibling visits and activities.</td>
</tr>
<tr>
<td>When appropriate, county child welfare workers should ensure that siblings are informed of significant life events that occur within their family, including but not limited to, the death of an immediate family member, the birth of a sibling, and/or significant changes regarding a sibling, such as changes in placement, hospitalizations, or changes in the permanent plan.</td>
</tr>
</tbody>
</table>
Legal Basis

The Preventing Sex Trafficking and Strengthening Families Act (P.L. 113-183) requires agencies to identify, document, and determine appropriate services for any child or youth in the placement, care, or supervision of a county child welfare agency who is at-risk of becoming a sex trafficking victim or who is a sex trafficking victim. Agencies must report immediately (no later than 24 hours) to law enforcement children or youth who the agency identifies as being a sex trafficking victim. Agencies must also have protocols in place to locate children missing from foster care, determine the factors that lead to the child’s being absent from foster care, and determine the child’s experiences while absent from foster care, including whether the child is a sex trafficking victim. Agencies must report immediately (no later than 24 hours) to law enforcement any missing or abducted children for entry into the National Crime Information Center (NCIC) database, and to the National Center for Missing and Exploited Children.

Each local child welfare agency must follow the policy below for reporting, locating, and returning children missing, runaway, or abducted from foster care.

Definitions

Abduction of Children – Per N.C.G.S. § 14-41 any person who, without legal justification or defense, abducts or induces any minor child who is at least four years younger than the person, to leave any person, agency, or institution lawfully entitled to the child’s custody, placement, or care.

High Risk Child – The missing child’s safety is severely compromised for one or more of the following reasons:

- The child is believed to be or has been abducted;
- The child is believed to be in the company of adults who could endanger their safety;
- The child is younger than 13 years of age and/or is believed to be out of the zone of safety for their age or developmental stage;
- The child has one or more health conditions that, if not treated daily, will place the child at severe risk;
- The child is drug dependent, including prescribed medication and/or illegal substances, and the dependency is life-threatening;
- The child has severe emotional problems that, if not treated, will place the child at severe risk;
- The child has a developmental disability that impairs the child’s ability to care for him/herself;
- The child is pregnant and/or parenting and the infant/child is believed to be with him or her;
- The child is missing more than 24 hours before being reported to law enforcement;
- The child is believed to be in a life-threatening situation;
- The child’s absence is inconsistent with their established patterns of behavior and the deviation is not readily explained;
- The child is known or believed to be a victim of human trafficking (sex trafficking, labor trafficking, or both); and/or,
- Other circumstances involved in the disappearance that would cause a reasonable person to conclude that the child should be considered “at imminent risk”
### Kidnapping – Per N.C.G.S. § 14-39
Any person who shall unlawfully confine, restrain, or remove from one place to another, any other person 16 years of age of over without the consent of such person, or any other person under the age of 16 years without the consent of a parent or legal custodian of such person.

### Missing Child – Per N.C.G.S. § 143B-1011
A juvenile as defined in N.C.G.S § 7B-101 whose location has not been determined, who has been reported as missing to a law enforcement agency, and whose parent’s, spouse’s, guardian’s or legal custodian’s temporary or permanent residence is in North Carolina or is believed to be in North Carolina.

### Missing Foster Child
A child who has either left voluntarily (ran away) or involuntarily (abduction, kidnapped, or lost), and cannot be accounted for by the agency responsible for their care and placement.

### Runaway
A child who has voluntarily left their placement provider or home and whose whereabouts are either unknown by the child’s parent, guardian, custodian, caretaker, foster parent or county child welfare worker or whose whereabouts are unknown by the child’s parent, guardian, custodian, caretaker, foster parent or county child welfare worker but whom maintains periodic contact with the county child welfare worker or others.

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
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<tr>
<td><strong>REPORTING REQUIREMENTS</strong></td>
<td>Factors that should be assessed to determine a child or youth’s risk of running away include, but are not limited to:</td>
</tr>
<tr>
<td>County child welfare workers and their supervisors must notify the individuals, agencies and organizations described below upon learning that a child is missing. Immediate notification to law enforcement is critical.</td>
<td>Factors that should be assessed to determine the child’s risk of being abducted by a parent of family member include, but are not limited to:</td>
</tr>
<tr>
<td>Placement providers, including foster parents, relative and non-relative kin, and staff of residential facilities must immediately report any missing child or youth to:</td>
<td>• Family members have threatened abduction (or there has been a prior incidence of abduction);</td>
</tr>
<tr>
<td>• A local law enforcement agency; and</td>
<td>• Limited ties to the area or have family/social support in another community;</td>
</tr>
<tr>
<td>• The child welfare agency</td>
<td>• History of mental illness;</td>
</tr>
<tr>
<td>The placement provider must obtain the number of the missing person report from the law enforcement officer taking the report and provide the report number to the county child welfare worker.</td>
<td>• Feel alienated from the legal system;</td>
</tr>
<tr>
<td><strong>REQUIREMENTS FOR COUNTY CHILD WELFARE WORKERS</strong></td>
<td>• History of child abuse/neglect;</td>
</tr>
<tr>
<td></td>
<td>• History of alcohol/substance abuse;</td>
</tr>
<tr>
<td></td>
<td>• History of unlawful behavior and/or arrests;</td>
</tr>
<tr>
<td></td>
<td>• Do not accept relevant court orders;</td>
</tr>
<tr>
<td></td>
<td>• Exhibit a desire to retaliate;</td>
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</tbody>
</table>
When a county child welfare agency learns a child or youth for whom the agency is legally responsible is missing, the agency must:

- Provide immediate verbal notification to the appropriate law enforcement agency, and follow-up by sending a subsequent written notification within 48 hours; NOTE: A copy of the law enforcement report must be obtained for the case file.
- Provide immediate verbal notification to the child’s family (if the child is not believed to have been abducted by family members) and GAL and discuss collaborative efforts that all parties can take to locate the child;
- Provide immediate notification (no later than 24 hours) to the National Center for Missing and Exploited Children (NCMEC) at 1-800-843-5678. The county child welfare worker must provide NCMEC with the missing person’s report number from the law enforcement report and current photograph of the missing child;
- File a motion with the court within 10 to 14 business days after the child was known to be missing to inform of the child or youth’s status and efforts being made towards locating the child or youth; and
- Document notification to the appropriate parties (law enforcement, parents and caretakers, NCMEC, GAL, and the court) and the agency’s continuing efforts to locate the child or youth and collaborate with law enforcement, GALs, family members, NCMEC, and other appropriate persons.

These tasks must be completed within 24 hours of the time of notification.

Information that must be shared with law enforcement includes:

- History of short-term employment or unemployment; and
- Stability of relationship with the other parent.

NCMEC will fax the county child welfare worker a questionnaire which includes an Information Release and Verification Form requiring the guardian's signature. The county child welfare worker may sign the form in lieu of the guardian, but must cross out the word “guardian” and write "caseworker". This form is to be completed and faxed back to NCMEC.

Upon receipt of the release of information and the child’s photograph, NCMEC will publish the child’s photograph on its website and distribute posters of the child both locally and nationally. The child’s name and identifying information will be published with his/her photograph, but the child/youth will not be identified as a foster child in the legal custody or under the placement responsibility of the county child welfare agency. Providing information to NCMEC, including the child’s photograph, DOES NOT violate North Carolina confidentiality laws and rules.

It is important to inform law enforcement about any circumstances that could severely compromise the safety of a child or youth who is missing. These circumstances include anything that would fall in the definition of a high risk child.

- The child has a developmental disability that impairs the child’s ability to care for him/herself;
- The child is pregnant and/or parenting and the infant/child is believed to be with him/her;
- The child is missing more than 24 hours before being reported to law enforcement;
- The child is believed to be in a life-threatening situation;
The child or youth’s full name, aliases and nicknames, age and date of birth, social security number, driver’s license number (if applicable), and other biographical information;

- A description of the child or youth (i.e. height, weight, hair color, eye color, skin color, braces, clothes worn, book bag, shoes, contact lenses or glasses, dentures, gold or silver teeth, any impairments [physical, hearing, speech, vision], moles, scars, body piercings, tattoos) and recent photographs;
- Physical or psychological conditions, developmental delays, or any condition that may affect the ability of the child or youth to respond to environmental dangers;
- Other factors of endangerment, such as young age, hazardous location, medical needs, disability, etcetera;
- Medication and/or history of suspected substance use/abuse;
- A copy of the most recent court order granting legal custody of the child or youth and other relevant facts about the child or youth’s custody status;
- Type of missing episode (if known), including runaway, family abduction, non-family abduction, or other;
- When, where, and with whom the child or youth was last seen;
- Possible method of travel (i.e. car, bicycle, public transportation, or on foot);
- Names and addresses of friends, relatives, present and former placement providers, including child care facilities/staff, and acquaintances;
- Locations the child or youth is known to frequent;
- Suspected destinations and accomplices; and
- Prior disappearances and outcomes.

If a child or youth is identified as “high risk,” this must be communicated to law enforcement.

The child’s absence is inconsistent with their established patterns of behavior and the deviation is not readily explained;

- The child is known or believed to be a victim of human trafficking (sex trafficking, labor trafficking, or both); and/or
- Other circumstances involved in the disappearance that would cause a reasonable person to conclude that the child should be considered “at imminent risk.”
## REQUIREMENTS FOR SUPERVISORS

Upon notification that a child or youth is missing, the supervisor must:

- Within 24 hours, confirm the worker has completed all of the required reports and contact as described above;
- Assist the worker in developing and implementing a plan that contains specific strategies to locate the missing child or youth and assure the child and youth’s safety as quickly as possible. The plan must be documented in the case file, and must include daily and weekly activities to locate the child. The plan must be revised, as needed, to ensure progress is made toward locating the child and establishing safety; and,
- After initial reporting requirements are completed, the supervisor must meet with the worker on a weekly basis (if the child is high-risk, the worker should provide daily progress reports to the supervisor) to:
  - Review the ongoing strategies and efforts to determining the child or youth’s whereabouts;
  - Review contact with law enforcement and others;
  - Determine what additional steps may be taken to assist in finding the child;
  - Develop a placement plan for when the child is located; and,
  - Confirm the worker completes appropriate changes to the Child Placement and Payment Record.

All supervisory meetings must be documented in the case record.

### SEARCHING FOR MISSING CHILDREN AND YOUTH

Any time a child or youth is missing, regardless of whether the child has run away, was abducted, or is otherwise absent from care, the following steps must be followed in order to facilitate locating the child or youth:

When a child is located, careful consideration should be given to their ongoing placement. When deciding whether to return the child or youth to their last placement he/she was in before being reported as runaway or missing, the county child welfare
• Develop a plan with specific strategies to locate the child;
• County child welfare workers and supervisors meet, at a minimum, on a weekly basis to locate the child. If the child is high-risk, the worker should provide daily progress reports to the supervisor regarding efforts to locate the child or youth; and
• In consultation with the supervisor, workers should review and/or revise the plan, as needed, to ensure progress is made toward locating the child and establishing safety.

In addition to the steps described above, specialized interventions must be considered, depending on whether the child has been abducted, is missing, or is missing with periodic contacts with the worker.

Abducted Children and Youth: If the child has been abducted or is believed to have been abducted, the agency’s efforts to locate the child must focus on the abductor and the agency must work closely with law enforcement on location efforts. In addition, workers for children who have been abducted must do the following on a weekly basis:

• Contact law enforcement to both provide and obtain any new information regarding the alleged/suspected abductor;
• Contact the assigned NCMEC case manager; and
• Contact relatives, previous caregivers, friends of the child or any other individuals in the child’s family or social support network to obtain new information on the suspected/alleged abductor and the child or youth.

Missing Children and Youth: When a child’s whereabouts are unknown and/or the circumstances of the child’s disappearance are unknown, the worker must make a sustained effort to locate the child by contacting the following individuals, agencies, or organizations each week:

• The worker should interview the caregiver and the child separately to determine why the child ran away. Workers should also discuss the reasons given by the caregiver and the child with a supervisor to determine whether the reasons for the child running away are related to the placement itself, or whether placement stabilization or other services would be beneficial.

If the child or youth was missing from care for another reason (i.e. they did not run away) county child welfare workers should carefully assess the factors associated with the child or youth’s disappearance and their experiences while absent from care in order to address possible safety and risk issues and plan for placement accordingly.

If the child or youth has a history of running away or indicates that he or she will not accept any placement selected by the agency, the worker should discuss with the child or youth where he or she wants to live or what type of placement he or she is willing to accept. Such alternate placements may include:

• A relative with whom the child is comfortable and has a relationship;
• A former caregiver or another adult with whom the child has formed a relationship and with whom the child expresses a desire to be placed;
• An independent transitional living arrangement, if appropriate; or,
• Reunification with the child’s parent(s).

Any or all of these placement options must meet certain requirements, depending on the placement type, including any necessary approval by the court.
**Permanency Planning Services: Out of Home Placement Services: Agency Plan for Abducted and Runaway Children**

- Local police, sheriff’s office, or other law enforcement agency working to locate the child or youth;
- Local emergency shelters and homeless youth programs;
- Most recent caregiver and any other caregivers with whom the child or youth is known to have had a close or long-term relationship;
- Relatives, including the child’s parents and siblings;
- Neighbors and landlord of the child’s last known address;
- Close friends and classmates of the child, including any known boyfriends, girlfriends, or anyone else in the community with whom the child may have developed a significant relationship;
- Teachers, counselors, and other school personnel from the school the child last attended if there is knowledge that the child had close relationships with persons at the school;
- Employees of the county child welfare agency, or placement provider who may have knowledge of the possible location of the child or youth;
- Probation offices, when appropriate; and
- County juvenile or adult detention centers.

**Missing Children and Youth with Periodic Contacts:** The county child welfare worker must make every effort to return the child to an authorized placement. In addition to completing contacts listed above, the following information must also be sought from the missing child or youth:

- The child’s location at the time of the contacts;
- Any information about where he/she is staying or for any period;
- Any information about the individuals that may be with the missing child/youth;
### Guidance – How you should do it

#### PREVENTING CHILDREN AND YOUTH FROM RUNNING AWAY

Prevention efforts on the part of county child welfare agencies should include, at a minimum, the following activities:

- Maintaining administrative oversight of its program and practice to ensure agency compliance with laws and policies concerning case contacts, reviews and hearings;
- Maintaining photographs of foster children in the case record;
- Designing the work schedules of staff to be sufficiently flexible to meet the child’s needs;
- Strictly enforce requirements regarding the frequency of direct contact with foster children;
- Assuring supervisory review and staffing of all permanency planning cases on a regular schedule;
- Recruiting and supporting foster homes in communities from which foster children come into care;
- Training foster parents regarding the dynamics of human trafficking cases and the specific needs of children and youth who have been trafficked;
- Educating individual foster parents and placement providers regarding the specific needs of the child or youth for whom they are providing care;
- Utilizing the child or youth’s Permanency Planning Review (PPR) meetings to facilitate community service provision and collaboration to meet individual needs; and
- Maintaining close communication with foster parents, group home staff, and Guardians ad Litem (GALs) to assure that information is shared on a timely basis;

In addition to these agency-level runaway prevention efforts, county child welfare agencies should engage in individualized, case-by-case runaway prevention strategies. This is particularly important if the agency identifies that a child or youth is at risk of running away from their placement or have a history of running away from their placements or previous caregivers (including their biological families).

The following are runaway prevention strategies that can be utilized with all children and youth in county child welfare agency custody and can be tailored for the specific needs of the individual:

- Information about the health and safety of the child/youth (if parenting, also inquire about the health and safety of the infant or child);
- Whether he/she is attending school and where;
- Whether he/she is employed and where; and
- Any contact he/she has made with family members, friends, probation and parole agents, and etcetera.
- Increase protective factors by ensuring foster parents and care providers are implementing the reasonable and prudent parent standard and that children and youth have regular opportunities to engage in age or developmentally-appropriate activities;
- County child welfare workers should provide a continuous relationship with children and youth in county child welfare agency custody through case planning, case management and frequent visits;
- County child welfare workers should assist children and youth in their personal, social, and emotional development while they are in foster care, in continuing relationships with members of their own family and other persons; and in addressing problems they face because of placement;
- County child welfare workers should provide referrals to counseling or other services for children and youth, as needed; and
- The frequency and intensity of contact should be determined by the individual needs of the child, but no less than monthly face-to-face contact. More frequent contacts with children and youth should be considered if there is a history of prior runaway events or if the child or youth would be at high-risk if they were to leave placement.
## Permanency Planning Services: Shared Parenting

<table>
<thead>
<tr>
<th>Policy</th>
<th>Legal Basis</th>
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</thead>
<tbody>
<tr>
<td>Foster parents must engage in shared parenting by:</td>
<td>North Carolina Administrative Code 70 E .1104 requires that foster parents shall develop partnerships with the children and their parents or guardians, help children maintain and develop relationships that will keep them connected to their pasts, and help children placed in the home build on positive self-concept and positive family, cultural, and racial identity.</td>
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<tr>
<td>• developing partnerships with the children and their parents or guardians</td>
<td></td>
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<tr>
<td>• helping children maintain and develop relationships that will keep them connected to their pasts;</td>
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<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
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</thead>
<tbody>
<tr>
<td><strong>Within 14 days of a child being placed out of the home by a county child welfare agency, a shared parenting meeting between the parent(s) and the placement provider must occur.</strong></td>
<td>The initial shared parenting meeting should be held as soon as possible after the child enters county child welfare agency custody, but no later than 14 days.</td>
</tr>
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</table>

County child welfare agencies must require shared parenting in all cases where a child is placed out of the home. This includes placement in:

- Licensed foster homes (therapeutic and family foster care);
- Relative and Non-Relative Kinship placements;
- Group home placements; and
- Any other placement in which the county child welfare agency has legal custody of a child and the child is separated from their parent or caretaker.

Foster parents, whether licensed by a private agency or a county child welfare agency, must participate in shared parenting, as this is taught within the Trauma-Informed Partnering for Safety and Permanence Model Approach to Partnerships in Parenting- (TIPS-MAPP) training. The 10-week training curriculum is used as a tool in the

When deciding when and where the shared parenting meeting should be held, the county child welfare worker should:

- Take into consideration the work schedules of the foster and birth parents as well as children’s schedules, especially if there is a need for child care while the adults discuss parenting issues; and

Shared parenting and shared parenting meetings can be an intimidating process for both foster and birth parents. Much like Child and Family Team meetings, preparation is the key for shared parenting to succeed. This requires advanced planning by county child welfare workers so all parties understand the purpose of the meeting is to discuss the care of the child, not “the case.” The meeting is not to assign blame. It is first and foremost about creating the best possible transition for the child. Sharing parental responsibilities can be enjoyable activities such as working on the child’s life book together, exchanging pictures, reading with the child, et cetera. They can also plan a joint fun activity that is specifically catered to the child.
## Permanency Planning Services: Shared Parenting

Mutual assessment of prospective foster and adoptive parents in their ability to successfully provide trauma-informed care for children in county child welfare agency custody.

Before the shared parenting meeting, the county child welfare worker must:

- Be aware that they do not impose their own biases about a birth parent's previous decisions;
- Model positive communication about the birth parent to the foster parent and about the foster parent to the birth parent;
- Brief the foster parents about any birth parent fears or needs and help the foster parents understand these needs;
- Be prepared to discuss how the needs and interests of the child will be recognized during the shared parenting meeting;
- Plan for if the birth parent may be visiting with the child;
- Make visitation arrangements when the child is visiting with the birth parent before or after the meeting; and
- Encourage the foster parents to engage the birth parents about a positive attribute they see in the child.

The county child welfare worker must prepare the foster parents and birth parents to exchange information essential to shared parental responsibilities between foster and birth parents including:

- Medical information;
- School progress;
- Sleeping habits;
- Eating habits;
- Response to discipline; and
- Ask the foster and birth parents where they would like to meet. A meeting site that is a neutral location and allows for privacy is important. The following can be options:
  - A neighborhood recreation center or social center;
  - The library; or
  - A child’s therapist office are good options instead of the agency office.

County child welfare workers should initially focus on items that might seem simple but can be very important such as:

- Asking for a picture of the family to have for the child; and
- Discussing the child’s favorite foods, toys, clothes, activities, likes, and dislikes.

Both the birth parents and foster parents should be encouraged to talk openly. County child welfare workers should assist foster and birth parents in managing conflict by:

- Recognizing the fears of all parties;
- Focusing on the strengths;
- Looking beyond behaviors to identify needs; and
- Developing interventions to meet needs.

County child welfare workers should also assist foster and birth parents in understanding cultural or family differences such as:

- Cultivating a mutual understanding and appreciation of religious beliefs and practices;
- Openly discussing differences in family rituals such as meal times or where they eat;
- Appearance preferences like haircuts, earrings, make up, et cetera; and
- Other family experiences.

It is important to convey the benefits of aligning around parenting and discipline practices to ensure consistency for the child. For example, the foster and birth parents might discuss what discipline practices have
• any of the children’s strengths and needs.

County child welfare agencies must explore opportunities to (as long as the court ordered visitation/contact plan allows):

• encourage the placement provider to host sibling visits;
• allow the birth parent to call the placement provider’s home; and
• allow the placement provider to participate in the parent/child visitation.

INvolving absent/non-residential parents

Both parents must be engaged and have the right to be involved in shared parenting and the shared parenting meeting. The county child welfare worker must engage both parents in the planning process for the child.

INvolving relatives

County child welfare agencies must decide whether to include relatives in shared parenting meetings by considering the following:

• Pay close attention to the dynamics between the birth parent and their relative. What is their relationship like and is it healthy toward the development of the partnership between the birth parent and foster parent?
• Consider whether the information the relative would provide is critical to the daily care of the

been effective and can be continued or the foster parent may recommend a practice that has been effective with other youth. The child receives consistent structure during visits, when transitioning from one home to the other, and the foster and birth parents are supported in their combined efforts.

If allowable, placement providers should be encouraged to invite birth parents to attend school and medical appointments. If the birth parent is unable to attend an appointment, the placement provider should provide progress reports to the birth parent on how their child is performing in school, home, updates on any medical information, and other activities.

The exchange of information not only helps the placement provider, it helps the birth parent remain connected to the routine of the child’s care.

The placement provider can be a wonderful resource for the birth parent as they can model what others might assume parents know how to do such as play with the child, encourage positive responses in their child, or how to care for their physical and medical needs.

Clear boundaries and ground rules for the contact should be discussed and set with input from the birth family, the foster family, and the county child welfare agency. As it is developed, the Family Time and Contact Plan can be utilized to help with this discussion/plan to:

• address personal and emotional safety issues for the child, birth family, and foster family; and
• discuss ground rules regarding phone calls, visitation, and transportation.

After there is an approved Family Time and Contact Plan that is flexible in allowing the placement provider to convene visits/contacts, at times, the county child welfare agency worker should be involved with observing contact between the birth parent and child. The county child welfare worker is able to personally provide positive feedback on how their relationship is developing.
child and whether the information is needed to meet the needs of the child and/or provide support to the biological parents.

- Consider the long-term goal of developing a partnership between the foster and birth parents. Would consistently involving the relative in each shared parenting meeting deter from building a partnership between the foster and birth parents or is the relative an excellent mentor and support that would help develop a continued partnership beyond reunification?
- Is the relative able to provide needed information for the care of the child in another way other than being involved in the shared parenting meeting?
- Consider a discussion with the family that may give the relative other opportunities to be a part of the child’s life/planning such as involvement in child and family team meetings.
- Be careful not to alienate the birth parent or relative. Make sure all feel heard.

CONFIDENTIALITY
It is recognized that placement providers have a need to know medical conditions that a child may have in order to best care for them. Re-disclosure of the information is prohibited without consent of the child, parent or guardian.

County child welfare workers must:
- Avoid sharing information about the birth parents to the placement providers or about placement providers to the birth parents if it is not information that is pertinent to the child’s care.
- Inform birth parents and placement providers of the expectation that information that is shared within a shared parenting meeting remains confidential. Eventually, birth parents and

A parent that has been referred to as absent or non-residential may have more information than the county child welfare agency may have thought they were able to share in regards to the child’s development. Working to develop an early partnership that includes the absent parent may provide an excellent foundation for them to not only become more involved in their child’s life, but also may be a permanent placement option, and/or a long-term support.

The county child welfare worker should:
- Ask the question: How can the county child welfare agency obtain the absent parent’s involvement?
- If the birth mother and father have a tenuous relationship, consider facilitating separate meetings between each birth parent with the placement provider.
- If one birth parent is unable to travel a long distance for a meeting, consider facilitating a phone conference call or web meeting in order to begin developing a relationship between the birth parent and placement provider.

Though custody of a child may have been removed from the biological parents, the parents may have had tremendous support from other relatives in raising their child. For example, a grandmother that has been the primary caretaker for the child the past 6 months may have some information that is essential for the care of the child. The biological parents may want the relative provider to be a part of a shared parenting meeting.

SAFETY
The safety of the participants should always be considered when planning to begin shared parenting meetings. The county child welfare worker should be aware if there has been a history of domestic violence between birth parents as well as if a birth parent has any history of violence towards others. It would not be appropriate to facilitate or encourage any shared parenting meetings together if there are any court orders including those imposed by probation and parole that do not allow contact between the birth parents. However, it is possible that separate meetings could take place with the placement providers and each individual birth parent at separate times. Document any safety
<table>
<thead>
<tr>
<th>Placement providers may come to build a good relationship and choose to share personal information with each other.</th>
<th>Discuss any questions with your supervisor as well as seek out agency policy around specific situations for the sharing of information.</th>
<th>Consider what special arrangements can be made to help everyone feel safe and comfortable such as:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Choose a safe location;</td>
<td>• Create specific ground rules and expectations ahead of time together with all participants that are catered to the specific needs;</td>
<td>• If the meeting cannot be held safely, do not hold the meeting; and</td>
</tr>
<tr>
<td>• Choose other avenues such as a phone conference call to facilitate the meeting.</td>
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</table>
## Permanency Planning Services: Permanency Planning: Permanency Options

<table>
<thead>
<tr>
<th>Policy</th>
<th>Legal Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanency planning promotes a permanent living situation:</td>
<td><strong>N.C.G.S. § 7B-906.2 (b)</strong> states at any permanency planning hearing,</td>
</tr>
<tr>
<td>• for every child entering the foster care system;</td>
<td>the court shall adopt concurrent permanent plans and shall identify</td>
</tr>
<tr>
<td>• with an adult with whom the child has a continuous,</td>
<td>the primary plan and secondary plan. Reunification shall remain a</td>
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<tr>
<td>reciprocal relationship; and</td>
<td>primary or secondary plan unless the court made findings under G.S. 7B-901(c)</td>
</tr>
<tr>
<td>• within a minimum amount of time.</td>
<td>or makes written findings that reunification efforts clearly would be</td>
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<tr>
<td>The county child welfare agency must be committed to a</td>
<td>unsuccessful or would be inconsistent with the juvenile's health or safety.</td>
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<td>permanent resolution of the child's foster care status. Permanent</td>
<td>The court shall order the county</td>
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<td>resolutions include:</td>
<td>department of social services to make efforts toward finalizing the</td>
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<tr>
<td>• Reunification;</td>
<td>the primary and concurrent permanent plans and may specify efforts</td>
</tr>
<tr>
<td>• Guardianship;</td>
<td>that are reasonable to timely achieve permanence for the juvenile.</td>
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<tr>
<td>• Custody;</td>
<td><strong>PL 113-183</strong> requires agencies to provide documentation at each</td>
</tr>
<tr>
<td>• Another Planned Permanent Living Arrangement (APPLA);</td>
<td>permanency hearing of the “intensive, ongoing, and, as of the date of the</td>
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<tr>
<td>• Reinstatement of Parental Rights (RPR); or</td>
<td>hearing, unsuccessful efforts made by the county child welfare</td>
</tr>
<tr>
<td>• Adoption</td>
<td>agency to return the child or secure a placement with a fit and willing</td>
</tr>
<tr>
<td>For children and youth in the custody and placement responsibility</td>
<td>relative (including adult siblings), a legal guardian, or an adoptive</td>
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<tr>
<td>of the county child welfare agency, permanence occurs when he or</td>
<td>parent, including through efforts that utilize search technology</td>
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<tr>
<td>she has a lasting, nurturing, legally secure relationship with at least</td>
<td>(including social media) to find biological family members for</td>
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<td>one adult that is characterized by mutual commitment. A “legally</td>
<td>children”.</td>
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<td>secure placement” is defined as a placement in which the direct</td>
<td>According to <strong>N.C.G.S. § 7B-101 (18)</strong>, reasonable efforts are defined</td>
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<tr>
<td>caretaker has the legal authority to make parental decisions on</td>
<td>as the diligent use of preventive or reunification services by a</td>
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<td>behalf of the child. Permanency planning is the basis for all</td>
<td>department of social services when a juvenile's remaining at home</td>
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<tr>
<td>casework activity and decision-making. The concepts that guide</td>
<td>or returning home is consistent with achieving a safe, permanent</td>
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<tr>
<td>permanency planning are the following:</td>
<td>home for the juvenile within a reasonable period of time. If a court of</td>
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<tr>
<td>• When children must be removed from their parents,</td>
<td>competent jurisdiction determines that the juvenile is not to be</td>
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<tr>
<td>reunification should occur as soon as possible when concerns that</td>
<td>returned home, then reasonable efforts means the diligent and timely use</td>
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<td>precipitated the child's removal have been alleviated, and parents</td>
<td>of permanency planning services by a department of social services to</td>
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<td>can demonstrate their ability to provide a minimum sufficient level</td>
<td>develop and implement a permanent plan for the juvenile.</td>
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<td>of care and ensure safety.</td>
<td>According to <strong>N.C.G.S. § 7B-101 (18b)</strong>, reunification is defined as</td>
</tr>
<tr>
<td>• When reunification is not possible, efforts made to achieve</td>
<td>placement of the juvenile in the home of either parent or placement of</td>
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<tr>
<td>the least detrimental concurrent plan for the child must be made.</td>
<td>the juvenile in the home of a guardian or custodian from whose home the</td>
</tr>
<tr>
<td>• County child welfare agencies must make concerted efforts</td>
<td>child was removed by court order.</td>
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<tr>
<td>to assist parents when reunification is the primary or secondary</td>
<td></td>
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<tr>
<td>plan.</td>
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</table>
• County child welfare agencies must explore and develop concurrent permanent plans that can be implemented, even when reunification is the primary plan.
• Goal oriented casework ensures all activities are focused on achieving permanency.
• Placement of the child for adoption provides the most permanent alternative when reunification is not possible. Adoption by a relative, other kin, or foster family should always be considered as a secondary permanent plan. If neither reunification nor adoption is possible, custody or guardianship to relatives, kin, or foster parents provides another permanency option.
• County child welfare agencies must make concerted efforts to achieve permanence for the child in a timely manner. The following timeframes must be met for the corresponding permanent plans:
  o Reunification: 12 months
  o Guardianship/Custody: 18 months
  o Adoption 24 months

N.C.G.S. § 7B-903.1(c) states if a juvenile is removed from the home and placed in the custody or placement responsibility of a county department of social services, the director shall not allow unsupervised visitation with or return physical custody of the juvenile to the parent, guardian, custodian, or caretaker without a hearing at which the court finds that the juvenile will receive proper care and supervision in a safe home. NCGS § 7B-903.1(c) further states that before a county child welfare agency may recommend return of physical custody of the juvenile to the parent, guardian, custodian, or caretaker from whom the juvenile was removed, the agency must first observe that parent, guardian, custodian, or caretaker with the juvenile for at least two visits that support a recommendation to return physical custody. Each observation visit shall consist of an observation of not less than one hour with the juvenile, and each observation visit shall be conducted at least seven days apart.

