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 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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### 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](#).

(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.
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.
**Intake: Intake Steps**

**CPS INTAKE STEPS**

**Step 1:** Complete the structured intake form using a strengths-based approach with the reporter.

**Step 2:** Consult maltreatment screening tool(s) which correspond to the allegations. Make screening decision.

**Step 3:** Determine residency and the county responsible for completing the CPS Assessment.

**Step 4:** Consult the response priority tools to determine initiation timeframe.

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

The Intake Tool must be used to collect information and document decision-points throughout these steps.

**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>
<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. |  |
# Intake: Collection of Information and Assessing Agency History

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<td>The County child welfare worker must use the <a href="https://example.com">North Carolina Division of Social Services’ Structured Intake Form, (DSS-1402)</a> to document information about the report of suspected abuse, neglect and/or dependency.</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.</td>
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<td>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.</td>
<td>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.</td>
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<td>The County child welfare worker must provide support and encouragement to the reporter by:</td>
<td>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.</td>
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<td>• Explaining the purpose of CPS (to protect and strengthen the family);</td>
<td>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.</td>
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<td>• Emphasizing the importance of reporting;</td>
<td>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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<tr>
<td>• Dealing with fears and concerns of the reporter; and</td>
<td>must use the <a href="https://example.com">North Carolina Division of Social Services’ Structured Intake Form, (DSS-1402)</a> to document information about the report of suspected abuse, neglect and/or dependency.</td>
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<tr>
<td>• Discussing confidentiality regarding the CPS report including the identity 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>has firsthand knowledge of the situation. In such situations, 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

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
</table>
| 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](#)  
  - 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](#).
# Intake: Human Trafficking Reports

NEW POLICY ADDED JUNE 15, 2018, Pages 13-14

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
<td></td>
</tr>
</tbody>
</table>

*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.

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
### Intake: Human Trafficking Reports

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<tr>
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</thead>
<tbody>
<tr>
<td>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>
<td></td>
</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

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>Juvenile Involved</strong></td>
<td></td>
</tr>
<tr>
<td>County child welfare agencies must screen out any reports that do not involve a juvenile. See <a href="#">definitions</a>.</td>
<td></td>
</tr>
<tr>
<td><strong>Meet Abuse, Neglect, &amp;/or Dependency Definitions</strong></td>
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</tr>
<tr>
<td>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 <a href="#">definitions</a>.</td>
<td></td>
</tr>
<tr>
<td><strong>Caretaker</strong></td>
<td></td>
</tr>
<tr>
<td>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 <a href="#">Decision Tool</a> and <a href="#">definitions</a>.</td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
</tr>
<tr>
<td><strong>Determination of Caretaker</strong></td>
<td></td>
</tr>
<tr>
<td>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:</td>
<td></td>
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<tr>
<td>• The duration and frequency of care provided by the adult,</td>
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<tr>
<td>• The location in which that care is provided, and</td>
<td></td>
</tr>
<tr>
<td>• The decision-making authority granted to the adult.</td>
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</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
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</tr>
</thead>
<tbody>
<tr>
<td>The report must be accepted for assessment if it cannot be determined whether the alleged perpetrator meets the statutory definitions of a caretaker.</td>
<td></td>
</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 Out-of-Home Care Providers.</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>
<tr>
<td>Non-Caretaker Reports</td>
<td></td>
</tr>
<tr>
<td>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:</td>
<td></td>
</tr>
<tr>
<td>• Give immediate verbal notifications to the District Attorney or designee</td>
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</tr>
<tr>
<td>• Send subsequent written notification to the District Attorney within 48 hours</td>
<td></td>
</tr>
<tr>
<td>• Give immediate verbal notification to the appropriate local law enforcement agency</td>
<td></td>
</tr>
<tr>
<td>• Send subsequent written notification to the appropriate local law enforcement agency within 48 hours.</td>
<td></td>
</tr>
<tr>
<td>Reports Involving a Child(ren) Living in a Home Where Another Child is Abused, Neglected and/or Dependent</td>
<td></td>
</tr>
<tr>
<td>Intake must screen the report regarding all children living in the home as alleged victim children.</td>
<td></td>
</tr>
<tr>
<td>Reports Involving a Child(ren) Living in a Home Where Another Child is Abused, Neglected and/or Dependent</td>
<td></td>
</tr>
<tr>
<td>While the prior physical or sexual abuse or death from abuse or neglect of one child in a home does not</td>
<td></td>
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</tbody>
</table>
**Intake: Establishing the Authority to Intervene**

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
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</tr>
</thead>
</table>
| • 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.  
• 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. | 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. |

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](#).
Is the person the parent (birth or adoptive), legal guardian or legal custodian? **YES**

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**

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

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**

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

This person is defined by statute as a caretaker.