N.C.G.S. § 7B-600 states that guardianship assigns legal authority for the guardian to act on behalf of the child without further child welfare agency involvement, but with continued supervision of the court. The authority of the guardian continues until the court terminates the guardianship or until the child is 18 years of age or is emancipated by the court. A guardian may resign from the position of guardian, but his/her authority cannot be removed unless the guardian is determined by the court to be unfit.

N.C.G.S. § 7B-912(c) states if the court finds the juvenile is 16 or 17 years old, the county child welfare agency has made diligent efforts to place the juvenile, however the court has found compelling reasons exist that it is not in the best interest of the juvenile to be placed permanently with a parent or relative in a guardianship or adoptive placement, and Another Planned Permanent Living Arrangement is the best permanency plan for the juvenile, the court shall approve APPLA, as defined by P.L. 113-183, as the juvenile's primary permanent plan.

Reinstatement of Parental Rights (RPR) became a permanency option when N.C.G.S. § 7B-1114 went into effect October 1, 2011. Circumstances that would allow this permanency option are very
Permanency Planning Services: Permanency Planning: Permanency Options

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| Child welfare agencies must never cease efforts to obtain permanency for children and youth in its custody or placement responsibility, regardless of age or behaviors. Both in-State and out-of-State options must be considered when making reasonable efforts to place the child in accordance with the permanency plan. | REUNIFICATION

Reunification must occur as soon as possible when concerns that precipitated the child’s removal have been alleviated, and parents can demonstrate their ability to provide a minimum sufficient level of care and ensure safety.

This must be assessed by observing and supervising contact between the child and parent(s) or caretaker, planning and preparation with the family, and consultation of decision making tools.

The agency must work with the parents to help them gain capacity to provide care for their children, and ensure their safety.

Reunification must remain a primary or secondary plan until the court makes written findings that such efforts would be futile or inconsistent with the juvenile’s need for a safe, permanent home within a reasonable period of time. Whether reunification is the primary or secondary plan, efforts to reunify the family must not cease until the above findings have been made by the court.

narrow. Only the youth, the county child welfare agency, or the youth’s guardian ad litem attorney advocate may file a motion to reinstate parental rights. When the court enters an order to reinstate a former parent’s rights, these rights include custody, control, and support of the youth.

REUNIFICATION

Reunification should occur when the safety issues have been alleviated and risk has been reduced. Reunification should be considered when:

- The issues that precipitated the child’s removal have been addressed and resolved, and
- Risk to the child has been reduced to a reasonable level; and
- The parents have made changes in their behavior and circumstances that were identified as needing to change before the child could be returned safely to the home; and
- The parent has demonstrated capacity and willingness to provide appropriate care for the child; and
- The child’s safety and care in the home is reasonably expected to remain secure; and
- Supports from the agency and community are in place to assist the family to remain intact.
Reasonable efforts to reunify the child with the parent(s) or caretaker must be demonstrated and documented to the court. A child who has been removed from the custody of a parent(s) or caretaker must not be returned for any period without judicial review and findings of fact to show the child will receive proper care and supervision as observed during a trial home visit.

Note: A supervised visit does not fall within the meaning of the term “return” if a county child welfare worker is present always.

**RYLAN’S LAW/CPS OBSERVATION**
Before a county child welfare agency can recommend physical custody of a child be returned to the parent(s) or caretaker in which the child was removed, the agency must first observe the parent(s) or caretaker and child together for a minimum of two visits. Each visit must:
- be at least one hour in duration; and
- be held at least seven (7) days apart.

Observations during these required visits must be documented and provided to the court, and must support a recommendation to return physical custody to the removal parent, guardian, custodian, or caretaker.

Note: The court maintains the right to return the child against agency recommendations if it so determines.

The agency’s observed visits should occur no more than thirty (30) days prior to the scheduled permanency planning hearing in which the agency recommends the child be returned home.

Written documentation can be provided within the agency’s court report, or a separate document.

### GUARDIANSHIP

When reunification efforts are determined to be contrary to the health, safety or best interest of a child who is in the legal custody or placement authority of the county child welfare agency, the county must assess relative or kinship placements as a permanency option, including both maternal and paternal relatives. If the family is willing to provide a permanent home for the child but is not willing to adopt, then legal guardianship must be offered to the family as alternatives. Guardianship must only be considered

Juvenile court guardianship does not confer authority over the disposition of a child’s estate or management of his assets. If the child has an estate or receives income such as through Social Security Administration (SSA), and there is no representative available, a separate court action should be initiated to establish guardianship of the estate.
when reunification and adoption are ruled out as permanency options.

The legal authority of the guardian includes:

- the care, custody and control of the juvenile;
- the authority to arrange placement for the juvenile;
- the right to represent the juvenile in legal actions before the court;
- the right to consent to actions on the part of the juvenile including marriage, enlisting in the armed forces, and enrollment in school; and
- the right to consent to remedial, psychological, medical or surgical treatment for the juvenile.

North Carolina law requires the court to consider whether an appropriate placement with a relative is available. If the court finds that a relative is willing and able to provide proper care and supervision in a “safe home,” the court must order placement of the child with the relative.

When the primary or secondary permanency plan is guardianship, the county child welfare agency must:

- Conduct and demonstrate diligent efforts to locate a suitable person who is willing to assume guardianship of the child.
- Assess the suitability of the home for guardianship placement and make a recommendation of their findings.
- Assist the prospective guardian through the court process and help him/her understand the responsibilities of guardianship.
- Make the guardian aware of resources that may be available to the family should they later decide to adopt the child.
- If the youth is between 14 and 17 years of age, make the guardian aware of the youth’s Guardianship Assistance eligibility, and the requirements of the program.

Guardianship can be awarded to a relative or any other person deemed suitable by the Court. Persons other than relatives to consider include foster parents or adults who have a kinship bond with the child, even if they are not related by blood.

Prior to recommending guardianship be awarded to a specific person(s), including relatives, fictive kin, and foster parents, the county child welfare agency should assess the potential guardian by completing the Comprehensive Provider Assessment (DSS-5204). See also Instructions for Provider Assessments (DSS-5204ins).
• Remain available to provide follow-up services to the guardian on an as-needed basis for six months, in order to ensure the stability and health of the placement.

Efforts to achieve a permanent plan of guardianship must be documented in the case record and the court report.

If the agency is unsuccessful in locating a person willing to assume guardianship of the child within one year of the court ordering a plan of guardianship, the permanent plan must be changed unless the agency is able to justify to the court why the plan should remain “guardianship”. Justification includes the agency’s progress toward locating a suitable person willing to assume legal responsibility for the child.

GUARDIANSHIP ASSISTANCE PROGRAM

The purpose of the Guardianship Assistance Program (GAP) is to make funds available for the financial support of youth who are determined to be:

• in a permanent family setting;
• eligible for legal guardianship, and
• otherwise unlikely to obtain permanency.

For a child to be eligible for GAP, the following requirements must be met:

• The child has been removed from his or her home pursuant to a voluntary placement agreement, or as a result of a judicial order, and the child in in the placement responsibility of a North Carolina county child welfare agency;
• The Court has determined that reunification and adoption are not appropriate permanency options for the child;
• The child is eligible for foster care maintenance payments and has been placed in the licensed home of the prospective legal guardian for a minimum of 6 consecutive months;

If a person accepts guardianship of a child who was in county child welfare agency custody and later adopts that child, he or she may be able to receive adoption assistance payments on behalf of the child until the child is 18 years of age, or 21 years of age if the adoption is finalized when the child is 16 or 17 years old.

GUARDIANSHIP ASSISTANCE PROGRAM

Subsidized guardianship allows children and youth to maintain their family and community roots when they can no longer live with their parents and adoption is not an appropriate permanent plan.

In the event of the death or incapacity of the legal guardian, the eligibility of a child for guardianship assistance is not affected by reason of the replacement of the guardian with a successor guardian named in the Guardianship Assistance Agreement. Is it not a requirement for a successor guardian to be named, but doing so allows for the continuation of benefits with only a short suspension while the child welfare agency assists the successor guardian in obtaining legal guardianship and completing the necessary paperwork and safety checks. The conversation about successor guardianship should begin as early as possible to allow the prospective guardian an opportunity to consider options and discuss the implications with the named individual.

County child welfare agencies should inform relatives and fictive kin early on in the case of their option to become licensed foster parents, and available funding for licensed providers. They have the right to know and understand their options as it pertains to the care they are providing to children in foster care. If the family is already
• The child is at least 14 years of age, but not yet 18 years of age; or the child is not yet 14 years of age but is being placed in a legal guardianship arrangement with a sibling who meets the age requirement;
• The child demonstrates a strong attachment to the prospective legal guardian and has been consulted regarding the guardianship arrangement;
• The prospective legal guardian has a strong commitment to permanently care for the child; and,
• The prospective legal guardian has entered into a guardianship assistance agreement with the county child welfare agency who holds custody of the child prior to the order granting legal guardianship.

For a child or youth whose permanent plan is guardianship, and eligible for guardianship assistance payments, county child welfare agencies must include in the case plan a description of the following:

• The steps the agency has taken to determine that it is not appropriate for the child to be returned home or adopted;
• The reasons for any separation of siblings during placement;
• The reasons why a permanent placement with a fit and willing kinship provider through legal guardianship is in the child’s best interest;
• The ways in which the child meets the eligibility requirements for a guardianship assistance payment;
• The efforts the agency has made to discuss adoption by the child’s placement provider, and documentation of the reasons why adoption is not being pursued; and,
• The efforts made by the agency to discuss with the child’s parent or parents the guardianship arrangement, or the reasons why the efforts were not made.

The following forms must be completed prior to legal guardianship being awarded:
• **Guardianship Assistance Checklist** (DSS-1813)
### Guardianship Assistance Agreement (DSS-1810)

For more information on GAP, please see [Guardianship Assistance Program](#).

### Protocol – What you must do

<table>
<thead>
<tr>
<th>CUSTODY</th>
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<tbody>
<tr>
<td>Legal custody is an acceptable permanency option, although it does not have the same level of security or permanency as adoption or guardianship. Custody can be challenged before the court, and terminated any time there is a change in circumstances, regardless of the fitness of the custodian.</td>
</tr>
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</table>

When the primary or secondary permanency plan is custody, the county child welfare agency must:

- Conduct and demonstrate **diligent efforts** to locate a suitable person who is willing to assume custody of the child.
- Provide information to the potential custodian about more permanent and legally secure options, including adoption and legal guardianship.
- Assess the suitability of the home for custodial placement and must make a recommendation of their findings.
- Evaluate and discuss any potential conflicts the custodian may have with the birth parent(s).

Efforts to achieve a permanent plan of custody must be documented in the case record and the court report.

If the agency is unsuccessful in locating a person willing to assume custody of the child within one year of the court ordering a primary permanent plan of custody, the permanent plan must be changed unless the agency can justify to the court why the plan should remain “custody”. Justification includes the agency’s progress toward locating a suitable person willing to assume legal responsibility for the child.

### Guidance – How you should do it

<table>
<thead>
<tr>
<th>CUSTODY</th>
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<tr>
<td>Legal custody is not well defined in law; however, it typically implies responsibility for the oversight of a child’s care, protection, training and personal relationships. Custody has most of the same advantages and disadvantages as guardianship. The specific rights and responsibilities of a custodian, however, are defined by the court order rather than being fully defined in law. The rights of a custodian can be as extensive as those of a guardian, or limited.</td>
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</table>

Just as with guardianship, custody can be awarded to a relative or any other person deemed suitable by the Court. Foster parents or adults who have a kinship bond with the child, even if they are not related by blood, should be considered as possible custodians.

Legal custody does not confer authority over the disposition of a child’s estate or management of his assets. If the child has an estate or receives income such as through Social Security Administration (SSA), and there is no such representative available, separate court action should be initiated to establish guardianship of the estate.

Prior to recommending custody be awarded to a specific person(s), the county child welfare agency should assess the potential custodian by completing the [Comprehensive Provider Assessment (DSS-5204)](#). See also [Instructions for Kinship Care Assessments (DSS-5204ins)](#). For more information, see [Kinship Care](#).
### ANOTHER PLANNED PERMANENT LIVING ARRANGEMENT (APPLA):

APPLA is a permanent living arrangement for a youth age 16 or 17:

- who resides in a family setting which has been maintained for at least the previous six concurrent months; and
- in which the youth and caregiver have made a mutual commitment of emotional support; and
- the youth has been integrated into the family; and
- the youth and caregiver are requesting that the placement be made permanent; and
- other permanency options, including adoption, guardianship, and custody have been determined to be inappropriate for the situation due to the youth’s long-term needs.

APPLA must be initially approved by the court and the Permanency Planning Review/Child and Family Team prior to the change in the permanency plan and reviewed by the court at least every 6 months.

The youth must actively participate in court decisions regarding APPLA either through direct testimony or written depositions to ensure the youth’s preferences are heard and respected.

The county child welfare agency must retain custody of the child while the permanent plan is APPLA. If the home in which the child is placed is a licensed caregiver or becomes licensed, they must receive standard board payments to help support the placement. If they are not a licensed placement, they must be informed of and given the opportunity to become licensed.

When the youth’s permanent plan is APPLA, the county child welfare agency must provide and document services as follows:

- **Permanency Planning Services to ensure the child’s ongoing safety and well-being needs are met;**
- **Provision of relevant [LINKS](#) services, based on a written, objective assessment, and a [Transitional Living Plan](#) developed with the youth;**
- **Access to resources for the youth through the LINKS program and other resources as appropriate;**
- **Diligent efforts to help the youth to establish a strong personal support network with friends and relatives;**
- **Ensure the caregivers are following the [Reasonable and Prudent Parent Standard](#), supporting the youth’s engagement in age or developmentally-appropriate activities and social events; and**

APPLA may be appropriate for relative or non-relative placements in licensed or court-approved non-licensed homes when the criteria for APPLA is met.

For youth 17 and older, the option of continuing in extended foster care through the [Foster Care 18 to 21](#) program, as well as the eligibility requirements of the program, should be discussed with the youth.
**Permanency Planning Services: Permanency Planning: Permanency Options**

- Ongoing support for the caregiver in order to avoid placement disruption.

APPLA must be reviewed at least every six months, or more often as needed, at a facilitated Child and Family Team (CFT) meeting, which includes the youth and caregiver, and their supports, as well as the agency LINKS Coordinator. The CFT must review the plan and the agency’s effort to maintain the stability of the placement and to assist the youth in his/her transition to independence.

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<th>Protocol – What you must do</th>
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<tr>
<td><strong>ADOPTION:</strong></td>
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Adoption is the permanent plan offering the most stability to the child who cannot return to their parents. Factors to consider include whether the child is likely to return home and whether the child can be freed for adoption. In order for the child to be adopted, both parents must voluntarily relinquish their parental rights or their parental rights must be terminated by the court. Adoption by relatives or kin must be considered if the relative or kin are willing to adopt and can provide a safe home.

When the court has ordered a primary permanent plan of adoption, the county child welfare agency must:

- File a petition for termination of parental rights within 60 calendar days of the hearing that determines the primary permanent plan is adoption, unless the court makes other findings. Note: there must be legal grounds to terminate each parent’s rights.

When the child is legally freed for adoption (both parents’ rights have been voluntarily relinquished, or terminated by the court), the agency must:

- make every effort to locate and place the child in an appropriate adoptive home;
- develop a child-specific written strategy for recruitment of an adoptive home within 30 days. At a minimum, the plan must document the child-specific recruitment efforts such as the use of state, regional, and national adoption.

When adoption is being considered as a permanent plan, satisfactory answers to the following questions should be considered:

- Have all relative placement options been considered and eliminated?
- Has the child’s ethnic and cultural needs been considered and addressed?
- Has the best interest of the child been considered and documented?
- Are the parents willing to relinquish their rights, or is the agency ready to proceed with termination of parental rights?
- Do legal grounds for termination of parental rights exist?
- Is the child already living with caretakers who are willing to adopt?
- How soon can the child be placed in an adoptive home?
- How long will the court process take?
- Who will help the child through the placement process?
- Has a pool of potential adoptive families been recruited or is the agency willing to commit to child-specific recruitment?
- Has the child’s particular needs and strengths been thoroughly assessed and evaluated?
- Has a placement option that will be able to meet the child’s needs been identified?
- What is the child’s relationship with siblings?
- Should the child be placed with siblings and, if so, can this be accomplished?
- Is the child able to accept “parenting?”
exchanges, including electronic exchange systems, to facilitate orderly and timely in-state and interstate placements;

- develop a Child Profile that describes the kind of child needing placement to be available for prospective adoptive families;
- conduct or arrange for a Pre-Placement Assessment (PPA) or a PPA Addendum based on potential adoptive family's status; and
- Register all children who are free for adoption and who are not in their identified adoptive home with the North Carolina Adoption Exchange (NCKids), as well as regional and national adoption exchanges including electronic exchange systems, in order to facilitate matches between persons interested in adoption and the children who are available.

When adoption is the secondary permanency plan for a child, the agency must search for an appropriate adoptive family.

If the agency is unsuccessful in locating a person willing to adopt the child within one year of the court ordering a primary permanent plan of adoption, the permanent plan must be changed unless the agency is able to justify to the court why the plan should remain “adoption. Justification includes the agency’s progress toward locating a person willing to assume legal responsibility for the child through adoption.

Youth, ages 12 and older, who are reluctant to consider adoption must be given an opportunity to talk in a facilitated Child and Family Team Meeting about their concerns. Other permanency options must be offered, and the youth’s preferred plan must be given strong consideration whenever feasible.

When considering relatives or kin, care should be taken in assessing this option to consider whether there may be conflict or divided loyalties between the parent of the child and the adopting relatives, and how these issues would be handled. If an adoption by relative or kin can be achieved, the child’s sense of identity and family history can be preserved.

If adoption by a relative, kin, or foster parent is not an option, the agency should recruit an appropriate adoptive home for the child.

Children and youth who are able to provide input should be asked for their recommendations regarding potential adoptive families, since they may know individuals or families with whom they are comfortable.

Adoption by foster parents is often an appropriate plan, especially if the child has developed a close relationship with the foster family. Such a plan has the benefit of providing continuity for the child with a family that they already know without requiring an additional move. Increasingly, foster families are working with the team toward reunification efforts, and are encouraged to consider committing to the child permanently through adoption if reunification is not possible.

Sometimes the child’s parent(s) recognize they cannot be the permanent family for the child. When they know and respect the care their child is receiving from the foster family, they may voluntarily relinquish their parental rights so the child can be adopted by that family.

The advantage in this situation is that it allows for the possibility that the child and birth parent continue some relationship while the child is raised by a committed and caring adoptive family.

When adoption by a relative, kin, or foster parent is not an option, the agency should place the child in an approved adoptive home. There may be approved families waiting that may be appropriate for
the child, or potential adoptive families may need to be recruited specifically for the child. Recruitment activities should include the use of media resources and the faith community.

A child may be placed in a “legal risk” placement before the child is legally cleared for adoption. The purpose of legal risk placement is to move the child into a permanent home as soon as possible without jeopardizing the legal or social well-being of the child. A legal risk placement does not allow the agency to consent to the child’s adoption, therefore, the home in which the child is to be placed must be licensed as a foster home or approved by a court order. Legal risk placements are appropriate when the child is not yet legally free for adoption but there is a high probability that parental rights will be terminated.

### Protocol – What you must do

#### Guidance – How you should do it

**REINSTATEMENT OF PARENTAL RIGHTS (RPR)**

Three conditions must be met in order to consider filing a motion for RPR:

- The youth is at least 12 years of age or if under age 12, and extraordinary circumstances exist that warrant consideration of reinstatement of parental rights;
- The youth does not have a legal parent, is not in an adoptive placement, and is not likely to be adopted within a reasonable time period; and
- The order terminating parental rights was entered at least 3 years prior, unless the youth’s plan is no longer adoption.

If these three conditions are met, only the youth, the county child welfare agency, or the youth’s guardian ad litem attorney advocate may file a motion to reinstate parental rights. If a former parent whose rights have been terminated contacts the county child welfare agency or contacts the youth’s guardian ad litem regarding RPR, then the youth must be informed of their right to file a motion for RPR.

When considering RPR, the agency should hear from the youth and explore with them their thoughts, concerns, needs, etc. A youth may be afraid to freely speak in front of a parent, and/or placement provider for fear of being disloyal or hurtful; therefore, the youth should be given an opportunity to express themselves without the former parent or placement provider present. The youth should be able to speak with the county child welfare worker or therapist prior to any CFT meeting.

The agency should ensure the former parent is interested and appropriate. The agency should consider what the impact might be for the youth.

A CFT meeting should be held to discuss RPR and there should be flexibility in who should attend the CFT. The youth should be able to invite any supports or connections that are important to them. The CFT should assist the youth in making an informed decision and provide them with an understanding of any possible repercussions.

If a youth does not currently have a guardian ad litem, one should be requested and will be required if a motion to reinstate parental rights is filed.
When a motion for RPR is filed and the court determines it to be the permanent plan for the youth, the county child welfare agency will continue to have responsibility for the youth’s placement and care. This must include supervising visitation and monitoring placement with the former parent, if ordered, until a final determination is made to either reinstate parental rights or determine another permanent plan.

Questions for the youth and their team to consider when RPR is an option:

- What efforts have been made to achieve adoption or find a permanent guardian? Has the agency actively worked toward other permanency plan options?
- Has the former parent remedied the conditions that led to the youth’s removal and placement in foster care and subsequent termination of parental rights? What specifically has changed? What evidence is there that the change will continue?
- Will the youth receive appropriate care and supervision with the former parent?
- How mature is the youth and is the youth able to express their preference? Is there any reason to believe the youth is receiving pressure from the former parent to choose this plan?
- Is the former parent willing to resume contact with the youth and have rights reinstated?
- Is the youth willing to resume contact with the former parent and have rights reinstated?
- What services would the former parent and youth require to succeed if rights are reinstated? Will therapy be required and will access to it be available, including insurance and transportation needs?
- Would this plan support the best interests of the youth? What LINKS services, including educational support, would still be available to the youth? Would the former parent and the youth be open to those services, if in the youth’s best interest? Will the youth have health insurance?
- Would the youth be able to maintain current meaningful connections, including those with siblings? Does the youth have an ongoing relationship with any sibling? How is the connection supported? Will there be new family dynamics to work through for the connection to continue? What are the other meaningful connections the youth has and how will they be impacted?
# Permanency Planning Services: Permanency Planning: Concurrent Planning

## Legal Basis

N.C.G.S. § 7B-906.2(b) states the court shall adopt concurrent permanent plans for each child in foster care and shall identify the primary plan and secondary plan. N.C.S.G. § 7B-906.2(a1) states concurrent planning shall continue until a permanent plan has been achieved.

## Definition:

### CONCURRENT PLANNING

Concurrent permanency planning is the process of working towards a primary permanent plan for a child, such as reunification, while developing at least one alternative, or secondary, permanent plan at the same time. Concurrent planning is used to keep the focus on the child’s urgent needs for safety and permanence and to reduce the length of time a child spends in county child welfare agency custody.

Concurrent planning ensures a secondary plan is developed if efforts to achieve the primary plan are unsuccessful. A secondary permanency plan is developed, and efforts to achieve the primary and secondary plan are made concurrently. If the primary plan is unsuccessful, the secondary plan has been developed and can be fully implemented. It is not inconsistent to work toward reunification while building a case which will support concurrent planning and alternative resolutions.

When a child enters county child welfare agency custody, the primary plan is usually reunification with the parents or caretakers from whom the child was removed. In concurrent planning, the county child welfare worker is developing at least one secondary permanent plan jointly with the family.

## Protocol – What you must do

- County child welfare agencies must develop concurrent plans for each child in county child welfare agency custody. In addition, agencies must make diligent efforts to achieve both the primary and secondary permanent plans.

- County child welfare agencies must help parents who are seeking reunification with their child. At the same time, agencies must explore and develop secondary permanent plans that can be implemented even when reunification is the primary plan.

- Concurrent planning must continue throughout the case, until a permanent plan is achieved.

## Guidance – How you should do it

### Conditions supporting early concurrent planning include:

- The reasons the child is being removed are fresh on the minds of county child welfare workers and parents;
- Parents have not yet adjusted to their loss and are motivated to change;
- If a parent is missing, it is easier to find them and involve them in planning for the future; and
- The child has not settled into a psychologically permanent relationship with the foster parents, nor has he/she had to suffer repeated damaging moves.

In concurrent permanency planning, relatives and kin should be identified early and assessed for their interest as a possible permanent placement for the child. If the court determines reunification to be inconsistent with the juvenile’s health or safety, relatives and kin that have been assessed to be appropriate resources for a child may become the permanent placement resource.
Adoption by a relative, non-relative kin, or foster family should always be considered as a secondary permanent plan. If neither reunification nor adoption is possible, custody or guardianship with relatives, kin, or foster parents provides another permanency option.

If the juvenile court determines the primary plan is not possible because it is inconsistent with the child’s needs for safety and permanence, the secondary plan should be implemented.
Permanency Planning Services: Permanency Planning: Permanency Planning Hearing

Legal Basis

**N.C.G.S. § 7B-906.1** states within 12 months of the date of the initial order removing custody, there shall be a review hearing designated as a permanency planning hearing. Review hearings after the initial permanency planning hearing shall be designated as subsequent permanency planning hearings. The subsequent permanency planning hearings shall be held at least every six months thereafter or earlier as set by the court to review the progress made in finalizing the permanent plan for the juvenile, or if necessary, to make a new permanent plan for the juvenile.

According to **PL 113-183** with each permanency hearing held with respect to the child, the agency shall document the intensive, ongoing and, as of the date of the hearing, unsuccessful efforts made by the agency to return the child or secure a placement for the child with a fit and willing relative (including adult siblings), a legal guardian, or an adoptive parent, including thorough efforts that utilize search technology (including social media) to find biological family members for children.

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<tbody>
<tr>
<td><strong>PERMANENCY PLANNING HEARING</strong></td>
<td>The agency should request a Permanency Planning Hearing be held within 30 days of the court’s decision to discontinue the plan of reunification if a new permanent plan has not been established.</td>
</tr>
<tr>
<td>A permanency planning hearing must occur:</td>
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<tr>
<td>• for all children under the responsibility for placement and care of a county child welfare agency; and</td>
<td>The Model Court Report for Dispositional and Review Hearings and the Model Court Report for Permanency Planning Hearings should be utilized by the agency when preparing information to report to the court.</td>
</tr>
<tr>
<td>• within twelve (12) months of a child entering care, and every six (6) months thereafter.</td>
<td>The agency should have a clear plan for permanence that is based on a shared decision-making process.</td>
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During permanency planning hearings, the court must review agency recommendations and reports of the placement. Written reports to the court must document the following:

- the intensive, ongoing and, as of the date of the hearing, unsuccessful efforts made by the agency to return the child to the parent(s) or caretaker from whom the child was removed; or
- secure a placement for the child with a fit and willing relative (including adult siblings), a legal guardian, or an adoptive parent, including through efforts that utilize search technology (including social media) to find biological family members for children; and
- the steps the agency is taking to ensure the placement follows the **Reasonable and Prudent Parent Standard** and whether the child has regular opportunities to engage in age or developmentally-appropriate activities.

In any hearing or review the child must be consulted in an age-appropriate manner about any permanency plans for the child. If the child is 14 years or older, the child must be consulted regarding any permanency planning arrangements.
**Legal Basis**

Sec. 475. [42 U.S.C. 675] of the Social Security Act states that the status of each child is reviewed periodically by a panel of appropriate persons, at least one of whom is not responsible for the case management of, or the delivery of services to, either the child or the parents who are the subject of the review. The purpose of the review is to determine the safety of the child, the continuing necessity for and appropriateness of the placement, the extent of compliance with the case plan, and the extent of progress which has been made toward alleviating or mitigating the causes necessitating placement in foster care, and to project a likely date by which the child may be returned to and safely maintained in the home or placed for adoption or legal guardianship, and, for a child for whom another planned permanent living arrangement has been determined as the permanency plan, the steps the child welfare agency is taking to ensure the child's foster family home or child care institution is following the reasonable and prudent parent standard and to ascertain whether the child has regular, ongoing opportunities to engage in age or developmentally appropriate activities (including by consulting with the child in an age-appropriate manner about the opportunities of the child to participate in the activities).

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<tr>
<td><strong>CHILD AND FAMILY TEAM MEETINGS</strong></td>
<td>Child and Family Teams are valuable tools for assessing the strengths and needs of families and children in the early phase of permanency planning. By involving the child's family, relatives and other kin, foster parents, community supports and all of the agencies involved with the child and family in an early assessment process, everyone involved has the opportunity to understand clearly the reasons for child’s removal and the issues that need to be resolved in order for reunification to occur or, if reunification is not the plan, the child's need for permanency. Everyone involved contributes to the plan for permanency for the child and can clarify what each person is expected to do to contribute to that plan. Although the assessment process is ongoing throughout permanency planning, a CFT meeting within the first two weeks of the placement provides an opportunity to focus on the permanency plan quickly, thereby facilitating timely achievement of that plan. A CFT meeting within the first 30 days of placement can motivate parents to make changes early and often leads to shorter lengths of time in placement.</td>
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- Within 30 days of entering the custody of the county child welfare agency;
- Within 90 days of entering the custody of the county child welfare agency;
- Every 90 days thereafter throughout the life of the case; and
- When there is a change in the plan or family circumstance and it is necessary to reconvene the team to discuss the case.

If the child(ren) enters the legal custody of the county child welfare agency during a CPS Assessment, the worker must immediately begin exploring who the family would like to have on the team.

**NOTE:** If a child(ren) enters the custody of the county child welfare agency after having been served in CPS In-Home Services, a team would have already been formed, although there will be new members.

A broad definition of family should be used when considering who should be a part of the CFT. Children/youth should always be consulted as to whom they would like to have on their team, and this is especially important if the birth parents are no longer attending the meetings.

A CFT meeting should be used to discuss and strategize for **concurrent planning** options at various points throughout the life of a
The purpose of the CFT is to bring the family and their supports together to engage and partner with one another and to develop a Family Services Agreement. The Family Services Agreement must be documented on the Permanency Planning Review & Family Services Agreement (DSS-5240 Parts I, II, IV, V & VI):

A CFT meeting must still be held after reunification is no longer the primary or secondary plan. The team may not include the birth parents, but will still include the current placement provider, and any possible placement providers who might assume custody or guardianship, or be a potential adoptive family.

NOTE: If the parent(s)/caretaker(s) are not willing or able to participate in a CFT within the required timeframes, the Family Services Agreement must still be developed or updated.

Permanency Planning case. While primary plans must reflect reunification, early inclusion of family in understanding and planning for concurrent long-term placement options can be an appropriate use of the CFT process. Families should be informed about and allowed to plan for all the options they feel can support permanence for the children.

As the case progresses the team may change, especially if the primary goal changes.

NOTE: With the exception of the first CFT, these timeframes are the same as the requirements for the Permanency Planning Review (PPR) meetings.

The goal of these timeframes is for a CFT to be held at any time a Family Service Agreement is developed or reviewed and updated. A CFT and PPR meeting can be combined as long as all requirements for both meetings are met. The Permanency Planning Review & Family Services Agreement (DSS-5240) is updated at each meeting.

If the family does not agree for the required members of the Permanency Planning Review to participate in the development/update of the Family Services Agreement, the agency should hold the CFT and PPR meetings consecutively so the family can attend both without further interruption of the normal schedule.

Please refer to the Child and Family Team Meeting Planning tool for more information on planning and preparing for a CFT.

## PARTICIPANTS IN THE CFT

Participants who must be invited to the CFT include (but are not limited to) the following:

- the child’s parent(s), unless parental rights have been terminated;
- the child, if appropriate; and
- natural supports identified by the family

Involving children and youth in the CFT meeting is a critical and complicated issue. However, it is not a question about whether the child(ren) and youth should be involved in the process, but rather how they should be involved in the process. Children and youth often have information to offer and can benefit from seeing the process of the meeting. This allows them to know that many people care about them and are working together for their benefit. It is important to remember that while it is natural to want to protect children and youth from hearing traumatic details, it will be helpful to
NOTE: The Guardian ad litem (GAL) must be notified of the CFT; however, the family has the right to choose whether or not the GAL attends the meeting.

If reunification is no longer the primary plan, any identified permanent placement resources (custodian/guardian/adoptive parent) must be invited to participate in the CFT.

The child must be consulted in an age appropriate manner about any permanency plans for the child. If a youth has obtained the age of 14 years or older, by federal law, the child must be consulted and given the opportunity to select up to two members as part of the team who are not a foster parent of, or caseworker for, the child.

Signatures of all persons attending the CFT meeting must be recorded on the Permanency Planning Review and Family Services Agreement form.

PERMANENCY PLANNING REVIEW MEETINGS

For children who are in the legal custody or placement responsibility of a county child welfare agency, a Permanency Planning Review (PPR) must be held at required intervals.

PPRs are open, non-adversarial forums for focusing on casework practice and planning. The PPR process allows each party involved to have input into service needs of the child and family; to document progress of the parents in improving the conditions that led to county child welfare agency custody; to develop the most appropriate permanent plan; and to ensure permanency is achieved for every child. The PPR process also ensures the plan that is developed will be followed regardless of changes in child welfare staff. In addition, disagreements can be addressed prior to court hearings, helping each party to understand the position of

remember that they have already lived through much of what will be discussed. There are several things to take into consideration when deciding how the child(ren) and youth will be involved in a CFT meeting.

- The child(ren) and youth’s own wishes shall be the first consideration. It is important that children and youth know that although they may be mandated to receive services, they still drive the planning process. An honest conversation is the best way to achieve this.
- The child(ren) and youth’s developmental and cognitive abilities shall be considered. This will be important in deciding how much of the meeting and in which parts of the meeting the child(ren) and youth might participate.
- If the child(ren) and youth is in counseling, the therapist shall be consulted about what kind of involvement is best.

Please refer to the Child and Family Team Meeting Planning tool for more information on how to involve children in the CFT process.

Permanency Planning Reviews should be action-oriented. These reviews are valuable in achieving a safe, permanent home for every child in the legal custody or placement responsibility of a county child welfare agency within one year. While these reviews are needed to discuss agency decisions, they also ensure that every county child welfare agency custody case moves quickly toward a permanent resolution.

Every effort should be made to meet at a time and location that enables parental attendance.

Decisions made at PPRs should be made “through the eyes of the child.” Children have no control over the decisions that are made for them by adults yet these decisions have significant impact on their lives. The more agencies can empower children by including them in the decision-making process, the better those agencies serve them. One of the individuals selected by the child may be designated to be the child’s advisor and, as necessary, advocate, with respect to the
Permanency Planning Services: Child and Family Team / Permanency Planning Review Meetings

the others, and thus providing the opportunity for informed negotiation.

The PPR must be documented on the Permanency Planning Review & Family Services Agreement (DSS-5240 Parts I, II & III).

Cases that must be reviewed include:
- Children who are in the legal custody of a county child welfare agency; and,
- Children who are in foster care placement under a Voluntary Placement Agreement.

Note: PPR meetings must continue after children are legally free, until the Decree of Adoption has been issued.

PERMANANCY PLANNING REVIEW PURPOSE

The primary purpose of the PPR is to ensure reasonable efforts to achieve a safe, permanent home for a child are being pursued actively. The PPR must provide an unbiased, objective, and thorough review of all elements of a child’s placement in county child welfare agency custody and the agency’s plan for the child’s future.

Specifically, the PPR includes a discussion and recommendations regarding the following:
- the need for continued custody of the child with the county child welfare agency;
- the need for continued placement of the child;
- the appropriateness of the child’s current placement;
- if reunification is the plan, the extent of progress made by the parents toward improving the conditions that caused the child to be removed;
- if reunification is the plan, the barriers or safety issues that prevent reunification from being achieved today;
- the extent of agency efforts to achieve the child’s permanent plan;

Each PPR should include the following in the discussion:
- At the initial review, discuss reasons that necessitated placement and type of placement provided. Include in the discussion what efforts have been made; why those efforts did or did not work; and what efforts are currently being made.
- At subsequent reviews, discuss: why the child still is in care; why the placement was chosen, changes in the placement, and whether the placement remains appropriate.
- Specific tasks to be completed by the agency and the parents: Do these tasks or services relate to what brought the child into care? Will these tasks or services result in the desired changes in behavior?
- Tasks completed or not completed by the agency and by the parents: Are these tasks reasonable and appropriate? Has progress been documented? Why have some tasks not been completed?
- Are there any changes that any party feels should be made to the placement, the permanent plan, services needed, or behaviors required of the parents?
### Permanency Planning Services: Child and Family Team / Permanency Planning Review Meetings

- the services that have been provided by other community agencies to help the family achieve the goals identified in the Family Services Agreement;
- the services that are still needed from the county child welfare agency or other community agencies to help the family achieve the goals identified in the Family Services Agreement;
- the extent of compliance with the Family Services Agreement;
- if the Family Time and Contact Plan is reasonable and appropriate, or if changes need to be made;
- the most appropriate permanent plan for the child and how to achieve the plan quickly; and
- the most appropriate secondary permanent plan for the child that is ready to implement if the primary plan becomes unworkable; and/or
- the expected date by which the permanent plan will be achieved.

### Required Timeframes for PPR

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<tr>
<th>Required Timeframes for PPR</th>
<th>Reasonable and Prudent Parent Standard: Does the child have regular, ongoing opportunities to engage in age or developmentally appropriate activities? Are the placement providers following the reasonable and prudent parent standard? Are there any barriers to applying the standard? What is the agency doing to address these barriers?</th>
</tr>
</thead>
<tbody>
<tr>
<td>PPRs must be conducted at the following intervals:</td>
<td>The long-range plan for permanence for this child: What treatment and services are being provided for the parents, the child, and support for the foster parents including respite?</td>
</tr>
<tr>
<td>• within 90 days of the child coming into agency custody or placement responsibility; and</td>
<td></td>
</tr>
<tr>
<td>• every 90 days thereafter throughout the life of the case; and</td>
<td></td>
</tr>
<tr>
<td>• When there is a change in the plan or family circumstance and it is necessary to review the case.</td>
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</tr>
<tr>
<td>When needed, county child welfare workers should convene PPRs more frequently than required. Frequent PPR meetings when children are first placed into county child welfare agency custody increase the likelihood of achieving a safe, permanent home within one year.</td>
<td></td>
</tr>
</tbody>
</table>

### Participants in the PPR

<table>
<thead>
<tr>
<th>Participants in the PPR</th>
<th>Foster parents and other placement providers have the most current and complete knowledge of the child’s adjustment in foster care. They play a vital role in the planning and decision-making regarding the child’s future. They should always be strongly encouraged to attend and participate fully in the case planning and review meetings.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants who must be invited to the PPR include (but are not limited to) the following:</td>
<td>Parents should be encouraged to bring relatives, kin or any other support person they would like to have present at the meeting.</td>
</tr>
<tr>
<td>• the child’s parent(s), unless parental rights have been terminated;</td>
<td></td>
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<tr>
<td>• the child, if appropriate;</td>
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<tr>
<td>• the child’s placement provider;</td>
<td></td>
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</tbody>
</table>
• community resource persons, at least one of whom is not responsible for the case management or delivery of services to the child or parents; and
• the Guardian ad Litem.

If reunification is no longer the primary plan, any identified permanent placement resources (custodian/guardian/adoptive parent) must be invited to participate in the PPR.

Parents have the right to participate in every Permanency Planning Review of their child’s case. Parents must be provided timely written notice of team meetings, and every reasonable effort must be made to meet at a time and location that enables the parents’ attendance.

The agency must notify the parent(s) of:
• their right to attend and present information from their prospective;
• issues that will be discussed;
• the date and location of the meeting; and
• the right to have an attorney present.

The child must be consulted in an age appropriate manner about any permanency plans for the child. If a youth has obtained the age of 14 years or older, by federal law, the child must be consulted and given the opportunity to select up to two members as part of the team who are not a foster parent of, or caseworker for, the child.

Signatures of all persons attending the PPR meeting must be recorded on the Permanency Planning Review and Family Services Agreement form.

It is considered appropriate for the child to participate in a PPR meeting if the child is of sufficient age and maturity, and it is developmentally-appropriate for the child to be present. The child should have a voice at the meeting, and should be encouraged to share his/her wishes for their future.

By providing services to children and/or their families, community resource providers may have information essential to planning and decision-making. It is crucial to involve them in the planning and review process. The child’s teachers and/or guidance counselors should be included in this process.

In addition, having at least one resource person who has no direct service or case management responsibilities to the case strengthens case decision-making. Not only does this provide for additional input into the child’s case, but an individual with no direct case responsibility is better able to view the “big picture” objectively and make recommendations from the broader community perspective.

Community resource persons with no direct case management responsibility can include, but are not limited to the following:
• Mental Health Representative;
• School Representative;
• Healthcare Provider/Representative;
• Fatherhood Initiative Representative; or
• Social Services Representative such as a Work First or Economic Services worker, as long as the representative has no knowledge or association with the case.

The child’s Guardian ad Litem (GAL) can bring a different perspective to the case review.
## Permanency Planning Services: Termination of Services

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<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
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<tbody>
<tr>
<td><strong>PREPARING THE CHILD</strong></td>
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<tr>
<td>County child welfare agencies must help prepare the child for an exit from county child welfare agency custody, no matter the permanent plan being achieved.</td>
<td>Whether a child has been in county child welfare agency custody for a short or a long period of time, the move out of care is equally as significant as the move into care. The child may have conflicting feelings about the change in living arrangements. It is the county child welfare worker’s responsibility to help him/her express and understand these conflicting feelings and to move gradually toward making the change. The county child welfare worker should plan with the child appropriately in relation to his/her age and the kinds of responsibilities the child can take in getting ready for the move.</td>
</tr>
<tr>
<td>For youth exiting foster care at age 18 the agency must:</td>
<td></td>
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<tr>
<td>• provide <strong>important documents</strong> to the youth prior to the exit;</td>
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<tr>
<td>• complete the Transitional Living Plan: <strong>90 Day Transition Plan for Youth in Foster Care (DSS-5096b)</strong>; and</td>
<td></td>
</tr>
<tr>
<td>• discuss the option of participating in <strong>Foster Care 18 to 21</strong> with the youth.</td>
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</tr>
<tr>
<td>Whether a child is being discharged from family foster care, relative placement or from institutional care, the caretaker should plan with the county child welfare worker for the move and participate in preparing the child for the changes. Changes in living arrangements usually mean changes in relationships. If it is appropriate, the child may need to visit his/her former placement after discharge.</td>
<td></td>
</tr>
<tr>
<td>Services may be extended by the agency to youth ages 13 to 21 who leave foster care and meet the eligibility requirements for <strong>LINKS</strong> services, regardless of their living arrangement and whether the agency retains custody or placement responsibility of the youth during this time. This extension of services will allow the county child welfare worker to provide needed support to the youth after discharge from foster care placement. The services should be based upon an assessment of the youth’s needs, to assist him/her in making a successful transition to living independently.</td>
<td></td>
</tr>
<tr>
<td>The child’s Life Book should be given to the child and/or the parent(s)/guardian/custodian/adoptive family.</td>
<td></td>
</tr>
</tbody>
</table>

| **PREPARING THE FAMILY FOR REUNIFICATION** | |
| The agency must request that visitation between the child and parent(s) increase, including unsupervised visitation and a trial home visit. | The child and family have changed during the time of placement. Even over a matter of months, the child will have achieved developmental milestones, will have formed new relationships with foster parents, and may have new interests. Families will have adjusted their daily routines around the absence of the child. Parents may have learned new parenting skills that have impact on the familiar family practices. |
| The agency must also comply with the requirements of **Rylan’s Law/CPS Observation** prior to recommending reunification occur. | During the planning process, the county child welfare worker should keep the child and family abreast of the changes that are occurring. When placement providers are encouraged to work with the birth families, both the child and the
The child welfare agency must provide the family with any important documents and other items pertaining to the child including, but not limited to:
- medical records;
- medications; and
- school records

family can benefit from a significant increase in the amount of information shared.

As the family moves toward reunification, the county child welfare worker should be very sensitive to the fears of the family. They may be afraid they are not ready for the child’s return and they could lose their child again. The county child welfare worker should work with the family to assure needed supports are in place. Family Preservation Services may be included during the trial home visit or as part of the aftercare plan to further stabilize the family.

County child welfare agencies should provide assistance with transitioning Medicaid and other services the child is receiving, when appropriate.

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**PREPARING THE FOSTER FAMILY**

The foster family must participate in planning for the child’s exit from county child welfare agency custody.

The foster family must assist in transitioning the child to their permanent living arrangement.

The foster family needs the county child welfare worker’s full support and recognition of the contributions they have made in the child’s life. The foster family should be informed of why the county has reached a decision to move a child to a permanent placement. Such information and preparation will help the foster family come to an acceptance and understanding of these events so they can help a child adjust to the move. If it is in the best interest of the child, a contact with the foster home should be arranged by the agency after a child has moved to a more permanent placement.

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**PREPARING THE ADOPTIVE FAMILY OR OTHER PERMANENT CAREGIVER**

If the adoptive family or other permanent caregiver has not lived with the child, the agency must arrange for a transitional period of visitation to help the child and family learn about each other.

The adoptive family or other permanent caregiver must be provided with all information that is relevant to the child’s history, relationships, behaviors, health, interests, and educational needs.

Non-identifying information about the child’s birth family must be provided to the adoptive family so
<table>
<thead>
<tr>
<th>The child will be able to know the reason for his/her adoption.</th>
</tr>
</thead>
<tbody>
<tr>
<td>The agency must make post-adoption services available to every adoptive family. These services must be provided to facilitate the integration of the child and family and to resolve problems they may encounter. The agency must provide regular and ongoing support, monitoring, and/or counseling of the family as appropriate. A referral to Family Preservation Services may be appropriate for post-adoption services.</td>
</tr>
</tbody>
</table>

### AFTERCARE SERVICES

The agency must inform families and children that they can request services from the agency and obtain these services on a voluntary basis, as available.

Families must be informed of services that may be available to them including, but not limited to:
- adoption assistance;
- post-adoption support;
- guardianship assistance;
- LINKS services and funding; and
- Foster Care 18 to 21 Services.

The agency should establish a minimum period for providing supportive aftercare services and supervision to the child and his/her permanent family. In most cases, agency supervision can be terminated after six months unless the Court orders otherwise and/or the final Risk Reassessment indicates additional service needs.

Guardians and legal custodians should also be made aware of available services so they can select services they need. If they indicate no need for services, they should be informed that services are available to them, should they need them later.
Permanency Planning Services: Documentation and Record Keeping

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<tr>
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<th>Guidance – How you should do it</th>
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<tr>
<td>Documentation and record keeping are critical in managing a permanency planning case. Documentation and record keeping must be maintained to meet federal, state, and local mandates.</td>
<td>Documentation and record keeping should be viewed as a valuable tool to the county child welfare worker and the child welfare supervisor, as well as to the court.</td>
</tr>
</tbody>
</table>

MAINTENANCE OF THE PERMANENCY PLANNING RECORD
A record for each child in the custody of a county child welfare agency must be maintained throughout the life of the case.

The case record should provide and maintain a history of the child and family’s involvement.

The case record should include documents that constitute legal evidence. A comprehensive and up-to-date case record will alert the county child welfare worker and the child welfare supervisor when required action is needed in the case, such as agency case reviews, court reviews, and contacts with the child, family, and others.

CONTENTS OF THE PERMANENCY PLANNING RECORD
Prompt and adequate documentation in the case record must include:
- a description of the actions taken;
- current progress toward the goal and objectives stated on the Family Services Agreement (DSS-5240);
- a current copy of the Child Placement and Payment Report (DSS-5094); and
- the rationale for agency involvement and services delivery on an ongoing basis.

Case documentation must be current within 7 working days.

The agency must maintain an individual record for each child or sibling group. Each record must contain:
- Demographic Information, which must include:
  - The name, address, sex, race, Social Security Number, date of birth, and birth place of the child;
  - The names, addresses, telephone numbers, Social Security Numbers, dates of birth, races, religion, and marital status of the child's parents; and

The demographic information should be provided on a standardized face sheet in the case record. It is extremely important that this information be updated as new
The names, addresses, and telephone numbers of siblings and other significant relatives and kin.

- Annual Pictures of the Child
  - At the time permanency is achieved, the pictures must be given to the adult assuming responsibility for the child's care.
  - All additional pictures of the child must be maintained in the record or Life Book so they are available to the child, their family, or their adoptive family after resolution of the case.

- Child Placement and Payment Report (DSS-5094)
  - This form must be maintained in the case record, and must be updated as required and whenever there are changes related to any field.

- SIS Client Eligibility Form (DSS-5027)
  - This form must be maintained in the case record, and must be updated as required and whenever there are any changes related to any field.

- Eligibility Forms
  - All relevant eligibility forms, including the IV-E Eligibility Determination forms, must be maintained in the case record.

- Placement History
  - A placement history log must be maintained in each child's record. Copies of required notifications to parents regarding a change in a child's placement must be included in the record.

- Out-of-Home Family Services Agreement
  - All applicable parts of the Out-of-Home Family Services Agreement, including the health and education components, Family Assessment of Strengths and Needs, Family Reunification Assessment and/or Family Risk Reassessment, must be in the case record and signed by all appropriate parties.

- Transitional Living Plan for youth ages 14 and older
  - All applicable parts of the Transitional Living Plan, including documentation of LINKS services provided and/or offered.

The placement log should contain a record of the child's prior placements with names of caregivers, addresses, dates of placement, and specific reasons for the move.
<table>
<thead>
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</tr>
</thead>
<tbody>
<tr>
<td>• All court documents must be maintained in the case record, including the original petition, all motions for review, all court orders, all procedural notices, and court reports.</td>
</tr>
<tr>
<td>Legal Documents</td>
</tr>
<tr>
<td>• All court documents of importance to the child, including a birth certificate must be maintained in the record.</td>
</tr>
<tr>
<td>Reports and Evaluations</td>
</tr>
<tr>
<td>• Medical, dental, and psychological reports, including history, written assessments, and immunization records must be maintained in the case record and updated annually.</td>
</tr>
<tr>
<td>Educational Information</td>
</tr>
<tr>
<td>• A plan for educational stability must be in the case plan for each child in a county child welfare agency custody and efforts to maintain the child in their current school whenever a placement change occurs must be documented.</td>
</tr>
<tr>
<td>• Efforts to maintain a child in their current school, or if not feasible, documentation why a change of school was in the child’s best interest must be in the case record.</td>
</tr>
<tr>
<td>• Educational records and reports for school-age children, including IEPs when appropriate must be maintained in the case record and updated annually.</td>
</tr>
<tr>
<td>Written Assessments</td>
</tr>
<tr>
<td>• Any assessments of relatives or kin who may be considered as a potential placement resource for the child; and</td>
</tr>
<tr>
<td>• Assessments for consideration of a child for Independent Living, including the Transitional Living Plan, must be included in the case record.</td>
</tr>
<tr>
<td>Interstate Compact Documents</td>
</tr>
<tr>
<td>• All required documentation for accessing the Interstate Compact must be included in the case record.</td>
</tr>
<tr>
<td>Correspondence</td>
</tr>
</tbody>
</table>

Permanency Planning Services: Documentation and Record Keeping

- Letters of attempts to contact parents, relatives, and/or kin; reminder letters of scheduled visits and reviews; and referral letters to service providers must be carefully maintained in the case record.

Copies of notifications to participants in the Permanency Planning Review meetings must be maintained in the child’s record.

Correspondence letters constitute legal evidence and document attempts to contact absent parents and attempts to provide services. Maintaining correspondence from parents, relatives, and kin document the family’s response to these attempts.

**DOCUMENTATION**

Documentation must reflect the following:

- The dates and content of the county child welfare worker’s face-to-face and telephone contacts with the child, the parents, the foster parents or other caregivers, and collaterals.

- Progress the county child welfare worker is making in providing the services reflected in the Out-of-Home Family Services Agreement. This documentation is important to show reasonable efforts toward reunification or another identified permanent plan are being made.

- When reunification is the plan, documentation must reflect the progress or lack of progress the parent is making toward the goals and objectives identified in the Out-of-Home Family Services Agreement.

Dates and length of visits between the parent and child, as well as the substantive interactions between the child and parent during the visit.

See Cross Function topic of [Documentation](#) for definitions and additional protocol and guidance.

Documentation should assist in tracking progress toward the case goal, guiding service delivery and decision-making, and pointing out when the case goal may need revision.

Documentation should reflect the frequency of county child welfare worker visits (monthly contact required). It should also document reasons that justify when the requirements for a child are adjusted or not met.

Documentation should focus on parental behaviors and efforts that relate to the central issue that must be corrected for the child to return home safely.

Since visitation is an indicator of progress or lack of progress in achieving case plan objectives, quality documentation of visits should be used to support decision-making.

Documentation should also reflect issues related to compliance with the Indian Child Welfare Act and the Multi-ethnic Placement Act.

**END OF PERMANENCY PLANNING POLICY, PROTOCOL, & GUIDANCE SECTION**
## CROSS FUNCTION TOPICS

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### Definition

Intensive Family Preservation Services (IFPS) *(IFPS Family Service Manual)*:
- Provide intensive, in-home crisis intervention services designed to help families with children at imminent risk of being removed from the home,
- Are time-limited (a maximum of six weeks), and
- Are characterized by very small caseloads for workers, 24-hour availability of staff, and the provision of services primarily in the child’s home.

### Protocol – What you must do | Guidance – How you should do it
---|---
To qualify for IFPS, there must be a child at “imminent risk of out of home placement” through:
- Substantiation of child abuse, neglect, and/or dependency or a finding of services needed, and
- Risk rating of high (on Risk Assessment, DSS-5226 or Risk Reassessment DSS-5226)

When requesting IFPS, the following forms are to be provided:
- **DSS-5230** or **DSS-5226**, and **DSS-5027**

During IFPS:
- The IFPS worker is to be a member of the Child and Family Team. This collaboration will assist in prioritizing IFPS activities towards addressing the existing high-risk factors.
- The county child welfare worker must maintain weekly contact with the IFPS worker and document discussion regarding progress towards case activities.
- The ongoing county child welfare worker and supervisor must staff the case and document the frequency of contact between the county child welfare worker and the family/child(ren).

Upon completion of IFPS, the county child welfare worker must facilitate a meeting with the IFPS worker (preferably a CFT) to discuss, with the family, progress achieved towards case objectives. This meeting must occur within seven days of completion of Intensive Family Preservation Services.

IFPS is to provide the county child welfare worker written documentation regarding case objectives and family progress on the objectives.

IFPS should be considered as an option for all cases in which there is a risk rating of high.

Contact between IFPS and the county child welfare worker can either be over the telephone, via e-mail, or in person.
**CROSS FUNCTION TOPICS: Safety**

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<tr>
<td>The primary concern of Child Welfare Services is protecting children. When a safety threat (present or impending) is identified, the county child welfare agency must respond and develop a plan of safety. At no time, should a county child welfare agency worker leave a child in unsafe circumstances. The intent of safety planning is to reach an agreed upon plan with the family that imposes the lowest level of intrusiveness possible while assuring a child’s safety.</td>
<td>Non-secure custody will only be granted when one or more criteria exist as specified in N.C.G.S. § 7B-503. North Carolina statute N.C.G.S. § 7B-101 (19) defines a safe home as “a home in which the child is not at substantial risk of physical or emotional abuse or neglect.”</td>
</tr>
</tbody>
</table>

**Definitions**

**Safety Threat Defined**
A safety threat exists when there are conditions or actions within the child’s home that represent the likelihood of imminent serious harm to the child. There are two types of safety threats: present and impending.

1) Present safety threat refers to an immediate, significant, and clearly observable family condition (severe harm or threat of severe harm) occurring to a child in the present. Present danger is easier to detect because it is transparent and is occurring now. If present danger is observed, the child is not safe.

2) Impending safety threat refers to threatening conditions that are not immediately obvious or currently active but are out of control and likely to cause serious harm to a child in the near future. Impending danger is covert. Impending danger is a threat that can be reasonably expected to result in serious harm if safety action is not taken and/or sustained. These threats may or may not be identified at the onset of involvement by a county child welfare agency, but are understood upon a more complete evaluation and understanding of the individual and family conditions and functioning.

To be classified as a safety threat, a situation, condition, or behavior must meet the safety threshold. The safety threshold is the point when a parent’s behaviors, attitudes, emotions, intent, or circumstances create conditions that fall beyond mere risk of future maltreatment and have become an actual imminent threat to the child’s safety. These conditions could reasonably result in the serious and unacceptable pain and suffering of a vulnerable child.

**Safety Agreement Defined**
A safety agreement/plan is made between a parent and a county child welfare agency when a child is in immediate danger in their own home because of a safety threat. A safety agreement/plan must be all the following:

1) Sufficient to manage safety;
2) Tailored to the address the child safety issues that exist within the family;
3) Immediately available so that it is capable of being in operation the same day it is created; and
4) A plan that includes actions and goals that are specific and measurable.
CROSS FUNCTION TOPICS: Safety

Due Process Considerations
Under the United States Constitution, parents have a fundamental right to the care, custody, and control of their children. Safety actions that require the separation or restriction of a parent’s access to their child(ren) affect a parent’s custodial rights. When a county child welfare agency interferes with this right, reasonable procedural protections must be in place. This procedural protection often takes the form of a hearing in juvenile court. In certain situations, to protect a child, a county child welfare worker conducting an assessment may be required to perform actions that affect a parent’s custodial rights without first providing procedural due process. These instances should be used only to the extent necessary to protect the child and should not continue longer than necessary to assure safety. Procedural protection must be provided within a reasonable period, even when a parent agrees to the infringement on the parent’s own custodial right.

Guardians, custodians, caretakers, and other relatives, do not have these same constitutional rights; this due process consideration only applies to birth and adoptive parents.

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<tr>
<td>Assessing Safety</td>
<td>The Safety Assessment DSS-5231 is completed during a CPS Assessment. However, the Safety Assessment can be referred to for guidance regarding safety concerns identified during ongoing services.</td>
</tr>
<tr>
<td>Safety Planning</td>
<td>Safety Planning</td>
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<tr>
<td>An individualized safety agreement must be developed when a safety threat has been identified. The safety agreement/plan must be documented through:</td>
<td>While this is not an exhaustive list, there are four main categories of safety interventions that may be incorporated into a safety agreement:</td>
</tr>
<tr>
<td>• The Temporary Parental Safety Agreement developed with a CPS Safety Assessment or</td>
<td>1) Resource support refers to safety actions that address a shortage of family resources and resource utilization (such as obtaining heat, water, electricity, food, child care, etc.), the absence of which directly threatens the safety of the child.</td>
</tr>
<tr>
<td>• The safety agreement developed with a family during a CFT during the provision of CPS services (Assessments or In-Home).</td>
<td>2) Social support includes actions that reduce social isolation. Social support may be used alone or in combination with other actions to reinforce and support the capacity of the parents or other caretakers.</td>
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<td>When a Safety Agreement requires modification (i.e. new concerns arise; some safety issues identified have been addressed and others remain) the Safety Agreement must reflect the changes.</td>
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<tr>
<td>As soon as the county child welfare agency obtains sufficient evidence that the safety threats no longer exist, the agency must dissolve the Safety Agreement.</td>
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<td>The Safety Agreement must be signed by:</td>
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<td>• A parent (someone with legal authority) and</td>
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<tr>
<td>• The county child welfare worker and</td>
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### CROSS FUNCTION TOPICS: Safety

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<tr>
<td>- The county child welfare supervisor.</td>
<td>3) Crisis management is specifically concerned with intervening to bring a halt to a crisis and to facilitate problem solving to bring a state of calm to a family. The purpose of crisis management is to quickly control the threat to the child’s safety. Crisis management will often be employed along with other safety actions.</td>
</tr>
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</table>

If applicable, a guardian, custodian, or caretaker, and/or approved Temporary Safety Provider(s) must also sign the agreement. The Safety Agreement must be signed the same day that it is developed by the parent and county child welfare worker. The county child welfare supervisor must review and approve the Safety Agreement the same day (within 24 hours). This must be evidenced by:

- A Safety Agreement signed by the county child welfare supervisor or
- Documentation that reflects the joint decision-making process between the county child welfare worker and supervisor and the supervisor’s subsequent approval of the plan.

A CFT meeting must be held when a safety threat exists and:

- A Safety Agreement requiring separation or restriction is being proposed or
- Non-secure custody is the only means necessary to ensure safety of the child.

During this CFT meeting, other safety interventions, as well as, possible Temporary Safety Providers must be discussed.

If a CFT cannot be held prior to making a Safety Agreement involving separation or restriction or filing a petition for non-secure custody, a CFT must be held as soon as possible.

A Safety Agreement must be used when part of the environment must be controlled to determine whether there is sufficient evidence to support a case decision finding that the reported allegations of abuse, neglect, or dependency occurred. In some cases, it may involve one or more family members leaving the home or an agreement that certain family members will not have unsupervised contact with other family members.

When a Safety Agreement involves separation or restriction, the county child welfare agency must complete an Initial Provider Assessment (DSS-5203) and have it approved by the county child welfare supervisor, prior to the child being in the care of the identified Temporary Safety Provider. See Temporary Safety Provider regarding ongoing monitoring.

At any time while a Safety Agreement is in place, the county child welfare agency may consider involving the court.

A CFT meeting may be held at any time during a CPS involvement to address issues of safety planning.
WHEN A PETITION IS REQUIRED

There are some circumstances when juvenile court involvement (through filing a petition) must occur. When risk to the safety of a child is so great that the agency must protect the child by removing the child from the home, the county child welfare agency must file a petition including non-secure custody. Although this is not an exhaustive list, it covers many of the circumstances requiring immediate removal.

- The juvenile has been abandoned; or
- The juvenile has serious physical injuries that are not accidental such as abusive head trauma, internal injuries, or numerous broken bones injury;
- The juvenile has serious sexual abuse; or
- The juvenile is exposed to a substantial risk of injury or sexual abuse due to the actions or inaction of the parent, guardian, or custodian; or
- The juvenile needs medical treatment to cure, alleviate, or prevent suffering serious physical harm which may result in death, disfigurement, or substantial impairment of bodily functions and the parent, guardian, or custodian is either unable or unwilling to provide or consent to treatment; or
- A safety threat exists, and a prior Safety Agreement/plan was executed, but the parent did not adhere to the agreement; or
- A safety threat exists and the parent’s ability to make changes is limited because of limited intellectual ability or a mental health diagnosis; or
- A safety threat exists and there is no identified alternative caregiver that is willing to protect the child; or
- A safety threat exists and there is no identified alternative caregiver whose home environment is appropriate; or
- The parent consents to continuation of the non-secure custody order; or
- The juvenile is a runaway and consents to non-secure custody; and
- That there is a factual basis to believe that no other reasonable means are available to protect the juvenile.

Additionally, filing a juvenile petition during the CPS involvement must occur when:

- A Safety Agreement is not sufficient to ensure the safety of the child(ren) or
- There is reason to suspect the parent, guardian, or custodian will not abide by the Safety Agreement.

Voluntary Placement Agreements are not appropriate for use in any of the above situations regarding immediate removal.
### CROSS FUNCTION TOPICS: Safety

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<td>The filing of a juvenile petition requesting non-secure custody must occur in lieu of a Safety Agreement when a child will move to a home in another state, unless specifically allowed by a border agreement with the other state. The Interstate Compact on the Placement of Children (ICPC) must be followed whenever required by N.C.G.S. § 3800 et. seq. or the ICPC regulations.</td>
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When a safety threat exists and at least one parent has communicated that he or she will not agree to a Temporary Parental Safety Agreement or other safety agreement, the county child welfare agency must file a juvenile petition when protective services are refused, regardless of whether the agency requests custody of the child.

### VOLUNTARY REQUIREMENT

Safety Agreements are only available when the parent voluntarily agrees. Only the court may restrict a parent(s)’s access to their child(ren), including supervised visitation between a parent and that parent’s child.

Because a Safety Agreement exists only when it is voluntary, it may be revoked at any time.
- Revocation by a parent must include notification of the county child welfare agency.
- The Temporary Safety Provider must communicate their inability or unwillingness to continue to care for the child(ren) directly to the county child welfare agency.
- If a Safety Agreement is modified or dissolved by the county child welfare agency, the county child welfare agency must ensure that everyone included in the Safety Agreement has been notified as soon as possible.

Any time that a Safety Agreement is revoked or dissolved, the county child welfare agency must:
- Inform all individuals involved with the Agreement, and
- Assess safety and take action to ensure that the child(ren) is safe.

### VOLUNTARY REQUIREMENT

A county child welfare worker should never attempt to coerce a parent into agreeing to a Temporary Parental Safety Agreement with threats or promises that would affect the voluntary nature of the Temporary Parental Safety Agreement. An offer of a Temporary Parental Safety Agreement, even when the parent does not agree, may be included as an effort to prevent removal when asking the court to find that the agency made reasonable efforts.

If a Safety Agreement is revoked or dissolved, the county child welfare agency should consider:
- If safety still requires the need for a Temporary Safety Provider;
- Scheduling of a CFT;
- Other options to address remaining safety threats; including if necessary; Filing a petition.
## CROSS FUNCTION TOPICS: Safety

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<td><strong>MONITORING SAFETY</strong></td>
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<td>The county child welfare agency must monitor all aspects of the Safety Agreement to ensure that the child continues to be safe and the Agreement continues to be necessary and voluntary.</td>
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The county child welfare agency worker must meet with the parents and the child at regular intervals sufficient to ensure the safety and protection of the child, as well as, monitor progress towards goals. At each contact, it is important that the county child welfare worker assess safety, risk, and any other concerns that have arisen.
The primary concern of Child Welfare Services is protecting children from maltreatment.

Risk is the likelihood that a child will be harmed (abused or neglected). Safety threats are a subset of risk that represent the likelihood of immediate or imminent serious harm to the child.

Risk:
- Occurs on a continuum from mild to severe;
- Includes family situations and behaviors from onset progressing into seriously troubled;
- Applies to aspects of family life relevant to understanding the likelihood of maltreatment;
- Impacts child well-being and safety;
- Is based on an unlimited time frame (could occur any time in the future);
- Is associated with family functioning and behaviors that need to be managed or treated; and
- Requires a judgement about the negative effects on the child from future maltreatment.

Risk assessment is an ongoing process to determine the possibility of future harm to the child. It does not predict when or how serious the harm may be, but rather the likelihood that harm will occur. Risk assessment, based on an examination of factors, attempts to address whether the harm may continue, and whether the harm is acute or chronic in nature. It is used as a vehicle for decision making in child maltreatment cases. The risk scales are based on research on cases with "substantiated" abuse or neglect or "services needed" findings that examined the relationships between family characteristics and the outcomes of subsequent abuse and/or neglect. The scales do not predict recurrence; simply the likelihood that a family will have another incident without intervention by the county child welfare agency.

Protective Capacity is defined as the ability and willingness to mitigate or ameliorate the identified safety and risk concerns. Protective capacity can be demonstrated by a parent through their statements, actions, and reactions. Protective capacity exists both within the parent/caretaker and within the family environment.

When assessing risk, a county child welfare agency should consider:
- CPS history, how long has risk been occurring;
- Parent(s)/Caretaker(s) reaction to and/or explanation regarding the risk, what was the parent's/caretaker's intent;
- Related criminal history;
- Parent(s)/Caretaker(s) willingness to engage and/or agreement with safety and risk planning, what is the parent’s/caretaker’s attitude;
- How severe the potential risk is to the child(ren);
CROSS FUNCTION TOPICS: Risk and Use of Assessment Tools

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<td>maintaining the child(ren) in the family home.</td>
<td>• What is the impact of the potential risk on the child(ren);</td>
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<td>County child welfare social workers when assessing for risk must observe and document the impact of maltreatment on the child(ren). The social worker must use objective language to document the child’s behavior or condition and relate that behavior or condition to the identified maltreatment.</td>
<td>• What is the degree of change needed by the parent(s)/caretaker(s) to remediate the risk;</td>
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<td>The following assessment tools must be completed accurately and thoroughly, approved and signed within the timeframes indicated in the appropriate functional protocol:</td>
<td>• What is the timeframe within which the risk is likely to occur; and</td>
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<tr>
<td>• Safety Assessment DSS-5231 (Assessments),</td>
<td>• What is protective capacity of the parent(s)/caretaker(s) to address the identified risk.</td>
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<tr>
<td>• Risk Assessment DSS-5230 (Assessments),</td>
<td>Families should be involved in the completion of all the assessment tools used by the county child welfare agency (based on System of Care principles and Family-centered practice).</td>
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<td>• Risk Reassessment DSS-5230 (In-Home),</td>
<td>While the approach is family-centered, decisions regarding the risk, needs, and strengths are the responsibility of the county child welfare agency. The outcome of any decision should not be surprising to the family if the county child welfare worker has successfully involved family members.</td>
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<td>• Reunification Risk Assessment DSS-5227 (Permanency Planning), and the</td>
<td>IMPACT ON CHILDREN</td>
</tr>
<tr>
<td>• Family Strengths and Needs Assessment DSS-5229 (Assessments, In-Home, and Permanency Planning).</td>
<td>When assessing for risk, county child welfare agencies social workers should be alert for conditions, behaviors, and reactions in children that indicate an impact from maltreatment. In some cases, the impact may be directly and clearly related to the maltreatment, including, but not limited to:</td>
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<td>These tools assess safety and risk for all children living in the home throughout a case, define service needs of the family, and establish the basis for Family Services Agreements.</td>
<td>• Bruising, burn, bites or broken bones from abuse or neglect;</td>
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<td>• Medical condition from lack of medical care; and/or</td>
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<td>• Exposure to an unsafe condition, for example: young child running across busy street due to lack of supervision.</td>
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<td>However, some impact is less obvious and the agency will have to link the maltreatment to the conditions/impact on the child. The following observations or conditions regarding a child may indicate abuse or neglect:</td>
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<td>• Changes in behavior, for example, a change in school performance, acting out or irrational behavior, or change in appetite;</td>
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<td>• Difficulty focusing that cannot be attributed to physical or psychological causes;</td>
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<td>• Hyperactive, inability to calm themselves;</td>
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<td>• Hypervigilant, as if always concerned that something will happen;</td>
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<td>• Anxiety, with symptoms that may include headaches, stomach aches, nightmares, inability to relax or sleep through the night;</td>
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<td>• Overly compliant, passive or withdrawn;</td>
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<td>• Demanding or aggressive;</td>
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<td>• Reluctance to interact with or be around a specific adult;</td>
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**CROSS FUNCTION TOPICS: Risk and Use of Assessment Tools**

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<td>The tools must be:</td>
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<tr>
<td>• Based on face-to-face interviews with and/or observation of parents, caretakers, other household members, and children,</td>
<td>• Attaches easily and quickly to strangers or new adults;</td>
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<tr>
<td>• Based on information gained through collateral contacts,</td>
<td>• Fear, stated or demonstrated (shrinks away from an adult);</td>
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<tr>
<td>• Be reviewed and updated as necessary when new information is received regarding safety and risk, and</td>
<td>• Abuses animals or pets;</td>
</tr>
<tr>
<td>• Be signed by the case county child welfare worker and case supervisor to designate two-level review within time frames specified by each functional area.</td>
<td>• Poor hygiene, lack of self-care;</td>
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</table>

Assessments must be completed for the household of the parent(s)/caretaker(s) where the safety or risk of maltreatment was alleged or where services are to be provided. When the parent(s)/caretaker(s) have separate households and each parent/caretaker provides care independently, separate assessments based on their household must be considered. If determined that assessments are not required on parent/caretaker household, the justification must be documented.

The North Carolina Family Risk Assessment (Risk Reassessment) of Abuse / Neglect identifies the level of risk of future maltreatment to the child(ren) in the family and determines the level of service to be provided to each family.

The impact on children from chronic neglect and abuse can be lifelong. The consequences of experiencing trauma from maltreatment impact a child’s ability to cope, which can lead to cognitive delays and emotional difficulties. Childhood trauma negatively affects the body’s nervous and immune system development, putting those children at a higher risk of ongoing health problems, even into adulthood. Social workers should be keep an open mind about potential symptoms of maltreatment being careful not to assume the above behaviors or conditions are always indicators of maltreatment.

**PROTECTIVE CAPACITY**

Parent/Caretaker protective capacity should be assessed in three domains:

- Behavior characteristics;
- Cognitive characteristics; and
- Emotional characteristics.

Behavioral characteristics are defined as specific actions and activities consistent with and resulting in parenting and protective vigilance. Questions to consider include:

- Does the parent/caretaker have the physical capacity and energy to care for the child? If the parent/caretaker has a disability(ies) (i.e., blindness, deafness, paraplegia, chronic illness), how has the parent/caretaker addressed the disability in parenting the child?
- Has the parent/caretaker acknowledged and acted on getting the needed supports to effectively parent and protect the child?
### CROSS FUNCTION TOPICS: Risk and Use of Assessment Tools

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| The Risk Assessment identifies which families have high, moderate, or low probabilities of continuing to abuse and/or neglect their children. Completing the North Carolina Family Risk Assessment of Abuse / Neglect provides an objective appraisal of the likelihood that a family will maltreat the children in the next 18 to 24 months. The difference between the risk levels is substantial. High-risk families have significantly higher rates than low-risk families of subsequent reports and substantiations and are more often involved in serious abuse and/or neglect incidents. | - Does the parent/caretaker demonstrate activities that indicate putting aside one’s own needs in favor of the child’s needs?  
- Does the parent/caretaker demonstrate adaptability in a changing environment or during a crisis?  
- Does the parent/caretaker demonstrate actions to protect the child?  
- Does the parent/caretaker demonstrate impulse control?  
- Does the parent/caretaker have a history of protecting the child given any threats to safety of the child? |
| The Risk Reassessment identifies changes in risk after a family has been engaged in services. | |
| The North Carolina Family Assessment of Strengths and Needs:  
  - Evaluates the presenting strengths and needs of the family, and  
  - Identifies family strengths and needs to be utilized in case planning. | Cognitive characteristics are defined as the parent/caretaker’s specific intellect, knowledge, understanding and perception that contributes to protective vigilance. Questions to consider include:  
  - Is the parent/caretaker oriented to time, space, and place? (Reality orientation)  
  - Does the parent/caretaker have an accurate perception of the child? Does the parent/caretaker see the child as having strengths and weaknesses, or do they see the child as “all good or all bad”?  
  - Can the parent/caretaker recognize the child’s developmental needs or if the child has special needs?  
  - How does the parent/caretaker process the external stimuli? (i.e., a battered woman who believes she deserves to be beaten, because of something she has done.)  
  - Does the parent/caretaker understand their role to provide protection to the child?  
  - Does the parent/caretaker have the intellectual ability to understand what is needed to raise and protect a child?  
  - Does the parent/caretaker accurately assess potential threats to the child? |
| Emotional characteristics are defined as the parent/caretaker’s specific feelings, attitudes and identification with the child and motivation that results in parenting and protective vigilance. Questions to consider include:  
  - Does the parent/caretaker have an emotional bond to the child? Is there a reciprocal connectedness between the parent/caretaker and the child? Is there a positive connection to the child?  
  - Does the parent/caretaker have empathy for the child when the child is hurt or afraid?  
  - Is the parent/caretaker flexible under stress? Can the parent/caretaker manage adversity?  
  - Is the parent/caretaker able to control their emotions? If emotionally overwhelmed does the parent/caretaker reach out to others, or expect the child to meet the parent/caretaker’s emotional needs? |
## CROSS FUNCTION TOPICS: Risk and Use of Assessment Tools

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<td>• Does the parent/caretaker consistently meet their own emotional needs via other adults, services?</td>
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A statement by the parent/caretaker that he or she has the capacity to protect should be respected but observations of this capacity are equally if not more important. Observations and supporting information include:

- A history of behavioral responses to crises may indicate what may likely happen. Spontaneous behavior will provide insight into how a parent/caretaker feels, thinks and acts when they are or feel threatened.
- Recognize that a parent/caretaker may initially react in anger or “righteous indignation” and that this initial reaction may be appropriate and natural. However, once the initial shock and emotional reaction subsides, does the parent/caretaker blame everyone else for the “interference”?
- What are the dynamics of the relationship of and between multiple parents/caretakers? Is there domestic violence? What efforts have been made by the victim to protect the child? Does the victim align with the batterer?
- Does the parent/caretaker actively engage in a plan to protect the child from further harm? Is the plan workable?
- Does the parent/caretaker demonstrate actions that are consistent with verbal intent or is it contradictory?

### Environmental Protective Capacities

While the assessment of the parent/caretaker’s protective capacities is critical, an assessment of environmental capacities may also mitigate the safety concerns/risk of harm to a child. Below are several categories of environmental protective capacities to be considered.

- Family/kinship relationships that contribute to the protection of the child;
- Informal relationships;
- Agency supports;
- Community supports;
- Financial status;
- Spiritual supports;
- For American Indians, the tribe; and
- Concrete needs being met such as food, clothing, shelter.

Scaling is a great way to assess risk with a parent/caretaker. When using scaling questions, the county child welfare worker needs to anchor the scale with specific descriptors for high-
### CROSS FUNCTION TOPICS: Risk and Use of Assessment Tools

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<td>and low numbers. The county child welfare worker should plan to ask follow up questions. Identifying the number is just the beginning; the real value of scaling is in the follow-up questions. What does the parent/caretaker think makes it that number? What’s one thing they could do to lower the risk?</td>
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**RISK PLANNING**

Family Service Agreements and safety agreements/plans must be individualized based on the level of risk. Refer also to Safety for requirements for safety planning.

When there is severe potential risk to the child(ren) and/or severe potential impact on the child(ren), the county child welfare agency must determine if an intervention is necessary.

**RISK PLANNING**

For ongoing cases, risk planning should be addressed by the activities in the Family Services Agreement.

An intervention to address a severe potential risk, or risk with severe potential impact, could occur through development of a plan or holding a CFT. A plan may be required to reduce the risk even if a current safety threat is not present. Filing a petition for custody may be necessary in some circumstances for the protection of the child(ren).
### Legal Basis

N.C.G.S. § 7B-302 (e) states: "in performing any duties related to the assessment of the complaint or the provision or arrangement of social services, the director may consult with any public or private agencies or individuals, including the available State or local law enforcement officers who shall assist in the assessment and evaluation of the seriousness of any report of abuse, neglect, or dependency when requested by the director. The director or the director's representative may make a written demand for any information or reports, whether or not confidential, that may, in the Director's opinion, be relevant to the protective services case. Upon the Director's or the Director's representative's request and unless protected by the attorney-client privilege, any public or private agency or individual shall provide access to and copies of this confidential information and these records to the extent permitted by federal law and regulations."

### Protocol – What you must do

A collateral contact is any person(s) identified as having information relevant to the CPS case or other persons or agencies known to be currently involved with the family or known to have knowledge of the situation. This includes, but is not limited to:

- Medical and mental health providers. When a child is alleged to have a medical or mental health condition, disease or illness, relevant to the allegation, the county child welfare agency must consult the medical or mental health provider treating the condition. This consultation must be focused on determining the family's assertions about that medical or mental health condition, or there must be justification for why this was not done.
- Educational providers.
- Collateral sources provided by the family. The county child welfare worker should ask the family for collateral information sources. These contacts should be people who can provide reliable information concerning the child and family—not simply character references. This would include, but not be limited to:
  - Extended family members,
  - Friends,
  - Community members,
  - Faith community members.
- Reporters/Intake Form Collaterals.

The following case participants must be contacted but are not considered collateral contacts:

- Placement provider, including but not limited to:
  - Foster care provider, including residential providers
  - Kinship provider
  - Temporary Safety Provider

### Guidance – How you should do it

**Professional Collateral Contacts**  
It is expected that professional service providers and agencies will share concerns about the family, with the family members themselves. When a professional collateral is to be contacted, whether provided by the reporter, the family, or the county child welfare worker, the parent/caretaker should be given the option to be present for this collateral contact. In those instances, when the parent chooses not to be present, the county child welfare worker should advise the parent of the information gathered from that collateral source.

**Non-professional Collateral Sources**  
The parent will be with the county child welfare worker when contact is made if the parent chooses, and if the safety of the non-professional collateral information source is not compromised as a result. The county child welfare worker should contact the non-professional collateral information source to determine whether that individual has any concern about his/her own personal safety if the parent...
### CROSS FUNCTION TOPICS: Collateral Contacts

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<tr>
<td>• Parents or caretakers, including non-residential parents</td>
<td>and county child welfare worker make contact with them together. If that collateral expresses no concern for his/her own personal safety, the parent should be given the option of being present during the contact.</td>
</tr>
</tbody>
</table>

When a child has, or is alleged to have a medical condition, disease or illness, relevant to the allegation or to the need for ongoing services, the county child welfare agency must consult the medical provider treating the condition. This consultation must be focused on determining the family's assertions about that medical condition and/or the family's engagement in the medically recommended treatment for that medical condition, or there must be justification for why this was not done.

The county child welfare agency must exercise discretion in the selection of collateral sources to protect the family's right to privacy and the confidentiality of the report.

Parents must be advised of any professional collateral that will be contacted and their permission obtained to talk to that collateral. If the parent refuses permission, the county child welfare worker must first discuss the reason for the parents' refusal, and try to gain their permission. If that fails, then the county child welfare worker must decide if contact with the professional collateral is necessary to assess the safety and risk of maltreatment for the child(ren). If so, then the parent must be advised that due the statutory obligation to make a thorough assessment, based on the concerns reported, the collateral will be contacted, and the findings reported will be considered in the case decision.

The court may designate certain local agencies authorized to share information concerning juveniles. Agencies that are so designated must share, upon request, information that is in their possession that is relevant to any case in which a juvenile petition is filed alleging abuse, neglect, dependent, undisciplined, and/or delinquent and must continue to do so until the juvenile is no longer subject to the jurisdiction of juvenile court.

Documentation regarding collateral contacts must include

• Whom the county child welfare worker talked with, when, and what observations have been made regarding:
  - Safety and risk of maltreatment, and
  - The family's progress or barriers toward case goals, and

• Attempts to contact a collateral contact.
### Legal Basis

10A NCAC 70A.0105 regarding children: “the director shall make diligent efforts to locate the alleged victim child or children until such efforts are successful or until the director concludes that the child or children cannot be located. Diligent efforts shall include, but not be limited to, visits to the child's or children's address at different times of the day and on different days. All efforts to locate the child or children shall be documented in the case record.”

N.C.G.S.§ 7B-505(b) regarding diligent efforts to notify identify and notify relatives of child in agency custody

### Protocol – What you must do

**Protocol / Standards**

**LOCATING VICTIM CHILDREN AND THE VICTIM CHILDREN’S FAMILY**

Diligent efforts to locate must be performed to:

- Locate all alleged victim children;
- Locate parents, including a noncustodial parent; and
- Locate the family residence.

Diligent efforts are defined as persistent, relevant attempts to locate an individual or family. Diligent efforts must include, but are not limited to:

- Visits to the child's or parent’s address at different times of the day and on different days;
- Attempts to call last known phone number(s);
- Searches on Accurint, ASSIST and/or equivalent;
- Letters to possible address(es);
- Visits to the school or daycare the child attends;
- Contact with extended family members;
- Initial and ongoing discussion with children and known parent regarding any contact with absent parent or missing family member;
- Review of past CPS records or another agency history (NCFAST);
- Contact with utility providers and landlord(s);
- Contact with service providers, public and private;
- Contact with reporter or other collateral contacts;
- Contact with current or past employer(s);
- Contact with Child Support, vital records, check of civil records, including VCAP;

To locate a parent that is in prison, contact the NC Department of Corrections Records Office. Contact numbers and addresses for specific prisons can be found on the NC Division of Prisons website [http://www.doc.state.nc.us/dop/index.htm](http://www.doc.state.nc.us/dop/index.htm). All inmates have a case manager or county child welfare worker that can assist in contacting a prisoner.

County child welfare agencies are expected to be creative and flexible in determining the whereabouts of children, families, and/or parents who are not located by routine means.

A [diligent efforts guide](http://www.doc.state.nc.us/dop/index.htm) is available for use.

### Guidance – How you should do it
**CROSS FUNCTION TOPICS: Diligent Efforts**

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| • Review of police reports, criminal history (DOC, NC and Federal inmates, sex offender registry), court calendars check, contact with parole officers, etc.;  
• Review of internet searches (WhitePages, Anywho, etc.); and  
• Review of Social media (Facebook, etc). | |

Diligent efforts to locate a victim child, victim child’s family member or the victim child’s family must continue throughout an open case. A case staffing, including supervisor approval, must occur:

• To determine the frequency of diligent efforts for each case based on the safety and risk, and  
• Prior to ceasing diligent efforts.

**IDENTIFYING AND LOCATING EXTENDED FAMILY MEMBERS**

Diligent efforts to identify and locate extended family members must occur at least once a month throughout an open case. See Extended Family. The same listing of diligent efforts described above pertain to the identification and location of extended family members.

Documentation in the case file must include:

• What diligent efforts were made by the county child welfare agency to locate the child/family;  
• What the county child welfare agency considers as sufficient diligent efforts for each case. The documentation must support the decisions by the agency regarding the frequency and length of time that diligent efforts continue.

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Return to [CPS Family and Investigative Assessments TOC](#)
Return to [In-Home Services TOC](#)
Return to [Permanency Planning TOC](#)
Return to [Cross Function TOC](#)
## CROSS FUNCTION TOPICS: Filing a Petition

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<th>Policy</th>
<th>Legal Basis</th>
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<td>The agency must make reasonable efforts to protect the child(ren) in their own home and to prevent placement.</td>
<td>Under N.C.G.S. § 7B-302(c), a county child welfare agency is required to file a petition for the protection of the child when the parent, guardian, custodian, or caretaker refuses to accept the protective services provided or arranged by the child welfare agency. This petition may be filed with or without requesting non-secure custody, depending on the circumstances that exist in the family at the time.</td>
</tr>
<tr>
<td>A county child welfare agency must file a petition requesting adjudication of abuse, neglect, and/or dependency:</td>
<td>When preparing the Juvenile Petition alleging abuse, neglect, and/or dependency, N.C.G.S. § 7B-402 states, “The petition shall contain the name, date of birth, address of the juvenile, the name and last known address of the juvenile’s parent, guardian, or custodian, and allegations of facts sufficient to invoke jurisdiction over the juvenile.” N.C.G.S. § 7B-404 allows for the authorization of a magistrate by a judge when the clerk’s office is closed.</td>
</tr>
</tbody>
</table>
| • When safety related circumstances necessitate the need for immediate removal; | N.C.G.S. § 7B-406 reads, “Immediately after a petition has been filed alleging that a juvenile is abused, neglected, or dependent, the clerk shall issue a summons to the parent, guardian, custodian, or caretaker requiring them to appear for a hearing at the time and place stated in the summons.”  

In extreme safety situation, N.C.G.S. § 7B-500(a) provides the county child welfare worker authority to take temporary physical custody without a court order if there are reasonable grounds to believe that the juvenile is abused, neglected, and/or dependent and that the child would be injured or could not be taken into custody if it were first necessary to obtain a court order.  

In cases in which custody of the child has to be removed from the caretaker due to the immediate safety needs of the child, the agency is authorized to obtain an order for non-secure custody under N.C.G.S. § 7B-502. Non-secure custody will only be granted when one or more criteria exist as specified in NCGS § 7B-503.  

N.C.G.S. § 7B-504 explains that the Order for Non-Secure Custody shall be in writing (form AOC-J-150) and directs a local law enforcement officer the authority to assume custody of the juvenile and to give a copy of the custody order to the juvenile’s caretaker.  

Under N.C.G.S. § 7B-505, the court may place the child in a foster home or facility, with a relative, or with nonrelative kin. The Adoption and Safe Families Act (and § 7B-505(b)) includes the following statement: “In placing a juvenile in non-secure custody, the court shall first consider whether a relative of the juvenile is willing and able to provide proper care and supervision of the juvenile in a safe home. If the court finds that the relative is willing and able |
to provide proper care and supervision in a safe home, then the court shall order placement of the juvenile with the relative unless the court finds that placement with the relative would be contrary to the best interest of the juvenile.”

The county child welfare agency may request custody under N.C.G.S. § 7B-903 at the dispositional hearing following adjudication.

N.C.G.S. § 7B-904 statute specifically sets the procedure governing the contempt proceedings. Failure to comply with the order of the court may lead to the parent being found in civil or criminal contempt.

All state and county agencies must comply with the Multiethnic Placement Act of 1994, as amended by the Interethnic Adoption Provisions of 1996 (MEPA-IEP). The Multiethnic Placement Act is designed to “prevent discrimination in the placement of children in foster care and adoption on the basis of race, color, or national origin; decrease the length of time that children wait to be adopted; and facilitate the identification and recruitment of foster and adoptive parents.” The Act prohibits states or agencies from delaying or denying the placement of any child on the basis of race, color, or national origin. Further, any consideration of race or ethnicity must be done in the context of individualized needs of the child, with the rationale specifically documented in the placement record.

N.C.G.S. § 7B-101 statute defines reasonable efforts as: “The diligent use of preventive or reunification services by a department of social services when a juvenile's remaining at home or returning home is consistent with achieving a safe, permanent home for the juvenile within a reasonable period of time. If a court of competent jurisdiction determines that the juvenile is not to be returned home, then reasonable efforts means the diligent and timely use of permanency planning services by a department of social services to develop and implement a permanent plan for the juvenile.”

**FILING A PETITION**

This section specifies how to file a petition for adjudication for Abuse / Neglect / Dependency with or without filing for non-secure custody. See Assessments policy for petitioning regarding Refusal to Cooperate with / Obstruction of a CPS Assessment.

When a county child welfare agency determines that a petition is needed for the protection of a child alleged to be abused, neglected, or dependent, the petition must be drawn by the director or his designee, verified before an official authorized to administer oaths, and filed by the clerk, recording the date of filing. Whether removal of the child is required, the Juvenile Petition (form AOC-J-130) is filed with either the local clerk of court’s office or when the clerk’s office is closed, with the local magistrate’s office. Using the Administrative Office of the Courts (AOC) Juvenile Petition (form AOC-J-130) ensures that all of the information required is captured.
CROSS FUNCTION TOPICS: Filing a Petition

When a child is placed outside their county of residence as the result of a TAPA or Conflict of Interest (COI), whether during an Assessment or In-Home Services, this does not change the original venue (resident county) when filing a Juvenile Petition.

Along with Juvenile Petitions, a Juvenile Summons must also be filed (form AOC-J-142). The juvenile summons also contains the following information:

- A parent’s rights to legal representation;
- In many districts, information relative to the date, time, and location of a prehearing conference or child planning conference;
- If the agency has assumed custody of the child or children when filing a petition, information related to the hearing on need for continued non-secure custody (7-day hearing);
- Information that the dispositional order (or any subsequent order) may require certain activities of either the parent or the juvenile or may even remove the juvenile from the parent’s custody;
- Information related to the local law enforcement officer’s ability or inability to serve the summons, petition, affidavit as to the status of a minor child, and order for non-secure custody (if applicable) on the persons identified within the summons;
- A notice to parents, guardians, or caretakers that they may be held in contempt of court if they fail to show, without reasonable cause, at the hearing specified; and
- An additional notice that with the service of the summons on the parents, guardians, or caretaker the court system has obtained jurisdiction over them and that their failure to comply with any court order may result in the court issuing a show cause order for contempt.

Juvenile Petitions should also include information relative to the agency’s knowledge about issues including:

- Paternity or information on absent / missing parent(s);
- Known relatives able and willing to provide care for the child(ren);
- Child’s Mexican heritage;
- ICWA related issues;
- MEPA related issues;
- Information regarding the parent’s military affiliation (http://www.nccourts.org/Forms/Documents/1664.pdf); and
- Siblings or other juveniles remaining in the home and any specific findings of the assessment of the juveniles or any actions taken to secure the protection of the juveniles.

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<tr>
<td>Any petition initiated by a county child welfare agency must:</td>
<td>Parental behavior alone does not constitute a basis for a petition or non-secure custody. There is a basis for agency intervention only when the parent’s behavior causes harm or risk of harm to a child(ren).</td>
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<tr>
<td>- Clearly state all the conditions that would invoke the court’s jurisdiction and</td>
<td>County child welfare workers should consider the situation and its effect on the child before exercising the right to intervene, and</td>
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<td>- Contain sufficient information to make a legally valid case.</td>
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Revision Date: 06/15/18
## CROSS FUNCTION TOPICS: Filing a Petition

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<td>A county child welfare supervisor (or another county manager position) must approve the decision to file a petition prior to filing a petition.</td>
<td>most especially the need to remove a child. County child welfare workers should consider the possibility of first reducing the risk of harm to the child through the provision of services in the home. In making the decision whether to remove a child, county child welfare workers should evaluate the risk of harm to the child in the home compared to the harm that will be caused by the removal. County child welfare workers should consider staffing the case with the county child welfare agency’s designated attorney prior to the decision to file a petition.</td>
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### SAFETY CIRCUMSTANCES REQUIRING NON-SECURE CUSTODY

See Safety for list of circumstances requiring non-secure custody.

### Temporary Custody in Extreme Safety Situations

In extreme safety situation, the county child welfare worker must take temporary physical custody without a court order if there are reasonable grounds to believe that the juvenile is abused, neglected, and/or dependent and that the child would be injured or could not be taken into custody if it were first necessary to obtain a court order. The county child welfare worker must arrange for the placement, care, supervision, and transportation of the juvenile while in the temporary custody of the county child welfare worker.

Upon notification by the CPS county child welfare worker of the extreme safety situation, the agency director or the designee determines whether to file a petition for non-secure custody. If no petition is filed, the child must be returned to the parent from whom he or she was removed. When taking a juvenile into temporary custody, the agency must:

- Notify the parent, guardian or custodian that the juvenile has been taken into custody and advise the caretaker of the right to be present with the juvenile until a determination is made of the need for non-secure custody (worker must make every reasonable effort to notify the caretaker; however, failure to notify the caretaker that the juvenile is in temporary custody is not grounds for release of the juvenile);
## CROSS FUNCTION TOPICS: Filing a Petition

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| • Release the juvenile to the parent, guardian or custodian when the need for custody no longer exists; and  
• File a petition within twelve (12) hours and obtain an order from the district court judge for non-secure custody if the need for non-secure custody exists. | have been offered but have refused. Petitions should also specifically state the efforts the agency made with the family to prevent the need for removal of the child. Finally, the petition should state clearly that the children need the court’s protection by citing any relevant statutes.  

These petition statements should be broad enough to allow introduction of all evidence that the agency considers important to the case. Statements should only include what the agency believes to be facts in the case, not observations or opinions held by others. Workers should be aware that while only those allegations that rise to level of abuse, neglect, and/or dependency are to be included on the petition, some allegations might support more than one category. County child welfare workers should, in consultation with their agency’s legal counsel, thoughtfully examine the benefits and the drawbacks to whether to petition for abuse, neglect and/or dependency. |

### UNWILLINGNESS TO ACCEPT CRITICALLY NEEDED SERVICES or DESPITE AGENCY EFFORTS TO PROVIDE SERVICES, NO PROGRESS HAS BEEN MADE TOWARD PROVIDING ADEQUATE CARE FOR THE CHILD

The Juvenile Petition (form AOC-J-130) filed by county child welfare agencies in situations above is the same petition filed when the agency is seeking custody. The petition can be filed without an Order for Non-secure Custody (form AOC-J-150) if the county child welfare agency determines that removal of the child(ren) from the home is not required due safety.

Upon an adjudication finding that the juvenile is abused, neglected, and/or dependent, a dispositional hearing is held. At the dispositional hearing, the court can require the caretaker to engage or comply with actions or services to remediate or remedy behaviors or conditions that led or contributed to the juvenile being adjudicated as abused, neglected, and/or dependent.

Filing a petition requesting adjudication of abuse, neglect and/or dependency due to a lack of progress or engagement does not have
### CROSS FUNCTION TOPICS: Filing a Petition

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<td>to involve non-secure custody. An individualized decision must be made for each case about the need for court involvement with or without custody based upon whether removal of the child(ren) from the home is necessary for their protection.</td>
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If the child has been adjudicated abused, neglected, and/or dependent and, at a later date, the agency decides that non-secure custody is necessary to protect the child, the agency must insure that the non-secure custody order removing the child contains language stating that the removal is in the child’s best interest or that the child remaining in the home is contrary to the welfare of the child. This involves removing the child after a hearing on custody or, if non-secure custody grounds exist, obtaining an ex-parte non-secure custody order.

### PETITION REQUIREMENTS REGARDING PARENT/CARETAKER SERVICES

Whenever a juvenile is removed from the home of a parent, guardian, custodian, stepparent, or adult relative entrusted with the juvenile's care due to physical abuse, the director must conduct a thorough review of the background of the alleged abuser or abusers. This review must include a:

- Criminal history check and
- Review of any available mental health records.

If the review reveals that the alleged abuser or abusers have a history of violent behavior against people, the director must petition the court to order the alleged abuser or abusers to submit to a complete mental health evaluation by a licensed psychologist or psychiatrist.

### NOTIFICATION

The county child welfare agency must notify the following when a juvenile petition is filed. This includes, but is not limited to:

- All named respondents (parents, caretakers);
- Within 30 days, adult relatives (grandparents, great-grandparents, siblings, nieces, nephews, aunts and uncles).

See [Permanency Planning](#) policy. This notification must occur even if the child is placed with a relative or fictive kin at the
### CROSS FUNCTION TOPICS: Filing a Petition

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<td>time when the county child welfare agency petitions for custody.</td>
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**Notification of Mexican Heritage**
The county child welfare agency must inquire at the time the decision is made to take custody whether a child has any Mexican parentage. The County must notify the Mexican Consulate within 10 days of the decision to take custody the following information:
- The full name of the child;
- The child’s date of birth;
- The full name of the parent or custodian; and
- A name and phone number of the agency worker directly responsible for the case.

**ICWA**
See [ICWA](#) for additional notification requirements for American Indian children.

**COURT HEARING**
A hearing must occur within seven days when a child is removed from home by a non-secure order and may be postponed for no more than 10 business days with the parent's consent. The non-secure order must give specific sanction for a placement other than a licensed placement provider.
PREPARING PARENTS AND CHILDREN
The parents must be appropriately prepared for placement of their children into agency custody by explaining:
• The reason for the removal;
• Appropriate details about the placement provider;
• What to expect from the placement provider and county child welfare worker;
• How to reach the county child welfare worker and/or agency;
• When the next contact with the child will occur; and
• The legal process.

The Understanding Foster Care – A Handbook for Parents (DSS-5201) must be provided to the parents.

PREPARING CHILDREN
The child must be prepared for placement into agency custody based on their level of understanding by explaining:
• The reason for the removal;
• Appropriate details about the placement provider;
• What to expect from the placement provider and county child welfare worker;
• How to reach the county child welfare worker and/or agency;
• When the next contact with their parents will occur; and
• When the next contact with their siblings will occur.

For youth ages 12-17 entering county child welfare custody, a copy of the Understanding Foster Care – A Handbook for Youth (DSS-1516) must be provided to the youth.
CROSS FUNCTION TOPICS: Placement (or Placement Change) Preparation and Follow-Up

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<td><strong>PREPARING PLACEMENT PROVIDERS</strong>&lt;br&gt;The placement provider must be appropriately prepared for the placement by providing the following:</td>
<td><strong>PREPARING PLACEMENT PROVIDERS</strong>&lt;br&gt;Before a child is placed with prospective placement providers, the provider should be adequately prepared and have appropriate knowledge and skills to provide for the needs of the child.</td>
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<tr>
<td>• Medical information about the child;</td>
<td>Any information regarding the child’s bedtimes, routines, favorite foods, etc. that was gathered from the parent(s) should be shared with the placement provider at the time of placement. Knowledge of such things can help the child feel more comfortable.</td>
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<td>• Any medications, glasses, hearing aids, etc.;</td>
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<td>• Any upcoming appointments the child(ren) will need to attend,</td>
<td>It is important for the placement provider to know what may be expected from the child behaviorally in order to respond appropriately to those behaviors.</td>
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<tr>
<td>• Necessary information regarding the child’s educational needs; and</td>
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<tr>
<td>• Specific information regarding the child’s behaviors;</td>
<td>The county child welfare worker should also inform the placement provider of the concurrent permanency planning process for the child and of possible concurrent plans for achieving permanence for the child. The foster parent should be informed of their role in planning for the child in partnership with the agency and the birth family.</td>
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<td>• Any other strengths and needs of the child; and</td>
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<td>• Any other information that will make the transition less traumatic for the child(ren).</td>
<td>At the time of placement, when the county child welfare agency provides agency contact information, the placement provider should be reminded to contact the agency when, but not limited to:</td>
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<tr>
<td>Placement providers must be provided county child welfare agency contact information.</td>
<td>• Any child injury or medical issue;</td>
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<td>Placement providers have a need to know the HIV status of children in their care. Infections or viruses that are less serious in a non-infected child can be fatal to an HIV-infected child, and placement providers must be aware of symptoms that require immediate medical attention. However, prior to disclosure of a child’s HIV status, child welfare agencies must consider and protect the child’s right to confidentiality. While concern for confidentiality exists throughout the service delivery system, information regarding persons infected with HIV requires special consideration. This is due to the potential social and psychological damage that can be caused by inappropriate sharing of such information.</td>
<td>• Any child significant behavioral issue;</td>
</tr>
<tr>
<td>If the child is in the legal custody of the county child welfare agency, the county child welfare worker must provide the placement provider with the Child Health Status Component (DSS-5206) at the time of placement.</td>
<td>• Any disclosure by the child regarding incidents of abuse and/or neglect;</td>
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<td>• Any scheduled or canceled child appointments; and/or</td>
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<td></td>
<td>• Any challenge that could have an impact on the stability of the placement.</td>
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PLACEMENT OF CHILD(REN)
When removal from the home is required, the agency must arrange for and maintain a single, stable living arrangement for the child. The agency must first assess:

- Whether any relatives are willing and able to care for the child and
- The extent to which the placement with a relative is in the best interest of the child.

The Initial Provider Assessment (DSS-5203) and the Comprehensive Assessment (DSS-5204) and the Comprehensive Assessment instructions (DSS-5204ins) along with criminal and other background checks must be used to assess relatives/kinship care providers. See Using Kinship Provider.

The assessment of any identified placement must be sufficiently thorough to allow the court to make an informed decision. The judicial process must be directed toward the goal of ensuring a safe, permanent home for the child within a reasonable time.

Prior to placement with a relative outside North Carolina, the placement must be in accordance with the Interstate Compact on the Placement of Children.

If a relative cannot be identified as an appropriate placement for the child, a placement resource must be chosen for the child(ren) that ensures that the child is placed:

- In the least restrictive setting;
- In the most family-like setting;
- In close proximity to the parent’s home; and
- In a setting that is consistent with the safety and best interests, strengths and special needs of the child.

Documentation must reflect the diligent efforts made to provide a placement that meets the above criteria or reasons why this is not possible. Carefully choosing the best placement resource is critical to the goal of one single, stable, safe placement within the child’s own community.

PLACEMENT OF CHILD(REN)
Carefully choosing the best placement resource is critical to the goal of one single, stable, safe placement within the child’s own community.

When children cannot be assured safety in their own homes, the best alternative resource can often be found within the extended family and other “kin.” Kinship is the self-defined relationship between two or more people and is based on biological, legal, and/or strong family-like ties. Parents and guardians facing the risk of child placement should be given a reasonable opportunity to identify and come together with their kinship network to plan for and provide safety, care, nurture, and supervision for the child. The agency has the responsibility of assessing the suggested resource to assure that the child will receive appropriate care.

At the first conversation with relatives or kin about having a child(ren) placed with them, it is critical that a thorough discussion about all options occurs. A critical piece of information for the relative or kin considering taking the child(ren) into their home at the time of non-secure custody is the possibility of becoming a licensed foster parent or for adoption should the plan for reunification not be achieved. This conversation should occur during the kinship care assessment as well as when any changes in the planning occur.

Whether licensed as a foster home or not, kinship care providers should be valued and treated as partners with the birth family and the agency. This includes notifying relatives providing care for a child of any court review or hearing to be held about the child and of their opportunity to be heard in court.

Kinship care providers may not be aware of the impact of abuse, and may be reluctant to agree to a non-corporal punishment policy. The agency should discuss and formalize a
### CROSS FUNCTION TOPICS: Placement (or Placement Change) Preparation and Follow-Up

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<td>Out of State placements must comply with the <a href="https://www.kidsdata.org/inters/compact">Interstate Compact</a> on the Placement of Children (ICPC). County child welfare agencies must:</td>
<td>child-specific alternative discipline plan for children in agency custody.</td>
</tr>
<tr>
<td>- Consider in state and out-of-state options when making reasonable efforts to place the child in accordance with the permanent plan and to finalize the permanent plan;</td>
<td>County child welfare workers should use family-centered practice tools which focus on a mutual sharing of information among agency staff, other professionals, the family, and their kinship network. Families, along with their kinship network, should be fully involved in the decision-making process from the point of initiation of services so that the resources and wisdom of the family and its culture can be tapped. The family’s understanding incorporates an historical perspective of the problems faced by the family, as well as their efforts to remedy those problems. They can confront the problems and to help provide realistic supports needed to help the child and their family of origin move toward healing.</td>
</tr>
<tr>
<td>- Consider in state and out-of-state permanent placement options at permanency hearings. (If a child is in an out-of-state placement at the time of the hearing the permanency hearing must determine whether the out-of-state placement continues to be appropriate and in the child’s best interests.)</td>
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A child must only be moved when it is in their best interest and there are clear indicators documented to support the necessity of the move.

### EDUCATIONAL STABILITY

Placement of a child must consider the appropriateness and proximity of the current educational setting. To comply with this requirement the county welfare agency must:

- Coordinate with the local educational agency to ensure that a child remains in their current school, or
- If remaining in that school is not in the child’s best interest, assure immediate enrollment of the child in a new school with all educational records provided.

When a county child welfare agency takes custody of a child(ren) a Best Interest Determination (BID) meeting regarding a child’s school placement must occur prior to a change in school. If the BID meeting does not occur prior to the child’s new placement, a BID meeting must be scheduled within five school days after the child’s placement.

The Notification form ([DSS-5133](https://www.dhhs.ky.gov/Forms/New/5133)) must be provided to the child’s current school. See [DSS-5133ins](https://www.kidsdata.org/inters/compact).

Placement of children under 12 years of age in group care should only be considered after other less restrictive and/or more family-like options have been seriously pursued. Residential/group care should only be used when it clearly meets the well-being needs of the child and no other family setting is available for that child.

In addition, the Federal Child and Family Services Review assesses (in Permanency Outcome 2) the state’s performance in (1) placing children in county child welfare custody in close proximity to their parents and close relatives; (2) placing siblings together; (3) ensuring frequent visitation between children and their parents and siblings in county child welfare custody; (4) preserving connections of children in county child welfare custody with extended family, community, cultural heritage, religion and schools; (5) seeking relatives as potential placement resources; and (6) promoting the relationship between children and their parents while the children are in county child welfare custody.
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| When an emergency placement requires a school change prior to holding a BID meeting, the Immediate Enrollment form (DSS-5135) must be provided to the new school. See DSS-5135ins. | **EDUCATIONAL STABILITY**  
The BID meeting regarding a school change for a child(ren) should be coordinated with the pre-petition CFT meeting, whenever possible, and appropriate. |

**SHARED PARENTING**  
The county child welfare agency worker must facilitate an initial shared parenting meeting between the parent(s) and placement provider(s) no later than fourteen days after a child(ren)’s placement out of the home. The county child welfare worker must document if there is a family reason that prevents this meeting from taking place within seven days.  

**SHARED PARENTING**  
A shared parenting meeting between the parent(s) and placement provider(s) should occur as soon as possible to ensure that the partnership has a strong beginning and is supported by the child welfare agency. When the parent and placement provider meet the day the child(ren) enters county custody, the adults can share information about the child(ren) that will make the transition for the child(ren) must less difficult. The county child welfare worker should coach the parent through this first interaction to maintain focus on the needs of the child(ren). The foster parent and county child welfare worker partner should with the birth parent to maintain the parent’s connection to their children while continually focusing on the welfare of the child. This connection can preserve and/or rebuild their relationship leading to long term good outcomes for children and families. Shared parenting emphasizes foster parents as being a support to birth families instead of substitute caretakers.
## CROSS FUNCTION TOPICS: Placement (or Placement Change) Preparation and Follow-Up

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<td><strong>AFTER PLACEMENT</strong>&lt;br&gt;Within 3 calendar days following out-of-home placement the county child welfare agency must:</td>
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<tr>
<td>- Have face to face contact with the child to assess the child’s adjustment to the placement, or&lt;br&gt;- Document diligent efforts and a plan to address these requirements.</td>
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<tr>
<td>The 3-day contact with a child(ren) is in addition to any contact or interaction with the child(ren) at time of placement.</td>
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<tr>
<td>Within 7 days the county child welfare agency must:</td>
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<tr>
<td>- Provide to the placement provider the Child Educational Status DSS-5245&lt;br&gt;- Ensure a medical exam occurs for the child(ren), use Form DSS-5206,&lt;br&gt;- Have face to face contact with the placement provider in the provider’s home (if it is a two-adult provider home, contact must occur with both providers). This 7-day contact with the provider is in addition to any contact or interaction with the provider at time of placement, and/or&lt;br&gt;- Document diligent efforts and the plan to address these requirements.</td>
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<tr>
<td>See <a href="#">Permanency Planning</a> for additional After Placement requirements.</td>
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CROSS FUNCTION TOPICS: Temporary Safety Providers & Kinship Providers

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<tr>
<th>Policy</th>
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<tr>
<td>When during provision of child welfare services, a child is placed in the care of a provider other than the parent or caretaker, the county child welfare agency must remain involved and maintain the required contacts with the child, the family providing placement, and the family until safety can be assured and the child can be reunified with the family or until the child is in a legally secure placement, whether it be custody or guardianship or adoption. Parents must be involved, as well as the safety provider, with the county child welfare agency in planning at every stage of the case.</td>
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<thead>
<tr>
<th>Definitions</th>
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<tr>
<td>Safety Provider – Any person or persons (either Temporary Safety Provider or Kinship Provider) that is not the parent or caretaker but is providing care for a child and is required for child safety.</td>
</tr>
<tr>
<td>Temporary Safety Provider - A voluntary, temporary intervention made between a parent and a county child welfare agency during the delivery of child protective services. Temporary Safety Providers are used to address immediate safety threats to a child when a child is found unsafe in the care of their parents/caretakers during child protective services. Temporary Safety Providers must only be used when less intrusive safety interventions are not sufficient. Temporary safety providers may care for the child outside of the child’s home or provide supervision of the parent’s contact with the child in or outside of the child’s home.</td>
</tr>
<tr>
<td>Kinship Provider – A relative or fictive/nonrelative kin identified or in place during Child Permanency Planning Services. Kinship is the self-defined relationship between two or more people and is based on biological, legal, and/or strong family-like ties. Identification of a Kinship Care Provider by a parent is desired; however, a parent may not always agree with the decision to evaluate or place a child with a specific kinship care provider. Placement with a Kinship Care Provider often lasts for months or years, must have court oversight, and addresses safety and/or risk factors.</td>
</tr>
<tr>
<td>Nonrelative kin. – An individual having a substantial relationship with the juvenile. In the case of a juvenile member of a State-recognized tribe as set forth in G.S. 143B-407(a), nonrelative kin also includes any member of a State-recognized tribe or a member of a federally recognized tribe, whether or not there is a substantial relationship with the juvenile.</td>
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<tr>
<td>INITIATING USE OF A SAFETY PROVIDER, TEMPORARY SAFETY PROVIDER OR KINSHIP PROVIDER</td>
<td>INITIATING USE OF A SAFETY PROVIDER, TEMPORARY SAFETY PROVIDER OR KINSHIP PROVIDER</td>
</tr>
<tr>
<td>When a Temporary Safety Provider or Kinship Provider is identified, the following must occur prior to the child being left in the care of the provider:</td>
<td>ASSIST can be used to complete provider background checks but results should be validated.</td>
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<tr>
<td>• Background checks that includes:</td>
<td>Critical information for the relative or kin considering taking the child into their home is the potential for</td>
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<tr>
<td>o Criminal check. A review of ACIS for any criminal charges or convictions in North Carolina through the AOC data base or equivalent;</td>
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http://www.ncga.state.nc.us/enactedlegislation/statutes/pdf/bychapter/chapter_7b.pdf
CROSS FUNCTION TOPICS: Temporary Safety Providers & Kinship Providers

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<tr>
<td>o Check of Civil Case Processing System (VCAP) for civil actions such as domestic violence protective orders; and</td>
<td>adoption down the road, even if that is not the plan at the time. If the child has never been in the custody of a county child welfare agency before being adopted, Adoption Assistance is not an option. If that relative or kin later adopts the child, they cannot receive Adoption Assistance. Relatives need to understand that the county child welfare agency may be involved and not have custody; therefore, it is critical because of future implications as described above, that the county child welfare agency is very clear about this when working with relatives.</td>
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<tr>
<td>o Review of county child welfare agency records and RIL records;</td>
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<tr>
<td>• Initial Provider Assessment, <strong>DSS-5203</strong>, which includes a home visit, as evidenced by county child welfare worker and provider signatures.</td>
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<tr>
<td>• Approval of the Initial Provider Assessment by the county child welfare agency supervisor. Approval at the time of the assessment may be verbal. The Initial Provider Assessment must be signed by the supervisor within 3 days.</td>
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<tr>
<td>• Documentation of all the above.</td>
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CPS Central Registry check for previous CPS involvement must be completed prior to use of a Temporary Safety Provider (for open CPS cases).

When a Temporary Safety Provider will be supervising contact of the parent with his or child, and not providing care in the Safety Provider’s residence, some aspects of the Initial Provider Assessment are not required as defined in the instructions. All background checks must still be completed.

A review of 911 call logs for the address of all Temporary Safety Providers or Kinship Providers must also occur. As this cannot always be completed within the timeframe necessary to assess and approve use of a Temporary Safety Provider or Kinship Provider, it must be completed within one week.

**USE OF TEMPORARY SAFETY PROVIDERS (CPS ASSESSMENTS & IN-HOME SERVICES)**

The county child welfare agency must assess the Temporary Safety Provider and their residence (assessment of the provider’s residence is not required when the Temporary Safety Provider moves into the family home or supervises contact with a parent at a location not within the Temporary Safety Provider’s residence) when it is determined that a Temporary Safety Provider is necessary to ensure safety, either through:

- The child staying in the residence of the Temporary Safety Provider or

**USE OF TEMPORARY SAFETY PROVIDERS**

Whenever a Temporary Safety Provider is used the county child welfare agency should consider the additional trauma that the child(ren) will experience. The county child welfare agency should prepare the child(ren) for the transition to the Temporary Safety Provider and for the return to their home.
## CROSS FUNCTION TOPICS: Temporary Safety Providers & Kinship Providers

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<tr>
<td><strong>• A Temporary Safety Provider moving into the family home to supervise parental contact.</strong></td>
<td>The option to use a Temporary Safety Provider, even when the parent does not agree, may be included as an effort to prevent removal when asking the court to find that the agency made reasonable efforts.</td>
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<tr>
<td>The Temporary Safety Provider must be someone that both parents and the county child welfare worker agree will safely care for the child.</td>
<td>If the proposed Temporary Safety Provider lives in another county and is within driving distance, the county child welfare worker (either the CPS Assessment worker or In-Home Services worker) should conduct the Initial Provider Assessment including making a visit to the home of the Temporary Safety Provider, or assistance should be requested from the safety provider’s county of residence.</td>
</tr>
<tr>
<td>Use of a Temporary Safety Provider must be a last resort and must not be done if an intervention can be identified that will keep the child safe without use of separation or restriction of a parent’s access.</td>
<td>If the Temporary Safety Provider lives in another county and does not live within driving distance of the county child welfare agency conducting the CPS Assessment the county child welfare worker conducting the CPS Assessment should contact the agency where the Temporary Safety Provider lives to arrange for a county child welfare worker from the county where the Temporary Safety Provider lives to make an immediate home visit and conduct the Initial Provider Assessment.</td>
</tr>
<tr>
<td>Use of a Temporary Safety Provider must be voluntary. A county child welfare worker must never attempt to coerce a parent into agreeing to use of a Temporary Safety Provider.</td>
<td>When a parent identifies a relative/kin for use as a Temporary Safety Provider, the same protocol for approval and monitoring that placement is used as for all Temporary Safety Providers. The term Kinship Provider is only applied to relative/kin placement providers when a child is open for Permanency Planning Services.</td>
</tr>
<tr>
<td>When use of a Temporary Safety Provider is proposed, a Child and Family Team (CFT) meeting must be held. If it is not possible to hold the CFT meeting prior to the separation or restriction due to an urgent need to maintain safety, then the Child and Family Team meeting must be held as soon as possible. Before the child(ren) are placed with a Temporary Safety Provider, see <strong>Initiating Use of Safety Provider</strong>.</td>
<td>If at any time parent is not in agreement with the use of a Temporary Safety Provider and the county agency determines that use of the Temporary Safety Provider is necessary to ensure safety, the county child welfare agency must file a petition and request non-secure custody.</td>
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<tr>
<td>If use of the Temporary Safety Provider includes a provision that the Temporary Safety Provider will supervise contact of the parent(s) with the child, it must be clear that the arrangement remains voluntary on the parent’s part. If at any time the parent is not in agreement with the need for the contact to be supervised, the county child welfare agency must file a petition in juvenile court.</td>
<td>If the proposed Temporary Safety Provider lives in another county the county child welfare worker must ask the Temporary Safety Provider's county for permission to enter the county for the purposes of conducting the home visit and Initial Provider Assessment.</td>
</tr>
<tr>
<td>If the proposed Temporary Safety Provider lives in another county the county child welfare worker must ask the Temporary Safety Provider's county for permission to enter the county for the purposes of conducting the home visit and Initial Provider Assessment.</td>
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### CROSS FUNCTION TOPICS: Temporary Safety Providers & Kinship Providers

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<tr>
<td>Whenever the Safety Assessment determines an intervention requiring separation or restriction of a parent’s access to their child is necessary and the family names a Temporary Safety Provider that resides in another state, the agency conducting the CPS Assessment must file a juvenile petition and request non-secure custody and comply with ICPC policy. The only exception is for CPS Assessment cases for families that reside in counties that have a border agreement with a neighboring state.</td>
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### MONITORING USE OF A TEMPORARY SAFETY PROVIDER

Contacts with each child in the care of a temporary safety provider must:
- Occur in the home at least once a month and
- Occur at the frequency required to monitor safety and risk. Refer to the appropriate function (Assessments or In-Home) for the requirements regarding the frequency of contacts.

Every contact must:
- Include visual observations of each person, their behavior, and the environment, especially related to safety or risk;
- Describe specific interactions with each household member, and
- Explain the inability to interview any child, if appropriate.

Contact with the temporary safety provider must:
- Include discussion regarding any needs or issues regarding the child(ren);
- Occur face to face at least once a month; and
- Include observation of the child(ren) and the safety provider during the face to face contact.

For CPS Assessments, when use of a Temporary Safety Provider continues beyond 29 days, a review of the Initial Provider Assessment must be completed within 30 days and within every 30 days after until the case decision date. An updated criminal records check on anyone in the home over age 16 and a request for 911 call logs must occur at the time of each review.

For In-Home Services cases, the Comprehensive Provider Assessment, DSS-5204, must be completed for Temporary Safety Providers:
- When use of the Temporary Safety Provider continues over 29 days after the case decision date and transfer to In-Home Services, or

### MONITORING USE OF A TEMPORARY SAFETY PROVIDER

Monitoring of the parent(s)/caretaker(s)’s progress to address the safety threat that requires use of the Temporary Safety Provider should be case specific. The number of visits to the home to which the child(ren) will return, in addition to the one required visit, should be case specific.

The frequency of contact with the safety provider, above the once per month required contact, should be case specific.
**CROSS FUNCTION TOPICS: Temporary Safety Providers & Kinship Providers**

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<tr>
<td>• When use of the Temporary Safety Provider initiates during an In-Home Services case and continues in use over 29 days after it was initiated. The Comprehensive Provider Assessment must be completed within 30 days of case decision or initiation based on the above.</td>
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Monitoring of the parent(s)’s progress to address the safety threat that requires use of the Temporary Safety Provider must:
• Identify progress by the parent(s) to address the safety threat;
• Confirm with the parent that use of the Temporary Safety Provider remains voluntary;
• Include visits to the home to which the child(ren) will return; and
• Be staffed by the county child welfare worker with the case supervisor, to determine what progress is required and the number/frequency of visits to the home to which the child will return prior to the child(ren)’s return.

The county child welfare agency must remain involved with the safety provider and the birth family until:
• The child’s ongoing safety is assured and the child can return to the home of the birth family and the placement is legally secure or
• The county child welfare agency files petition for custody. If a child(ren) cannot be returned to the home from which they were removed because of safety, the case cannot be closed until legal permanence has been obtained for the children.

Temporary Safety Providers are NOT legally secure for the child or for the caregiver. A case must not be closed until legal security for the child has been established through return to the parents or custody or guardianship to the relative or kin.

**TERMINATION OF A TEMPORARY SAFETY PROVIDER**
Use of a Temporary Safety Provider must end once the safety threat has been addressed. When terminating a Temporary Safety Provider, the county child welfare agency must:
• Hold a CFT,
• Develop a plan for return of the child to the care of their parent, and
## CROSS FUNCTION TOPICS: Temporary Safety Providers & Kinship Providers

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<td>Perform a home visit in the parent(s)’s home within 24 hours after the child(ren)’s return to the home. An interview with the child, separate from the parent, must occur within 24 hours after the child(ren)’s return to the home.</td>
<td><strong>USE OF KINSHIP PROVIDERS</strong> Providing all information to a kinship provider is a very important part of concurrent planning and provides the kinship care provider with valuable information that has implications later, especially as plans for permanency change for the child as time goes on.</td>
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### USE OF KINSHIP PROVIDERS (DURING PERMANENCY PLANNING SERVICES)
Placement with relatives or kin must be considered for children who are removed from their homes and in the custody of a county child welfare agency.

In order to maximize the possibility of a positive kinship placement, a thorough assessment must be conducted to evaluate the suitability of the placement. See [Initiating Use of Safety Provider](#).

### MONITORING KINSHIP PROVIDERS

**For Permanency Planning cases, the Comprehensive Provider Assessment, DSS-5204, must be completed for Kinship Providers:**

- When use of the Kinship continues over 29 days after the case is transferred to Permanency Planning, or
- When use of the Kinship Provider initiates during Permanency Planning Services and continues in use over 29 days after it was initiated.

The Comprehensive Provider Assessment must be completed within 30 days of the child entering custody if the child is already placed out of the home; or within 30 days of the child’s placement in the home of the kinship provider (if placed after entering custody).

In addition to completing the initial and comprehensive assessment, agency staff must maintain sufficient contact with the kinship care provider and the child to assure that the basic physical and emotional needs of the child are being met and that the kinship care provider is receiving adequate informal and formal support to meet those needs. Whether the home is licensed as a foster home, county child welfare workers must maintain contact as designated in [Permanency Planning](#) protocol.

County child welfare agencies must discuss with kinship providers the option to become a licensed foster parent and consider licensing a kinship provider as a foster parent if they want to be licensed and meet licensing requirements.

It is critical that the agency demonstrate sensitivity to the unique issues that are present when relatives and other kin are assessed for their suitability to parent children. Assessment should be based on an understanding of the kinship family’s culture and community, child rearing approaches, and family dynamics, and should focus on the ability of the family to meet the immediate and ongoing needs of the child.

If kin are determined to be suitable for the care and nurturing of the child, but the home cannot meet all foster care licensing requirements, the agency may submit justification for a waiver to the Section Chief of Children’s Services, NC DSS. In North Carolina, many licensure requirements may be considered for waiver if approval is in the best interest of the child(ren); if the health, safety and protection of the child is assured, and if the local agency recommends that the waiver(s) be granted. There are no waivers for training requirements, for well inspection requirements, or for placement of outside toilet facilities.
## CROSS FUNCTION TOPICS: Temporary Safety Providers & Kinship Providers

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</tr>
<tr>
<td>For all safety providers, services must be identified and provided to assure that the safety provider can meet the child’s needs.</td>
<td>Agency staff should help the safety provider locate and develop support and resources needed in caring for the child.</td>
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The safety provider must be invited to participate in planning at every stage of the case, to include, but not limited to:

- Development and reviews of Family Services Agreements;
- Medical, mental health, educational, and other appointments regarding the child in their care; and
- CFTs and PPRs.

Some services that are frequently requested by safety providers are:

- “grandparent” support groups open to all kinship caregivers regardless of age;
- legal assistance in obtaining permission to enroll the child in school, to obtain medical attention or to obtain legal custody or guardianship;
- assistance negotiating the social services system to get approved for food stamps, Work First grants, Medicaid or state supported insurance coverage for the child, child support, or day care services; and
- information and referral services to connect with informal and formal service providers in the local community.

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CROSS FUNCTION TOPICS: Domestic Violence

Purpose
Following are the six principles developed through the Child Well-Being and Domestic Violence Task Force to address the intersection of child safety, permanence and well-being and domestic violence.

- Enhancing a non-offending parent/adult victim’s safety enhances their child’s safety.
- Domestic violence perpetrators may cause serious harm to children.
- Domestic violence perpetrators, and not their victims, should be held accountable for their actions and the impact on the well-being of the non-offending parent/adult victim and child victims.
- Appropriate services, tailored to the degree of violence and risk, should be available for non-offending parent/adult victims leaving, returning to, or staying in abusive relationships and for child victims and perpetrators of domestic violence.
- Children should remain in the care of the non-offending parent/adult victim whenever possible.
- When the risk of harm to the child outweighs the detriment of being separated from the non-offending parent/adult victim, alternative placement should be considered.

The primary focus in cases involving domestic violence is the assessment of risk posed to children by the presence of domestic violence. The goals of CPS interventions in cases involving domestic violence are:

- Ensure the safety of the child.
- All family members will be safe from harm.
- The non-offending parent/adult victim will receive services designed to protect and support him or her.
- The children will receive services designed to protect, support, and help them cope with the effects of domestic violence.
- The alleged perpetrator of domestic violence will be held responsible for their abusive behavior.
- The incidence of child maltreatment co-occurring with domestic violence will be reduced.

The challenge in providing Child Protective Services interventions in domestic violence situations is to keep the children safe without:

- Penalizing the non-offending parent/adult victim and
- Escalating the violent behavior of the alleged perpetrator of domestic violence.

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<tr>
<td>Domestic violence is defined as the establishment of control and fear in an intimate relationship through the use of violence and other forms of abuse including, but not limited to physical abuse, emotional abuse, sexual abuse, economic oppression, isolation, threats, intimidation and maltreatment of the children to control the non-offending parent/adult victim.</td>
<td>The N.C.G.S. § Chapter 50-B also defines domestic violence according to the relationship between the parties and behaviors or actions that constitute domestic violence, as well as its available relief. North Carolina General Statutes also identify certain misdemeanor and felony criminal offenses that often occur in the context of domestic violence, such as assault, stalking, violation of a Domestic Violence Protection Order, domestic criminal trespass, harassing telephone calls, communicating a threat, and strangulation.</td>
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While victims and families may experience and be affected by domestic violence in different ways, there are still core aspects of
**CROSS FUNCTION TOPICS: Domestic Violence**

Domestic violence that are consistent across racial, socio-economic, educational, and religious lines:

- The primary goal of a domestic violence perpetrator is to obtain and maintain power and control over their partner.
- While domestic violence may “present” as an incident of violence or neglect, it is rather a pattern of abuse, which may include violent incidents.
- Domestic violence is not simply discord between intimate partners but rather a progressive, intentional, patterned use of abusive behaviors.

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| INTERACTION WITH NON-OFFENDING PARENT/CARETAKER  
The non-offending parent/adult victim must never be placed in danger by having to be interviewed; develop safety plans; or meet with the perpetrator of violence against him or her. | Each parent or caretaker is only responsible for their own actions to provide safe, nurturing care for their children. |
| INTERACTION WITH NON-OFFENDING PARENT/CARETAKER  
The Non-Offending Parent/Adult Victim Domestic Violence Assessment Tool, DSS-5235, contains scaled assessment questions and should be used to support the determination of safety and risk factors. | 
<p>| The inability to speak with the non-offending parent/adult victim alone may be an indication of the level of control the perpetrator of domestic violence exerts over the family, and an indication of high risk. The presence of relatives or friends may also affect disclosure and safety. |
| Information concerning resources and referrals to services should immediately be given to the non-offending parent/adult victim and children (as appropriate). |
| With cases involving domestic violence, the safety of children is closely linked to the safety of the non-offending parent/adult victim. So, domestic violence cases also include a secondary focus on the safety of the adult victim. The non-offending parent/adult victim of domestic violence is the expert at predicting the domestic violence perpetrator’s reactions. Therefore, development of the family safety plan or services agreement is driven by the non-offending parent/adult victim based on what they think they are capable of and willing to do to ensure safety for their children and themselves. |</p>
<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Safety Plan is a tool used by domestic violence advocates in providing services to non-offending parents/adult victims. The Personalized Domestic Violence Safety Plan (DSS-5233) contains suggested steps that may be useful for county child welfare agencies in:</td>
<td>Keep in mind that a perpetrator (or his legal representative) can subpoena the contents of a case file. For the protection of the victim, the county child welfare agency should make decisions on where and how domestic violence safety plans are maintained accordingly.</td>
</tr>
<tr>
<td>• Safety planning with the non-offending parent/adult victim and</td>
<td>To develop and monitor a coordinated services plan for every case with domestic violence, the county child welfare worker should:</td>
</tr>
<tr>
<td>• Assisting in the development of service agreements.</td>
<td>• Seek out and utilize the consultation of a domestic violence expert throughout the life of the case.</td>
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<td></td>
<td>• Communicate with a domestic violence perpetrator’s probation or parole officer regarding any current abuse.</td>
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<td></td>
<td>• Reach out and make connections with school social workers and teachers to gain information about the child’s day-to-day functioning.</td>
</tr>
<tr>
<td></td>
<td>• Work closely with Work First to create plans together. This is especially true when Work First may already be providing or can assist in referring a family for domestic violence services.</td>
</tr>
</tbody>
</table>

**INTERACTION WITH THE CHILD(REN)**

The children must not be interviewed in the presence of the violent adult. It is appropriate to interview the children in the presence of the non-offending parent/adult victim as circumstances allow, and when the safety of the children is not compromised.

Information obtained from the non-offending parent/adult victim or children that may jeopardize the safety of the child or the non-offending parent/adult victim must not be shared, especially with the alleged perpetrator.

**INTERACTION WITH THE CHILD(REN)**

The Children’s Domestic Violence Assessment Tool, DSS-5237, contains scaled assessment questions and should be used to support the determination of the safety and risk factors.

Every child reacts differently when exposed to domestic violence. Some children develop debilitating conditions, while others show no negative effects from the exposure to violence. As a result, it is important to interview the children regarding their involvement and/or exposure to domestic violence, as well as their general safety and well-being. It is important to recognize that older children are more likely to minimize reports of parental fighting. Younger children may be more spontaneous and less guarded with the information they share. See [Impact on Children](#) section of the Cross Function topic of Risk.
**CROSS FUNCTION TOPICS: Domestic Violence**

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<thead>
<tr>
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<tbody>
<tr>
<td>of domestic violence. Information shared, including information that may seem</td>
<td>INTERACTION WITH THE ALLEGED PERPETRATOR</td>
</tr>
<tr>
<td>inconsequential, and specifically information about the non-offending/adult victim’s</td>
<td>The Domestic Violence Perpetrator Assessment Tool, DSS-5234, contains scaled</td>
</tr>
<tr>
<td>whereabouts and/or schedule if he or she has left the home/relationship, can place the</td>
<td>assessment questions and should be used to support the determination of the safety</td>
</tr>
<tr>
<td>child and non-offending parent/adult victim in grave danger.</td>
<td>and risk factors.</td>
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<tr>
<td></td>
<td>Interaction with the alleged perpetrator of domestic violence provides the opportunity to</td>
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<td></td>
<td>observe and document behaviors relative to the allegations, both positive and</td>
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<td></td>
<td>“concerning.” This observation supplements information obtained from:</td>
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<td>• Police reports;</td>
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<td></td>
<td>• Criminal records;</td>
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<td></td>
<td>• Hospital/medical records;</td>
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<tr>
<td></td>
<td>• The child(ren); and</td>
</tr>
<tr>
<td></td>
<td>• The non-offending parent/adult victim.</td>
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<tr>
<td></td>
<td>It is important to note that the alleged perpetrator of domestic violence may attempt to:</td>
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<td></td>
<td>• Present himself or herself as the “victim”;</td>
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<td></td>
<td>• To charm the county child welfare worker;</td>
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<td></td>
<td>• Gain control of the interview; and/or</td>
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<td></td>
<td>• Deny any domestic violence, insisting that the relationship is “perfect.”</td>
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<td></td>
<td>During interaction with the perpetrator, the county child welfare worker should:</td>
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<td></td>
<td>• Focus on information from third party reports such as law enforcement, medical providers,</td>
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<td>or the Administrative Office of the Courts.</td>
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<tr>
<td></td>
<td>• Follow up on legal accountability and/or treatment, and other service referrals for the</td>
</tr>
<tr>
<td></td>
<td>alleged perpetrator of domestic violence.</td>
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<tr>
<td></td>
<td>• Convey to the alleged perpetrator of domestic violence that based on what</td>
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<td>happened (citing as much information as possible without compromising confidentiality or</td>
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<td></td>
<td>safety of the children, non-offending parent/adult victim, and/or the reporter) he or she will</td>
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<td></td>
<td>be required to take steps to stop the violence and ensure that the children are safe.</td>
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<tr>
<td></td>
<td>• Avoid debates and arguments with the alleged perpetrator of domestic violence. This is</td>
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<tr>
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<td>crucial. The focus of CPS is not to convince the alleged perpetrator of domestic violence to</td>
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<td>admit violent behavior, but discuss how to ensure the child’s safety with him or her.</td>
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<td></td>
<td>• Set limits within the interaction with the alleged perpetrator of domestic violence and</td>
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<td></td>
<td>document the behaviors that make limit setting necessary and their capacity to respect efforts</td>
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<tr>
<td></td>
<td>at setting limits.</td>
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</tbody>
</table>
CROSS FUNCTION TOPICS: Domestic Violence

<table>
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<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
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<tbody>
<tr>
<td></td>
<td>COLLATERAL CONTACTS</td>
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<td></td>
<td>• It should be remembered that domestic violence usually occurs in private and collaterals will not always be aware of the violence.</td>
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<tr>
<td></td>
<td>• Collateral contacts being unaware of the occurrence of violence does not mean that it is not happening.</td>
</tr>
<tr>
<td>Forms</td>
<td>Children’s Domestic Violence Assessment Tool (DSS-5237), Non-Offending Parent/Adult Victim DV Assessment Tool (DSS-5235), DV Perpetrator Assessment Tool (DSS-5234), Personalized DV Safety Plan (DSS-5233)</td>
</tr>
</tbody>
</table>

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Return to [In-Home Services TOC](#)
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Return to [Cross Function TOC](#)
## CROSS FUNCTION TOPICS: Child Well-Being

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<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CHILD WELL-BEING</strong></td>
<td><strong>CHILD WELL-BEING</strong></td>
</tr>
<tr>
<td>All child well-being needs or any lack of medical, dental, mental health or other care of the child must be:</td>
<td>Assessment of and identification of child well-being needs is an important aspect of child welfare services.</td>
</tr>
<tr>
<td>• Assessed during the provision of all child welfare services,</td>
<td>• Involvement with child protective services in and of itself can be traumatic to children and families. Most children, with or without a CPS intervention, have experienced incidents of trauma. Assessment of trauma and the impact of that trauma on each child should be a part of each child’s well-being assessment.</td>
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<tr>
<td>• Addressed by the child welfare agency or through service referrals,</td>
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<tr>
<td>• Reviewed during development and review of Family Services Agreements, and</td>
<td></td>
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<tr>
<td>• Documented (all the above).</td>
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</tbody>
</table>

Any physical, dental, developmental, psychological, and educational needs must be addressed, and appropriate assessments scheduled, within one week from the identification of the need.

To facilitate meeting the above, all open In-Home and Permanency Planning Services cases must include at a minimum, current copies of:

- Medical exam(s) current within the last year,
- Dental exam(s) current within the last year,
- Mental health or substance abuse treatment plan(s) current within the last year if the child has an associated need,
- Educational reports (academic and behavior) within the last year if the child is of school age, and/or
- Diligent efforts to obtain the above documentation.

Requests for this documentation must occur within the first month of ongoing (In-Home and Permanency Planning) cases. Confirmation of these documents and review of the documents as appropriate must occur during all updates of Family Services Agreements. There are additional requirements for open Permanency Planning Services cases regarding Education and Health. Also, refer to Permanency Planning and LINKS for additional requirements for youth over age 14.

Child Educational/Developmental/Cognitive Needs include:

- Special education classes;
- Normal grade placement, if child is school age;
- Services to meet the identified educational needs, unless no unusual educational needs are identified;
- Educational reports (academic and behavior) if the child is of school age, and/or
- Other documentation regarding services to meet a child’s well-being needs.
### CROSS FUNCTION TOPICS: Child Well-Being

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
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</thead>
<tbody>
<tr>
<td>• Early intervention services;</td>
<td></td>
</tr>
<tr>
<td>• Advocacy efforts with the school, unless the child is not school age or there have been no identified needs that are unmet by the school; and</td>
<td></td>
</tr>
<tr>
<td>• How the educational needs of the child have been included in the case planning.</td>
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</tr>
</tbody>
</table>

**Child Physical/Medical Health Needs include:**

- Whether the child has received preventive health care and if not, the efforts the agency will take to ensure that this care is obtained;
- Whether the child has received preventive dental care and if not, the efforts the agency will take to ensure that this care is obtained;
- Whether the child has up-to-date immunizations and if not, what efforts the agency will take to obtain them;
- Whether the child/family is receiving treatment for identified health needs and if not, what efforts the agency will take to obtain the treatment;
- Whether the child is receiving treatment for identified dental needs and if not, what efforts the agency will take to obtain the treatment.

**Child Behavioral/Mental Health/Emotional Needs include:**

- Whether the child is receiving appropriate treatment for any identified mental health/behavior/emotional needs/substance abuse needs and if not, what efforts the agency will take to obtain such treatment, and
- Assessment of trauma and impact on child’s well-being.

**Child Social/Cultural/Community Relationship Needs include:**

- Whether the child has social/community connections and if not, what social/community connections could support the child;
- Whether the child is engaged in community (school, church, social groups) activities and if not, identify community activities that the child may benefit from;
- Whether the child has a network for emotional, social, cultural, and/or other needs and if not, how one could be developed.
## Early Intervention

A referral must be made to the local Children’s Developmental Services Agency (CDSA) for early intervention:

- There is the appearance or presence of any of the North Carolina Infant Toddler Program eligibility conditions of “Established Conditions” or “Developmental Delay”, or
- There is the likelihood that a child has a mild developmental delay in the areas of:
  - Cognitive Development;
  - Physical Development, including fine and gross motor function;
  - Communication Development;
  - Social-Emotional Development; or
  - Adaptive Development.

Any child under three who has been identified as a substance affected infant must be screened for referral to the North Carolina Infant Toddler Program (NC ITP) through the local Children’s Developmental Services Agency (CDSA) for early intervention services. Refer to the North Carolina Family Assessment of Strengths and Needs (DSS-5229) S6 - Child Characteristics to screen a child for referral to a CDSA.

### Guidance – How you should do it

- **Early Intervention**
  - Whenever a county child welfare worker or a parent expresses concern about how a child’s development, CDSA can be contacted for consultation.

  Definition for “Established Conditions” or “Developmental Delay” can be found at [http://www.ncei.org/](http://www.ncei.org/).

  Use the DSS Referral Form for Early Intervention Services (CDSA) ([DSS-5238](#)).

  Parental consent is not required to make this referral.

  Acceptance of Early Intervention Assessment and Services is totally voluntary for the family, unless a safety issue has been identified that would necessitate a referral to Early Intervention Services.
CROSS FUNCTION TOPICS: Child and Family Team (CFT) Meetings

<table>
<thead>
<tr>
<th>Purpose</th>
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</thead>
<tbody>
<tr>
<td>Child and Family Teams are family members and their community supports that come together to create, implement and update a plan for the child(ren), youth, and family. The purpose of a Child and Family Team meeting is to:</td>
</tr>
<tr>
<td>- Reach agreement on which identified child welfare issues will be addressed and how they will be addressed throughout the life of the case;</td>
</tr>
<tr>
<td>- Develop a Family Service Agreement or safety plan that is created using the best ideas of the family, informal, and formal supports that the family believes in, the agency approves of, and lessens risk and heightens safety for the child/youth and family; and</td>
</tr>
<tr>
<td>- Plan for how all participants will take part in, support, and implement the Family Service Agreement or safety plan developed by the team.</td>
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</tbody>
</table>

A CFT meeting is a way to engage and partner with all the people who surround a family and to support the family in building a support network that will eventually sustain it after the case is closed. A CFT meeting is a way for county child welfare agencies to share responsibility for protecting children/youth with their families and the community.

<table>
<thead>
<tr>
<th>Definition</th>
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<tbody>
<tr>
<td>CFT meetings are structured, guided discussions with the family, the natural supports, and other team members about family strengths, needs, and problems and the impact they have on the safety, permanence, and well-being of the family’s child(ren) and youth. The meetings share the following components:</td>
</tr>
<tr>
<td>- A clear but open-ended purpose;</td>
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<tr>
<td>- An opportunity for the family to be involved in decision-making and planning;</td>
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<tr>
<td>- Options for the family to consider and decisions for the family to make;</td>
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<tr>
<td>- The family’s involvement in the development of specific safety or permanent plans and in the development of services and supports; and</td>
</tr>
<tr>
<td>- The outcome of the meeting will be reflected in the development or revision of a Family Services Agreement or a safety plan.</td>
</tr>
</tbody>
</table>

The primary focus must always be the safety and well-being of the child(ren) and youth.

A meeting is not a CFT meeting:
| - When a decision or plan has already been made and there is no room for input from family and natural supports either in deciding the plan or how to achieve the plan; |
| - When the family and natural supports (either biological or fictive) are not present; and |
| - When the goal of the meeting is primarily information gathering, rather than case planning. While these fact-finding meetings are important and useful, they are not CFT meetings, and they may hinder the family’s trust in county child welfare staff and services and ultimately negatively affect child welfare outcomes. |
### CROSS FUNCTION TOPICS: Child and Family Team (CFT) Meetings

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<thead>
<tr>
<th>Protocol -What Must Occur</th>
<th>Guidance – How it Should be Done</th>
</tr>
</thead>
<tbody>
<tr>
<td>All CFTs must have a clear purpose and provide an opportunity for the family to be involved in decision-making and planning.</td>
<td>“Family” is a term that should be defined by the members. This is especially true when working with cases where the birth parents are no longer involved. When this is the case, there should be an in-depth conversation with the child(ren) and/or youth about whom he or she considers as family. Knowing that the people chosen for the team are likely to sustain the child(ren) and/or youth after the agency is no longer involved, it is important to keep an open mind and be creative in finding ways to support not only the child(ren) and/or youth but also those seen as family.</td>
</tr>
<tr>
<td>The county child welfare worker and/or the facilitator must assure that the ideas of the family and its natural supports are considered with the same weight as those of the professionals in the room.</td>
<td>While parental wishes about who is invited to the CFT are to be considered and respected, it is important that the county child welfare worker use diligence in helping the family to expand the circle that will sustain it. When parents or caretakers are reluctant to hold a family meeting or invite critical participants county child welfare workers must seek to understand the source of the reluctance and how the safety and comfort of the parents or caretakers can be achieved while still ensuring the presence of people critical to the lives of the child(ren) and youth. The child(ren)’s wishes are also to be considered. There may be times when the parent is uncomfortable with inviting someone the child may desire to have present. A balance should be found between the parents’ wishes, the child(ren)’s wishes, and what is necessary to achieve the purpose of the meeting.</td>
</tr>
<tr>
<td>Non-resident parents (may or may not be non-custodial parents) must be involved in the CFT meeting unless there is a valid conflict or safety issue, and this must be clearly documented in the case record.</td>
<td>Critical participants in addition to the family members at a CFT meeting should include but not be limited to:</td>
</tr>
</tbody>
</table>
| Children and youth must be involved in the CFT meeting. Participation of the child(ren) and/or youth and/or their input to the CFT must be clearly documented in the case record. | • Involved professional providers  
• Relatives  
• Safety Providers |
| The county child welfare worker, supervisor, and facilitator (if there is one) must ensure that physical and psychological safety is not compromised by the CFT meeting process. If the county child welfare agency determines that a CFT cannot be held safely, there must not be a CFT meeting. | It is not a question about whether the child(ren) and youth should be involved in the process, but rather how they should be involved in the process. It is important to remember that while it is natural to want to protect children and youth from hearing traumatic details, remember that they have already lived through much of what will be discussed. There are several things to consider when deciding how the child(ren) and youth will be involved in a CFT meeting. |
| A facilitator, who is neither the county child welfare worker for the family nor the supervisor of that | • The child(ren) and youth’s own wishes. |
CROSS FUNCTION TOPICS: Child and Family Team (CFT) Meetings

county child welfare worker, must be used in cases with a current risk rating of high.

The CFT meeting, or the decision to not hold a CFT meeting due to safety concerns, must be documented.

Use of CFT meetings is a key concept that must be applied to support family engagement. If a meeting is scheduled, and CFT participants have been invited, the county child welfare agency must still hold the meeting if a decision is needed regarding a child’s safety, risk and/or wellbeing.

LACK OF PARENT/LEGAL CUSTODIAN
If a parent does not attend a scheduled CFT meeting, the meeting will not meet the criteria to be a CFT. However, the agency must still determine the level of safety and/or risk, identify options to address the safety and/or risk, and make decisions regarding the required next steps.

• The child(ren) and youth’s developmental and cognitive abilities.
• If the child(ren) and youth is in counseling, the therapist should be consulted about what kind of involvement is best.

Having the child(ren) and youth take part in a CFT meeting will not look the same in every meeting. Below are a few suggestions:

• Full participation in the entire meeting--preferably with a support person and/or mentor,
• Partial participation in the beginning or the end,
• Attendance, but with little participation. Some children and youth may want to be present but may not be comfortable speaking.
• Participation without attendance could be achieved through a spokesperson, reading a letter they have written, recording a message or by phone,
• For very young, pre-verbal children, having their picture in the room can be a powerful way to keep the meeting focused on the child.

When a child and/or youth participates in a CFT meeting, it will be very important to prepare them, as the adults are prepared.

Use of a neutral facilitator is best practice for all CFT meetings. Below is a list of circumstances in which a facilitator might be especially helpful:

• Cases in which there is conflict or volatility;
• Large or complicated family systems;
• Difficult issues in accessing family members due to distance; incarceration, disability or other factors;
• Strained relationships between family members and agency workers;
• Complex situations such as those involving multi-generational abuse, neglect, sexual abuse, substance abuse, domestic violence, or mental illness; and
• Extensive cultural and language differences between the county child welfare worker and the family or within the family system.

The following are some guidelines for assuring everyone’s safety before, during, and after a CFT meeting:
### CROSS FUNCTION TOPICS: Child and Family Team (CFT) Meetings

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<thead>
<tr>
<th>Protocol - What Must Occur</th>
<th>Guidance – How it Should be Done</th>
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<tbody>
<tr>
<td></td>
<td>a) Be sure the planning process for CFT meetings discusses the history of both conflict and violence with the family members prior to the meeting. Consider factors such as, but not limited to:</td>
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<td></td>
<td>• Have there been any threats of harm, use of weapons, escalation or increase in frequency of the threats or conflict, or criminal involvement?</td>
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<td>• Is there a history of mental illness?</td>
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<td></td>
<td>• Is there a history of substance abuse?</td>
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<td></td>
<td>b) Be sure the planning process for CFT meetings includes the question of whether there are any court-sanctioned protective orders between family members. Do not conduct a meeting that violates protective orders. It may be helpful to consult an attorney about whether a person who is the subject of a protective order may participate by phone. Cases with domestic violence cases or family violence may require separate CFT meetings.</td>
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<tr>
<td></td>
<td>c) Where there is a history of violence or a concern for potential violence, consider, but don’t limit considerations to:</td>
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<td></td>
<td>• Choose a safe, neutral location;</td>
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<tr>
<td></td>
<td>• Have support people or mentors for threatened or potentially volatile family members;</td>
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<tr>
<td></td>
<td>• Have some members participate through pre-meeting interviews, written statements, or conference calls;</td>
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<td>• Arrange for a private check-in after the meeting with any vulnerable participants;</td>
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<td></td>
<td>• Arrange for vulnerable family members or those in conflict with one another to arrive at and leave the meeting separately, or to be escorted by staff or security personnel; and/or</td>
</tr>
<tr>
<td></td>
<td>• Arrange for the presence of security and/or law enforcement.</td>
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</table>

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Return to [Cross Function TOC](#)

Revision Date: 06/15/18
Efforts to locate and engage all maternal and all paternal parents must occur during all phases of child welfare, unless the court has terminated parental rights.

Definitions

Birth Parent means genetic, biological, or natural parents.

Residential Parent for the purpose of the NC CW Modified is the parent with whom the child(ren) primarily resides.


Keep in mind that definitions of terms in NC Statute can vary from statute to statute depending on the context with which the term is applied. For example, in NC guardianship law, Chapter 35A, the clerk of the court will decide if the person is incompetent and requires a guardian. This is a different context of the term guardianship then what is used in juvenile court in awarding guardianship. For this reason, social workers must be careful in their use of terminology and consult with their county attorney as needed. During provision of Permanency Planning Services, Chapter 7B should be the primary statute for consideration. During provision of CPS Assessments or In-Home Services county child welfare agency workers may need to refer to Chapter 50 regarding child custody and or domestic violence court.

NC Statute Chapters:

<table>
<thead>
<tr>
<th>Chapter Number</th>
<th>Title</th>
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<tbody>
<tr>
<td>7B</td>
<td>Juvenile Code</td>
</tr>
<tr>
<td>35A</td>
<td>Incompetency and Guardianship</td>
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<td>48</td>
<td>Adoptions</td>
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<tr>
<td>50</td>
<td>Divorce and Alimony</td>
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<tr>
<td>50A</td>
<td>Uniform Child-Custody Jurisdiction and Enforcement Act</td>
</tr>
<tr>
<td>50B</td>
<td>Domestic Violence</td>
</tr>
<tr>
<td>110</td>
<td>Child Welfare – Child Care Facilities &amp; Child Support,</td>
</tr>
</tbody>
</table>

The following definitions are not covered in Chapter X and the location of that definition in statute are provided only for reference.

Custodian - The person or agency that has been awarded legal custody of a juvenile by a court.  
[http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-101.html](http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-101.html)

"Physical custody" means the physical care and supervision of a child. 
[http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_50A/GS_50A-102.html](http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_50A/GS_50A-102.html)
 Protocol | Guidance
--------|--------
PARENT ENGAGEMENT | PARENT ENGAGEMENT
Both parents must be involved in all aspects of child welfare to include, but not limited to:

- CFTs and PPRs,
- Shared parenting meetings,
- Family Time and Contact Plans,
- Safety Agreements, and
- Family Services Agreements.

Absent parents must be involved in the CFT meeting unless there is a valid conflict or safety issue, and this must be clearly documented in the case record. See CFT for alternate methods to involve the absent parent in case planning if it is determined that the parent cannot participate in the CFT meeting due to a conflict or safety issue.

The county child welfare agency must engage in diligent efforts to locate and contact all parents.

INITIAL AND ONGOING DETERMINATION OF FAMILY MEMBER’S STRENGTHS AND NEEDS
The determination regarding a family’s strengths and needs starts during the CPS Assessment and must be completed through use of SEEMAPS or an equivalent method. See 5010 instructions page 1.

Ongoing Services must build upon the information identified during the CPS Assessment to ensure that the Family Services Agreement identifies services that are appropriate to address family needs.

MRS and System of Care (SOC) principles emphasize:
- Every individual has strengths and has the right to be heard without judgments being made,
- Families have the most information about themselves and that information is critical for decision-making, and
- The importance of the family in meeting the needs of its members.

Six Family-Centered Principles of Partnership
1. Everyone desires respect.
2. Everyone needs to be heard.
3. Everyone has strengths.
4. Judgments can wait.
5. Partners share power.
6. Partnership is a process.

Underlying Beliefs of a Family-Centered Approach to Child Welfare
- Safety of the child is the first concern.
- Children have the right to their family.
- The family is the fundamental resource for the nurturing of children.
- Parents should be supported in their efforts to care for their children.
- Families are diverse and have the right to be respected for their special.

"Stepparent" means an individual who is the spouse of a parent of a child, but who is not a legal parent of the child.

http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter_48/GS_48-1-101.pdf
CROSS FUNCTION TOPICS: Parent Engagement & Needs Assessments

To ensure that child welfare services are addressing family needs that impact risk and safety, and child well-being, interviews and assessments of each family member regarding the family, their concerns, their environment, must occur and be reviewed regularly. These assessments must include, but not be limited to, a review of:

- Household economic status;
- Family/Household social network, including household make-up, relationships with extended family members, and community engagement (including faith and/or cultural community);
- Parent/Caretaker(s) mental and/or behavioral health;
- Parent/Caretaker(s) physical health;
- Parent/Caretaker(s)’s educational, cognitive, communication and decision-making capacity;
- Parent/Caretaker(s) relationship status (including an assessment of any history of relationship conflict or domestic violence);
- Parent/Caretaker(s) knowledge of child development and parenting skills;
- Trauma history for all family members;
- Parent/Caretaker(s) substance abuse history; and
- Other household conditions, to include but not limited to:
  - Household physical and environmental conditions,
  - Household routines, and
  - Transportation availability.

These assessments can be formal or informal but must be documented in the case file.

- cultural, racial, ethnic, and religious traditions; children can flourish in different types of families.
- A crisis is an opportunity for change.
- Inappropriate intervention can do harm.
- Families who seem hopeless can grow and change.
- Family members are our colleagues.

INITIAL AND ONGOING DETERMINATION OF FAMILY MEMBER’S STRENGTHS AND NEEDS
See DSS-5010 instructions pages 14-16 for guidance in use of SEEMAPS. Use of SEEMAPS should not be limited to CPS assessments. SEEMAPS is a tool that can utilized throughout service provision, to reassess a family’s/family members’ needs and/or when working with a nonresident parent.

Use of other tools such as Genograms or Ecomaps should be considered.

ABSENT, NON-RESIDENTIAL PARENTS
A parent that has been referred to as absent, non-custodial, or non-residential parent may have information regarding their child. Working to develop an early partnership that includes that parent may provide an excellent foundation for them to not only become more involved in their child’s life, but also may be a resource the child can reunify with and or be a long-term support.

- Ask: How can the county child welfare agency obtain the absent parent’s involvement?
- If the parents have a tenuous relationship, consider facilitating separate meetings between each parent with the foster parent.
- If one parent is unable to travel a long distance for a meeting, consider facilitating a phone conference call or web meeting in order to begin developing a relationship between the parent and foster parent.

If an absent or noncustodial/non-residential parent is not involved in the planning, ask what it would take to become involved, as well as if there are any relatives that may be a resource in supporting the child.

The following county child welfare agency worker behaviors support a collaborative relationship and increased family engagement:

- Listening to and addressing issues that concern the family;
CROSS FUNCTION TOPICS: Parent Engagement & Needs Assessments

| Even if a parent is incarcerated, (in-state or out-of-state), they must be contacted to determine if they can assist in identifying any strengths or needs of the family, receive input on the Family Services Agreement, determine if there are any possible relatives that may be a resource in supporting the child, and determine what level of involvement they can maintain particularly around the planning for and contact with the child. | • Having honest discussions about the agency’s authority and how it may be used (required by CAPTA);  
• Sharing openly with family members what to expect, particularly regarding court and timelines;  
• Balancing discussions of problems and needs with the identification of strengths and resources;  
• Incorporating the family’s terminology regarding needs (rather than the caseworker’s words);  
• Setting goals that are mutually agreed upon and when possible primarily created by the family and stated in their words;  
• Focusing on improving family members’ skills rather than providing insights;  
• Providing family members with choices whenever possible;  
• Getting a commitment from family members that they will engage in mutually identified tasks;  
• Spending time with the family discussing goals and progress; and  
• Recognizing and praising progress. |

To locate a parent that is in prison, contact the NC Department of Corrections Records Office. Contact numbers and addresses for specific prisons can be found on the NC Division of Prisons website. All inmates have a case manager or social worker that can assist in contacting a prisoner.

PATERNITY

All the following information comes from Child Support Services Policy and is provided as information only. Child Support policy and Child Welfare policy (and Juvenile Court) vary from each other on some key aspects, especially in defining when paternity testing is required. When collaborating with Child Support Services, this information may be of value.
ESTABLISHING PATERNITY
If paternity has not been determined (either voluntarily or by court order) and no judicial action to establish paternity has been filed with the court, paternity testing can be initiated by agreement of the parties involved.

Testing by agreement is NOT appropriate if:
• An Affidavit of Parentage has been signed and has not been rescinded;
• A judicial action for paternity has been filed; or
• A court order of paternity has been entered.

For more information, specifically regarding establishment of paternity and paternity testing, see also CSS Paternity Policy.

PATERNITY TESTING RESULTS
These results have the following effect if ordered under N.C.G.S. § 8-50.1:
• Probability of paternity is less than eighty-five percent (85%) - The alleged father is presumed NOT to be the parent.
• Probability of paternity is between eighty-five (85%) and ninety-seven percent (97%) - The results have same weight as other evidence.
• Probability of paternity is ninety-seven percent (97%) or higher - The alleged father is presumed to be the parent.

USING PREVIOUSLY COLLECTED TEST SAMPLES
Paternity test samples and test results for individuals who are tested under the State contract that are maintained by the testing laboratory can be used in subsequent testing conducted under this contract. Rather than collecting new samples, using existing samples or results can reduce the time and cost of subsequent testing.

DNA samples or results obtained for testing under the State contract can be reused for subsequent tests, including:
• New testing for the same mother/child/father group.
• Testing of an individual in a different mother/child/father group.
• Testing that was conducted by the county which requested the initial test sample.
• Testing that was conducted by a different county than the initial requesting county.

EXCLUSION OF ALLEGED FATHER
Paternity testing that results in the exclusion of a man as the biological father of a child does not constitute a legal determination of non-paternity. However, test results are evidence that the court can consider in making such a determination.

If paternity testing excludes the alleged father as the biological father of a child, the appropriate course of action is based on whether a judicial or voluntary determination of paternity has been made, a marital presumption of paternity exists, or the child has no legally responsible father.

If a judicial or voluntary determination of paternity has been entered:
• Exclusionary test results do not void that determination.
Test results can be used as evidence in a motion or independent action to disestablish paternity.

The paternity determination remains in effect until a court makes a ruling.

If a marital presumption of paternity exists:
- Exclusionary test results do not invalidate the presumption of paternity.
- Test results can be presented as evidence in a judicial challenge of the presumption by the legal father.
- The presumption of paternity remains in effect until a court makes a ruling.
Legal Basis

42 U.S. Code § 671(a)(19) provides that the State shall consider giving preference to an adult relative over a non-related caregiver when determining a placement for a child, provided that the relative caregiver meets all relevant State child protection standards.

42 U.S. Code § 671(a)(19) provides that, within 30 days after the removal of a child from the custody of the parent or parents of the child, the State shall exercise due diligence to identify and provide notice to the following relatives: all adult grandparents, all parents of a sibling of the child, where such parent has legal custody of such sibling, and other adult relatives of the child (including any other adult relatives suggested by the parents), subject to exceptions due to family or domestic violence, that—
(A) specifies that the child has been or is being removed from the custody of the parent or parents of the child;
(B) explains the options the relative has under Federal, State, and local law to participate in the care and placement of the child, including any options that may be lost by failing to respond to the notice;
(C) describes the requirements to become a foster family home and the additional services and supports that are available for children placed in such a home; and
(D) if the State has elected the option to make kinship guardianship assistance payments, describes how the relative guardian of the child may subsequently enter into an agreement with the State to receive the payments.

N.C.G.S. §7B-505 Requirements for Placement with Relatives
(b) The court shall order the department to make diligent efforts to notify relatives and other persons with legal custody of a sibling of the juvenile that the juvenile is in non-secure custody and of any hearings scheduled to occur pursuant to G.S. 7B-506, unless the court finds the notification would be contrary to the best interests of the juvenile. In placing a juvenile in non-secure custody under this section, the court shall first consider whether a relative of the juvenile is willing and able to provide proper care and supervision of the juvenile in a safe home. If the court finds that the relative is willing and able to provide proper care and supervision in a safe home, then the court shall order placement of the juvenile with the relative unless the court finds that placement with the relative would be contrary to the best interests of the juvenile.
(c) If the court does not place the juvenile with a relative, the court may consider whether nonrelative kin or other persons with legal custody of a sibling of the juvenile are willing and able to provide proper care and supervision of the juvenile in a safe home. The court may order the department to notify the juvenile’s State-recognized tribe of the need for non-secure custody for the purpose of locating relatives or nonrelative kin for placement. The court may order placement of the juvenile with nonrelative kin if the court finds the placement is in the juvenile’s best interests.

N.C.G.S. §7B-903 Requirements for Placement with Relatives
(a1) In placing a juvenile in out-of-home care under this section, the court shall first consider whether a relative of the juvenile is willing and able to provide proper care and supervision of the juvenile in a safe home. If the court finds that the relative is willing and able to provide proper care and supervision in a safe home, then the court shall order placement of the juvenile with the relative unless the court finds that the placement is contrary to the best interests of the juvenile.
## CROSS FUNCTION TOPICS: Parent Engagement & Needs Assessments

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<td>County child welfare agencies must make <strong>diligent efforts</strong> to identify and locate extended maternal and paternal family members as soon as a county child welfare agency becomes involved with a child/youth and continue throughout the case.</td>
<td>County child welfare workers should consider their beliefs on what is possible for youth through connections with extended family members. Finding extended family members encourages workers to view case planning to address safety, risk, and permanence beyond one route.</td>
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</table>
| At least once a month throughout the case, county child welfare workers must inquire with parents and children about extended family members to include:  
- Knowledge of (names, when last seen);  
- Location (address, contact information);  
- Contact with (telephone, Facebook, etc.); or  
- Relationships (history with that relative, support that relative may be able to provide, etc.).  | Identification – Requirements to Find and Locate  
The goal of identification of an extended family member or other “kin” is to promote connections for children/youth and to create more options for support and planning for the family, parent(s) or child(ren). Techniques to use include:  
- Record Review - Closely review case record to identify and record names  
- Interview all known family members, maternal and paternal, including child(ren), and fictive kin and/or close friends.  
- Internet and Social Media Searches  
  - www.Zabasearch.com  
  - www.msn.com (White Pages)  
  - www.USSEARCH.com  
  - Facebook  |
| For states to meet the requirements of IV-E federal funding for foster care and adoption assistance, states must “consider giving preference to an adult relative over a nonrelated caregiver when determining placement for a child, provided that the relative caregiver meets all relevant State child protection standards.” IV-E requires states to apply due diligence to identify and provide notice to all grandparents and other adult relatives of the child regarding:  
- The fact that the child has been or is being removed from the custody of her or her parents;  
- The options the relative available to participate in the care and placement of the child; and  
- The requirements to become a foster parent to the child.  | Reconnecting with a Relative  
Consideration must be given to the impact of any new or renewed connection to an extended relative. Although this connection is in general a positive event, there may be other extenuating circumstances that should be understood.  
  a. Families have a primary need to know what happened to “lost” relatives. While youth in foster care are not considered to be lost children, the child(ren), their relatives, or individuals who had a close relationship to the child(ren), continue to have a desire to know how their loved ones are doing. A majority of youth who’ve been adopted report a desire to find or be found by their birth parents and/or other extended family members.  
  b. Identification & location of extended family won’t solve the psychological problems that can affect youth in foster care. Being in foster care has a life altering effect on youth and families. The loss of connections, disruption to life cycle and number of transitions can be very traumatic even to resilient children/youth. Maintaining or reestablishing family connections may provide support to help youth and families heal.  
  c. The process of locating and engaging families can open family wounds, rekindling the problems surrounding the child’s birth or removal. Numerous issues and questions may arrive. It is the role of the child welfare agency to |
### CROSS FUNCTION TOPICS: Parent Engagement & Needs Assessments

| See Permanency Planning, Relative Notifications. | facilitate all contact to avoid situations involving blame, to ensure that all interaction acknowledges the youth’s current situation and need for wrap around support.  
  
  d. Each person, conservatively, has about 100-300 living relatives.  
  
  e. Permanence for youth in care is more than a legal goal. It involves the stability and continuity of relationships that are meaningful to individuals. Permanence incorporates a sense of belonging and cultural and social connections to a child/youth’s background and permanent home. |

Return to [CPS Family and Investigative Assessments TOC](#)  
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# Multiethnic Placement Act

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<td>The primary purpose of the Multiethnic Placement Act (MEPA) is to find permanent homes for foster children on a timely basis. All state and county agencies that use federal funds must comply with the Multiethnic Placement Act of 1994, as amended by the Interethnic Adoption Provisions of 1996 (MEPA-IEP). The Act prohibits states or agencies that receive federal funds from delaying or denying the placement of any child on the basis of race, color, or national origin. Any consideration of race or ethnicity must be done in the context of individualized needs of the child, with the rationale specifically documented in the placement record.</td>
<td>The Multiethnic Placement Act is designed to “prevent discrimination in the placement of children in foster care and adoption on the basis of race, color, or national origin; decrease the length of time that children wait to be adopted; and facilitate the identification and recruitment of foster and adoptive parents.” The best strategy for full compliance with the Multiethnic Placement Act (MEPA) is a comprehensive recruitment strategy that targets the general public and also specifically targets those communities that reflect the racial and ethnic diversity of your foster care population. An agency may not rely on generalizations about the needs of children of a particular race or ethnicity, or on generalizations about the abilities of prospective parents of one race or ethnicity to care for a child of another race or ethnicity. Any violation of MEPA-IEP will be deemed a violation of Title VI of the Civil Rights Act.</td>
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<tr>
<td>According to MEPA, agencies must honor birth parent’s requests for placement options, unless it is contrary to the best interest of the child(ren). Training must be offered to all in consideration of licensing.</td>
<td>All state and county agencies using federal Title IV-E funds must comply with MEPA as amended by the Interethnic Adoption Provisions of the Small Business Job Protection Act of 1996. The amendment requires that race, culture or ethnicity may not be used as the basis for any denial of placement, nor may such factors be used as a reason to delay any foster or adoptive placement. Agencies, therefore, are prohibited from delaying or denying foster and adoptive placements on the basis of race, color or national origin.</td>
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## Protocol – What you must do

### MEPA Placement Requirements (Initial and Placement Changes)

Every agency must have a recruitment plan to comply with MEPA-IEP. The major thrust of MEPA’s recruitment requirements is that agencies provide for the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State or county for whom foster and adoptive homes are needed. Federal guidelines specifically call for a thorough recruitment effort that includes both general and targeted campaigns and encompasses the following features:

- Prospective foster and adoptive families throughout the community should be supplied with information regarding waiting children, the adoption process, and supports available to foster and adoptive families.

- All community members should be reached through a general media campaign such as radio, television, and print.

- Information should be disseminated to targeted communities through community organizations such as churches or other religious institutions.
The Indian Child Welfare Act of 1978 established nationwide procedures for the handling of Indian child placements and authorized the establishment of Indian child and family service programs. The act requires specific actions on behalf of a child who is a member of a federally recognized Indian Tribe, Aleuts, or members of certain native Alaskan villagers. Whenever it is suspected that a child may fit into any of these populations, the procedures outlined in this Act must be followed. Nothing in the Indian Child Welfare Act is to be construed as preventing the emergency removal of an Indian child to prevent imminent physical damage or harm to that child. If a county child welfare worker

ICWA specifies that tribal courts have exclusive jurisdiction of children who reside on the reservation. If the child is a ward of a tribal court, but does not reside on a reservation, the jurisdiction of the case must be transferred to the tribal court. In any action leading to a foster care placement or in any termination of parental rights action affecting an American Indian child who does not reside on the reservation, the parents, guardian or custodian of the child may petition for transfer of jurisdiction to a tribal court. At any time during proceedings of a foster care placement the American Indian custodian and American Indian tribe have the right to intervene in the proceedings at any time. Tribal courts have the same authority as any State court and any decisions made by them that follow the ICWA guidelines have the effect of any other court decision.
believes that a child is in imminent danger, the same procedures are followed as in any other emergency removal.

N.C.G.S. § 7B-505(c) ([http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-505.html](http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-505.html)) was added in 2013 to provide changes to the placement of children while in non-secure custody. It enacted a new subsection to expand types of placements available to a child in non-secure custody by identifying individuals who may not be relatives but have a substantial relationship with the child. These individuals are defined as “non-relative kin”. It also gives additional placement options for American Indian children who are members of a state recognized tribe by defining non-relative kin to include members of state or federally recognized tribes regardless of the relationship with the child. One purpose of this change is to allow placement of children from state recognized tribes with American Indian families when in their best interest, given that state tribes are not protected by ICWA. This change also encourages these placements be made at the onset of the case and only when the placement is in the child's best interest.

The Act does not apply to a placement based on an act which, if committed by an adult would be deemed a crime (as in any situation in which a child was adjudicated delinquent and placed in foster care or a group home), or upon an award, in a divorce proceeding, of custody to one of the parents.

MEPA-IEP specifically provides that it has no effect on the [Indian Child Welfare Act of 1978](https://www.ncleg.gov/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-505.html).

### Definitions

**Indian:** An Indian is defined as any person who is a member of an Indian tribe, or who is an Alaskan Native and a member of a Regional Corporation, as defined in the Alaska Native Claims Settlement Act.

**Indian Child:** An Indian child means any unmarried person who is under 18 and is either (a) a member of an Indian tribe; or (b) is eligible for membership in an Indian tribe and is the biological child of a member of an Indian tribe. Tribes determine their own standards for membership eligibility.

**Indian Tribe:** Any Indian tribe, band, nation, or other organized group of Indians recognized as eligible for the services provided to Indians by the Secretary of the Interior because of their status as Indians, including any Alaskan Native villager as defined in section 3(c) of the Alaska Native Claims Settlement Act.

**Cherokee Family Support Services** is the agency of the Eastern Band of the Cherokee that handles the cases that involve the Indian Child Welfare Act.

If there is belief that the child is a Cherokee Indian child, the county child welfare agency can contact Cherokee Family Support Services at P.O. Box 507 Cherokee, North Carolina 28719. They can assist in checking with the enrollment office to determine whether the child is an “Indian child.” If the child is an “Indian child,” then Cherokee Family Services will be the representative of the Tribe that will be involved in the case. Members of other federally recognized tribes live and work in North Carolina.
Indian Child's Tribe: An Indian child's tribe is defined as (a) the Indian tribe in which an Indian child is a member or eligible for membership or (b) in the case of an Indian child who is a member of or eligible for membership in more than one tribe, the Indian tribe with which the Indian child has the most significant contacts.

Indian Reservation: Indian country as defined in Section 1151 of Title 18, United States Code and any lands, not covered under such section, title to which is either held by the United States in trust for any Indian tribe or individual subject to a restriction by the United States against alienation.

The Act applies to Indian child custody proceedings and includes:
- County child welfare custody, when the parent or custodian cannot have the child returned on demand (as in Voluntary Placement Agreements), but where parental rights have not been terminated;
- In termination of parental rights proceedings;
- In pre-adoptive and adoptive placements; and
- Proceedings regarding juvenile court assigned custody or guardianship of the person of the juvenile.

The only Federally recognized tribal grounds in North Carolina are those of the Eastern Band of the Cherokee.

State Recognized Tribes
While the Indian Child Welfare Act protects members of federally recognized tribes, children in state recognized tribes merit similar consideration. N.C.G.S. § 143B-139.5A was enacted in 2001 to support collaboration between the Division of Social Services, the NC Directors of Social Services Association and the Commission of Indian Affairs.

The goal of this legislation is to create relationships so tribes can receive reasonable notice when Indian children are placed in county child welfare custody or for adoption, recruitment of North Carolina Indians as foster and adoptive parents can be increased, and training on Indian culture and history can be provided to county child welfare workers and foster and adoptive parents. It is important to remember that the Multi Ethnic Placement Act applies to the placement of Indian children who are not covered by ICWA. When considering placement for any Indian child, every effort should be made to involve the tribal community in planning for the child in a setting that reflects their Indian culture.

and are afforded the protections of this Act. The Bureau of Indian Affairs (BIA) has a listing updated each year of the appropriate tribal person to receive questions about membership and ICWA proceedings [http://www.doi.gov/bia/].

The North Carolina Commission of Indian Affairs can help regarding local tribes and can also facilitate contact with tribal leadership for tribes located in other parts of the country. Many North Carolina Indians are members of state recognized tribes:

- Coharie Tribe (Harnett and Sampson Counties);
- The Haliwa-Saponi Tribe (Halifax and Warren Counties);
- The Lumbee Tribe of North Carolina (Hoke, Robeson and Scotland Counties);
- The Meherrin Indian Tribe (Hertford County);
- Occaneechi Band of Saponi Nation (Alamance and Orange Counties);
- Sappony (Person County); and
- Waccamaw-Siouan Development Association (Bladen and Columbus).

Organizations:
- The Cumberland County Association for Indian People (Fayetteville);
- The Guilford Native American Association (Greensboro);
- Metrolina Native American Association (Charlotte); and
- Triangle Native American Society (Raleigh)
### American Indian Child / ICWA

Throughout the provision of child welfare services, including child protective services, agencies must complete the Indian Child Welfare Act Compliance Checklist (DSS-5291) whenever a family member indicates any American Indian heritage.

For all cases found to be Substantiated or In Need of Services, when there is information about American Indian heritage, whether in a federally or state recognized tribe, one of these two forms must be completed, sent to the appropriate tribe/agency, and maintained in the file.

- **DSS-5335** - completed with a parent/caretaker who has indicated that he/she has heritage in an American Indian tribe.
- **DSS-5336** – completed when the parent/caretaker is either absent or unwilling to cooperate with the agency and the agency has collateral information that the child(ren) may have heritage in an American Indian tribe.

### ICWA Placement (Initial and Placement Change) Requirements

Tribal courts have exclusive jurisdiction of children who reside on the reservation. If the child is a ward of a tribal court, but does not reside on a reservation, the jurisdiction of the case must be transferred to the tribal court.

### ICWA Placement Notification Requirements

The parents of the child must be notified of the pending proceedings. The parent, Indian custodian and Indian tribe must be informed by registered mail, return receipt requested, of the proceedings and of their right to intervene at any point in the proceedings. The notice must include the following information:

- The name of the Indian child and tribal affiliation;
- Name and address of the petitioner and petitioner’s attorney;
- Location, mailing address and telephone number of the court;
- Statement of right of Indian custodian and tribe to intervene and petition for transfer to tribal court;
- Statement that if the parent or Indian custodian is unable to afford counsel, the court will appoint counsel;
- Statement that the parent, custodian or tribe may request 20 days to prepare for the proceeding;
- Statement of the potential legal consequences of an adjudication on future custodial rights of the parent or Indian custodian; and

In any action leading to a child entering the custody of a county child welfare agency or in any termination of parental rights action affecting an Indian child who does not reside on the reservation, the parents, guardian or custodian of the child may petition for transfer of jurisdiction to a tribal court.

At any time during proceedings of a Permanency Planning case, the Indian custodian and Indian tribe have the right to intervene in the proceedings at any time. Tribal courts have the same authority as any State court and any decisions made by them that follow the ICWA guidelines have the effect of any other court decision.

Parents and Indian custodians have the right to a court appointed lawyer in custody proceedings whenever indigence is a factor and the court may also appoint an attorney for the child to ensure that his/her interests are protected.
Statement that the proceeding is confidential and should not be revealed except to authorized tribal members.

If the agency is unable to locate the parent, Indian custodian, or cannot determine the Indian tribe, then the agency must notify the Secretary of the Bureau of Indian Affairs (BIA) at the appropriate office by registered mail, return receipt requested, of the child’s pending court proceedings. There is no provision for service by publication. The Secretary has fifteen (15) days after receipt of this notice to inform the parent, Indian custodian and Indian tribe of the proceedings.

If ICWA requirements are not met, the tribe, Indian custodian or parent can move to vacate the proceeding and begin again.

Refer to the Indian Child Welfare Act Compliance Checklist (DSS-5291) for more information regarding the many procedures to comply with ICWA.

ICWA “Active” Efforts Requirements for Obtaining Legal Custody
Though procedures for obtaining legal custody and placement responsibility of an Indian child are similar to those regarding any other child, there are some major differences. All agencies must demonstrate to the court that “active” efforts were made to maintain the child in his/her own home. In the case of an Indian child, the agency must also specifically detail what remedial efforts and rehabilitative programs were provided to the family to keep it intact and how these efforts were unsuccessful. These are efforts that take into account the social and cultural conditions of the tribe and use the resources of the extended family, tribe and Indian social service agencies. Thus, active efforts can be more extensive than reasonable efforts. In addition, the agency must prove by clear and convincing evidence that staying in the home would result in serious emotional or physical damage to the child. That finding must be based on testimony from a “qualified expert witness” who is, in priority order;

1. A member of the child’s tribe recognized by tribe knowledge in tribal custom,
2. A lay expert witness with substantial experience in the delivery of family services to Indians and knowledge of tribal child rearing practices, or
3. A professional person having substantial educational and experience in his specialty.
4. Under ICWA, “parent” does not include the unwed father where paternity has not been acknowledged or established.

For NC proceedings, BIA notice should be sent to:
Gloria York
Indian Child Welfare Services
BIA Regional Office
545 Marriot Drive, Suite 700
Nashville, TN 37214
(615) 564-6740

Parents have 10 days beyond the 15-day period before any proceeding can take place. However, the parent, Indian custodian or the tribe may request and be granted up to a 20-day extension to prepare for the proceedings. The county child welfare agency may have to ask the court to continue a 7-day or other hearing to comply with ICWA.

The BIA can assist in identifying a qualified expert witness, if requested to do so by a party or the court. If placement is to be made using State laws, each party to the case has the right to examine the documents filed with the court which serve as the basis of a decision by the court. In addition, the agency must demonstrate that it has offered remedial services to maintain the child with the family and that these efforts have failed.
ICWA Placement Provider Requirements
The placement for a child in county child welfare custody who may be eligible for the
Indian Child Welfare Act must be:
- The least restrictive setting which most approximates a family and in which
  their special needs, if any, may be met.
- Within reasonable proximity to their home. Placement resources for the child
  must be based on the following preferences:
  - A member of the Indian child's kinship network;
  - A foster home licensed, approved, or specified by the Indian child's tribe;
  - An Indian foster home licensed or approved by an authorized non-Indian
    licensing authority; or
  - An institution for children approved by an Indian tribe or operated by an
    Indian organization which has a program suitable to meet the Indian child's
    needs.

Good cause to deviate from these preferences exists if:
- The parents or child “of sufficient age” so request, or
- The extraordinary needs of the child require another placement or no families
  meeting the preference criteria can be found after a diligent search.

ICWA and Use of Voluntary Placement Agreements
For children that fall under the special provisions of the Indian Child Welfare Act,
Voluntary Placement Agreements (DSS-1789) between the agency and parent or
guardian have additional requirements. A Voluntary Placement Agreement will not be
considered valid unless the agreement is:
- Signed before a judge of competent jurisdiction and
- Accompanied by a judge's certificate stating that the terms and conditions of
  the agreement were fully explained and understood by the parent or Indian
  custodian of the child. The certificate must also state that the parent or Indian
  custodian had the agreement explained either in English or through an
  interpreter in a language that the parent or Indian custodian understood.

Any consent given prior to or within ten (10) days of the birth of the Indian child is not
valid.

At any time that the parent or Indian custodian of the child requests that the child be
returned, the agency must return the child. If the agency feels that the child would be
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<th>CROSS FUNCTION TOPICS: SPECIAL LEGAL CONSIDERATIONS (MEPA, ICWA, Mexican Heritage)</th>
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<td>harmed, then it must petition the Court ensuring that all the rights and duties of an agency are followed in relation to the Indian child.</td>
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</table>
| ICWA and Termination of Parental Rights  
To terminate parental rights, the state court must make the same findings as previously discussed, using expert testimony, but the likelihood of damage must be established beyond a reasonable doubt. Absent good cause to the contrary, the child must be placed for adoption with a member of his extended family, other members of his tribe or other Indian families. |
| **Mexican Heritage** |
| **Legal Basis** |
| A Memorandum of Agreement was established on March 30, 2017 between the Consulate General of Mexico in North Carolina and the Government of the State of North Carolina through the Department of Health and Human Services Division of Social Services. This agreement recognizes the significance of preserving the cultural, traditions and values of children with Mexican heritage. The purpose of this agreement is to ensure that children and their families are afforded the opportunity to receive necessary services that is beneficial to them. The services guarantee the protection offered by the Vienna Convention, Bilateral Convention and all other applicable treaties and laws. This agreement provides specific details for Child Welfare Agencies when considering securing custody of a child who has Mexican heritage. It is imperative that the identification of Mexican heritage is explored throughout the longevity of the case. |
| **Protocol** |
| Upon assuming legal custody of a child, county child welfare agencies must inquire as to whether the child has any Mexican parentage. |
| Ongoing efforts to identify Mexican parentage must continue throughout the life of the case. |
| **Notification to the Mexican Consulate** |
| County child welfare agencies must notify the Mexican Consulate in writing of the following:  
- When the county child welfare agency identifies a Mexican minor in its custody; or  
- When a parent or custodian of the Mexican minor requests that the Mexican Consulate be notified. |
| The written notification must be made within 10 working days of the minor entering agency custody. If the county child welfare agency learns, at a later time, that the minor has Mexican parentage, then notification must be sent without delay to the appropriate parties. |
| Counties should provide notice to the Mexican Consulate regarding court hearings involving Mexican minors, so that the Consulate may attend these hearings. |
County child welfare agencies must notify the Mexican Consulate and provide additional information:
- When a parent or custodian of a Mexican American minor has requested that the Consulate be notified; or
- When the county child welfare agency learns that a non-custodial parent(s) resides in Mexico.

**Initial Information to be Provided to the Mexican Consulate**

County child welfare agencies must provide the Mexican Consulate with at least the following information, if available:
- The full name of the Mexican minor(s);
- The date of birth of the Mexican minor(s);
- The full name of the parent(s) or custodian(s); and
- A name and phone number of the county child welfare worker directly responsible for the case.

As authorized, county child welfare agencies may provide the Mexican Consulate any of the information listed above pertaining to a Mexican American minor.

For additional information, please refer to the [Memorandum of Agreement](#).

For information regarding the services provided by the Mexican Consulate, please refer to [Services Provided by the Consulate General of Mexico and International Process Service](#).
CROSS FUNCTION TOPICS: Documentation

### Definitions

Documentation: Case documentation is comprised of all information in the case file. Documentation is critical in child welfare work as it establishes the basis for all decision making, including the critical decision to file a petition for removal of a child from their parent’s care. Documentation includes, but is not limited to:

- **Narrative** (written by agency social worker to capture actions and activities completed)
- **NC CW forms and other forms.** Examples include but not limited to:
  - Intake form 1402
  - Assessment 5010 with case decision
  - Safety Assessment 5231
  - In-Home Services Home Visit Record
  - Risk Assessment 5230
  - Strengths & Needs Assessment 5229
  - Family Services Agreements
  - Monthly Permanency Planning Contact Record 5295
- **Documents from service providers and collaterals.** Examples include but not limited to:
  - Criminal reports
  - Medical records
  - School records
  - Treatment plans
- **Court reports and court orders.**

Case File: The case file includes all case documentation and provides a way to manage and organize the documentation.

Narrative: The case narrative is the written case notes by the agency social worker to describe activities and actions performed on a case.

### Protocol – What you must do

- Documentation is critical in child welfare work. As is often stated, “if it is not documented, it didn’t happen!”
- Documentation, starting at the point where a report is received, must include, but is not limited to:
  - **Facts** – what, when, where, etc.
  - **Information obtained from professionals** – medical, educational, mental health information
  - **Family background** – CPS history, criminal history, other service history
  - **Assessments**
  - **Observations**

### Guidance – How you should do it

**CASE FILES**

The county child welfare agency should develop a consistent organizational format to be used in all cases. A consistent, organized format allows the county child welfare worker to locate necessary information readily; for new county child welfare workers to become familiar with their assigned cases more quickly; and for child welfare supervisors to be able to review cases more easily.

- Multiple copies of forms, reports, court documents, and correspondence should be removed and destroyed. Maintaining only one original copy of a document in the case record cuts down on the volume and allows for more ready access to needed information.

**NARRATIVE**

The case narrative identifies all actions, including the completion, receipt or review of forms and other documentation. The information in those other forms of documentation should not be repeated in the narrative, except when specific information is cited as the basis of a decision or action taken. Following are the different types of narrative (objective, subjective,
## CROSS FUNCTION TOPICS: Documentation

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<td>• Plans – what will achieve desired change, what will reduce risk, and/or address safety threat, usually in the form of a Safety Agreement or Family Services Agreement</td>
<td>assessment or decision making, and planning or next steps) and what those narrative types should include.</td>
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<tr>
<td>• Progress – what changes have occurred, what has a family accomplished, what services were effective</td>
<td>OBJECTIVE NARRATIVE</td>
</tr>
<tr>
<td>• Decisions and/or Findings</td>
<td>Objective case narrative describes every aspect of each activity completed by the agency social worker. Most case narrative is objective narrative that includes the following:</td>
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<tr>
<td>• Summaries (for case transfer or case closing)</td>
<td>• Who (who participated)? Include the social worker, all family members, all professionals, family supports, and others who were a part of the action</td>
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<td>• Why? What is the purpose of the action, what need or concern will be addressed during the action, why must the action occur</td>
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<td>• Where? What was the location of the action</td>
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<td>• How? For interactions, state if the contact was by telephone, face to face, in a meeting, etc.</td>
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<td></td>
<td>• When? What was the date and other pertinent information regarding time of action</td>
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<td>• What (what occurred)? Describe what occurred, to include, but not limited to:</td>
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<td>o The interaction witnessed between participants,</td>
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<td>o Capture statements word for word when appropriate,</td>
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<td>o Describe the body language,</td>
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<td>o Describe observed behaviors, reactions, and conditions (including tone of voice),</td>
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<td></td>
<td>o Include diagnosis, treatment recommendation, or outcome from meeting or appointment,</td>
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<td>o Describe each service task provided.</td>
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<td>The above listed questions should be captured using simple, descriptive, and nonbiased language. The What? portion of narrative will often determine when the risk to a child has become significant and requires action by the county agency.</td>
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<td>Objective Narrative is typically what will be used for ongoing activities, to include but not limited to:</td>
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<td>• Home, school, office or community visits,</td>
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<td>• Email or telephone contacts,</td>
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<td>• Staffing with supervisor,</td>
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<td>• Case meetings (treatment or family meetings),</td>
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<td>• Court hearings,</td>
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<td>• File review,</td>
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<td>• Completing referrals or NC child welfare forms.</td>
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The case documentation must provide an ongoing chronological record of activities and track every action completed during an open case to:

• Ensure safety,
• Perform ongoing monitoring of risk of maltreatment,
• Capture efforts to achieve permanence for each child, and
• Determine child well-being needs and activities to address those needs

These actions include: face to face or telephone contacts that occur at the office and in the community, completing assessments or interviewing a family member, staffing between the county child welfare worker and supervisor, performing case management tasks, and more.
**CROSS FUNCTION TOPICS: Documentation**

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<td>Documentation, including narrative, must be current within 7 days of every activity or action.</td>
<td>Example Home Visit Documentation</td>
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<tr>
<td>Documentation must be clear, concise, and organized.</td>
<td>Don’t: At the home visit with the Jones family on 10/16/16, Mr. Jones was drunk and belligerent. The children laughed at Mr. Jones as if they were used to the type of activity. Do: A home visit on 10/16/16 was performed by agency social worker to monitor the children’s safety and Mr. Jones compliance with alcohol treatment. At the visit were Mr. Jones, Ashley, Monica, and Jacob. When the agency social worker arrived at the home, Jacob answered the door and invited social worker into the home. Mr. Jones was sitting in the living room. When social worker approached Mr. Jones she could smell alcohol on his breath and saw a bottle of beer on the table. Mr. Jones asked social worker why she was at the home, even though the visit was scheduled for this time, and told social worker he was tired of her coming to the home. During this time, Ashley and Monica were playing a game on the floor and they looked up and laughed when Mr. Jones told social worker he was tired of her ongoing visits. All three children appeared to be dressed in their school clothes, pants and short sleeve shirts. However, when asked, Jacob stated that they had not yet started to prepare food for dinner. The living room was cluttered with . . .</td>
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<td>DOCUMENTATION OF DECISIONS</td>
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<td>The case narrative regarding any case decision must concisely articulate:</td>
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<tr>
<td>• What decisions were made,</td>
<td>NC DSS has developed forms that can be used in place of case narrative that support both Objective Narrative and Subjective Narrative (discussed below) including, but not limited to the:</td>
</tr>
<tr>
<td>• Who was involved in the decision making,</td>
<td>• Monthly In-Home Services Contact Record</td>
</tr>
<tr>
<td>• What information, condition, or factors the decision was based on, and</td>
<td>• Monthly Permanency Planning Contact Record</td>
</tr>
<tr>
<td>• The basis for all decisions.</td>
<td>Additional case narrative may be required if the above forms do not cover all aspects of the home visit/contact. If all actions are captured on the form, no additional narrative is needed.</td>
</tr>
<tr>
<td>if this information is not captured on another document (or NC DSS form).</td>
<td>SUBJECTIVE NARRATIVE</td>
</tr>
<tr>
<td>Documentation must include information to support decisions made, including reports, other documentation, and/or agency worker narrative regarding observations or interviews, and that indicates any impact on the child from the abuse and/or neglect. See Impact on Children for behaviors and conditions that may indicate maltreatment.</td>
<td>Subjective narrative captures responses from case participants about how they are feeling, how the case is progressing, how unsafe they may be feeling, etc. To assess a family member’s status or change in status, the social worker should ask subjective questions and document the response. Examples include:</td>
</tr>
<tr>
<td>Case narrative must indicate how a decision will be implemented if not covered in other documentation. Specifically, case narrative must identify next steps, who is responsible, and by when they must be completed, if not covered in other documentation.</td>
<td>• Describe how you feel when this occurs.</td>
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<td>• How often does this happen or how long has this been going on?</td>
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<td></td>
<td>• What makes it better or worse?</td>
</tr>
<tr>
<td></td>
<td>• What helps you to feel safe?</td>
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<td>To understand family history, these subjective inquiries are often very important. This information along with scaling questions and what if questions can help social workers develop a better understanding of the family circumstances. This understanding will enable</td>
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### CROSS FUNCTION TOPICS: Documentation

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<tr>
<td>covered on a form or other documentation.</td>
<td>the social worker to identify jointly with family members ideas to address concerns and strengths to build upon.</td>
</tr>
<tr>
<td>Case documentation must include case staffing notes and decision but must NOT include information regarding worker performance (positive or negative) that is function of supervision.</td>
<td>This subjective narrative should be completed in the same manner as the objective narrative, in that the social worker must capture what information was shared, where and how. Especially important to demonstrate emotions and/or impact of the feelings, the observed body language should also be captured in the narrative.</td>
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<td>The agency social worker should use words that describe the communication and observations like: loudly, shouting, whispering, looking at worker in the eye, or eyes looking back and forth, smiling, crying. The agency social work should not use words that impart the social worker’s feeling or opinion about the communication or observation like: appeared to be happy, sad, upset. Agency workers subjective thoughts or reactions do not belong in the case narrative.</td>
</tr>
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</table>
| | ASSESSMENT AND/OR DECISION NARRATIVE  
During many interactions with a family, the agency social worker will have to assess the situation to determine if action is required. One of the most important aspects of the child welfare social worker’s job is to monitor family situations and assess the safety and or risk to child(ren). The assessment it to be based on professional knowledge and experience, not opinion. Referring to the case example above, the social worker will assess if the children are at risk in the care of Mr. Jones who appears to be under the influence of alcohol. Several factors will be considered (age and maturity of the children, is anyone else in the home or due home shortly, history regarding Mr. Jones’s actions when under the influence, etc.). |
| | Assessment or decision narrative are captured:  
- When a situation requires an immediate response and  
- For decisions made in meetings or during case staffing with the agency supervisor. |
| | The case narrative about a case staffing should cover what decisions were made, who was involved in the decision making, what information, condition, or factors the decision was based on, and the basis for all decisions. When decisions are made during a Child and Family Team meeting, the same information will be documented within the form used to facilitate and document the meeting and additional case narrative may not be needed. |
| | NC has developed forms that can be used in place of case narrative to support assessment and decision making including, but not limited to:  
- Safety Assessment, DSS-5231 |
CROSS FUNCTION TOPICS: Documentation

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<td></td>
<td>• Permanency Planning Review part of the DSS-5240 form</td>
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<td>• Child and Family Team Safety Planning form (pre-petition form)</td>
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<td>• Case decision portion of the Assessment Documentation tool, DSS-5010</td>
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<td>Model Court Report forms provide a template for reporting recommendations, based on child welfare decisions, to the court.</td>
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PLANNING OR NEXT STEPS NARRATIVE
Decisions not thoroughly captured in another form or document will be covered in the case narrative. For example, when the decision for a CPS Assessment is Services Needed, the next step will be to transfer the case for ongoing services. For the example with Mr. Jones above, if the decision was that the children could not remain in the care of Mr. Jones, next steps were identified and the case narrative would list those next steps, who is responsible, and by when they will be completed.

NC has developed forms that can be used in place of case narrative to support planning including, but not limited to:
• Family Services Agreements for In-Home Services and Permanency Planning Services
• Child and Family Team Safety Planning form (pre-petition form)
• Temporary Parental Safety Agreements

CASE SUMMARIES
There are times when in addition to the ongoing case documentation and or completion of forms, a summary is required. A summary should be created for, but not limited to:
• Transfer: When a case is transferring to another worker or county, except when a summary exists, and
• Closing: When a case is terminated with a family, except when a summary exists.
For both transfers and closings, the assessment documentation 5010 includes a case summary.

Transfer summaries should include, but not be limited to:
• Reason for the case opening,
• Reason for transfer,
• Current case participants (including nonresident parent(s) and providers),
• Current safety and risk concerns,
• Strengths and needs for family members,
• Status of child(ren) and family,
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<tr>
<td>• Status of family service agreements or safety plans,</td>
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<td>• List of upcoming appointments and meetings (who, where, when, why), and</td>
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<tr>
<td>• Other pertinent information regarding the family, services, well-being, and/or cultural considerations.</td>
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Closing summaries should include, but not be limited to:

• Reason for case opening,
• Status of child(ren) and family, specifically regarding safety and risk,
• Justification for case closure to include behaviorally specific information about how the family has stabilized and achieved case plan objectives,
• Services provided during case, and
• Recommendations for ongoing services or aftercare.

For Permanency Planning Services, transfer and closing summaries should also include:

• Status of permanency planning,
• Placement status, including strengths and/or issues,
• Family Time and Contact Plan, and how it is progressing,
• Sibling interaction if not placed together,
• Court status, and
• Aftercare services, if closing the case.

NC FAST
Case narrative will be entered into NC FAST as Case Log or Case Notes. Case Notes will only be used to capture agency worker input regarding activities that did NOT involve making a decision, had no impact on safety, risk and/or well-being. Case Notes functionality was provided to capture short, typically one line status updates, including but not limited to:

• Informed supervisor that worker completed follow up with service provider as agreed to during staffing (the narrative regarding the contact with the service provider will be entered into the Case Log).
• Received medical report on a child (when the report is reviewed and the information gained from the report that impacts the case decision or recommendations will be entered in the Case Log).