The person is 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.

This person is defined by statute as a caretaker.

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.

This person is NOT defined by statute as a caretaker.
### Intake: Reports Involving Child Caring Agencies & Duty to Report Allegations of Child Abuse and Neglect in Child Care

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Duty of the County Child Welfare Agencies to Report Allegations of Child Abuse and Neglect in Child Care</strong></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

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</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 in North Carolina, but the location of the alleged maltreatment occurred out-of-state, the county of residence must conduct the CPS Assessment.</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.</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.</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></td>
</tr>
<tr>
<td>See <a href="#">Out of State Decision Making Tool</a>.</td>
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</tbody>
</table>

### 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?
  - NO
  - Child “found” in NC?
    - NO*
      - Refer report to the state where the child resides. No further action.
    - YES
      - YES
        - NO
          - 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
            - NO
              - NC Child Welfare agency of residence must conduct the CPS Assessment.
            - YES
              - NC Child Welfare agency of residence must conduct the CPS Assessment with the other state’s assistance.

**Alleged Perpetrator Residency**

- Perpetrator a resident of NC?
  - YES
    - YES
      - 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.
    - NO
      - NO*
        - Refer report to the state where the child resides. No further action.
      - YES
        - NO
          - NC Child Welfare agency of residence must conduct the CPS Assessment.
        - YES
          - NC Child Welfare agency of residence must conduct the CPS Assessment with the other state’s assistance.

**Location of Alleged Maltreatment**

- Alleged Maltreatment Occurred In or Out of State
  - YES
    - NO
      - NO*
        - Refer report to the state where the child resides. No further action.
      - YES
        - NO
          - NC Child Welfare agency of residence must conduct the CPS Assessment.
        - YES
          - NC Child Welfare agency of residence must conduct the CPS Assessment with the other state’s assistance.

**County Responsible for CPS Assessment**

This decision tree is not all inclusive. There may be situations where a county child welfare agency answers no (at asterik*) 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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<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reports Involving Open Child Placement Cases</strong></td>
<td></td>
</tr>
<tr>
<td>Any new allegation and/or incident that meets the legal definitions of abuse, neglect, and/or</td>
<td></td>
</tr>
<tr>
<td>dependency received at any time during the course of the child receiving Child Placement</td>
<td></td>
</tr>
<tr>
<td>Services, must be documented as a new report and the agency must conduct a prompt and thorough</td>
<td></td>
</tr>
<tr>
<td>CPS Assessment.</td>
<td></td>
</tr>
<tr>
<td>County child welfare agencies often receive reports on children that are receiving Child</td>
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<tr>
<td>Placement Services. For example, if a child is home for a trial visit and the county child</td>
<td></td>
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<tr>
<td>welfare agency receives a report regarding this visit, it must be documented as a new report</td>
<td></td>
</tr>
<tr>
<td>and a prompt and thorough CPS Assessment must be completed if the allegations meet the NC</td>
<td></td>
</tr>
<tr>
<td>criteria of abuse, neglect and/or dependency.</td>
<td></td>
</tr>
<tr>
<td>Additional requirements are contained in Chapter V, Jurisdiction, and Chapter VIII, 1410,</td>
<td></td>
</tr>
<tr>
<td>Conflict of Interest.</td>
<td></td>
</tr>
<tr>
<td><strong>Reports Involving Out-of-Home Care Providers</strong></td>
<td></td>
</tr>
<tr>
<td>Reports alleging abuse, neglect and/or dependency of a child by out-of-home care providers,</td>
<td></td>
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<tr>
<td>and the allegations meet the definitions of abuse, neglect and/or dependency, and the out of</td>
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<tr>
<td>home provider meets the definition of caretaker per G.S. §7B-101, the county child welfare</td>
<td></td>
</tr>
<tr>
<td>agency must complete a CPS Assessment.</td>
<td></td>
</tr>
<tr>
<td>Additional requirements are contained in Chapter V, Jurisdiction, and Chapter VIII, 1410,</td>
<td></td>
</tr>
<tr>
<td>Conflict of Interest.</td>
<td></td>
</tr>
<tr>
<td><strong>Reports Regarding Institutional Placements</strong></td>
<td></td>
</tr>
<tr>
<td>If a report is received on an institutional placement and the person alleged to have</td>
<td>If a report is received and the person alleged to have abused or neglected the juvenile is the</td>
</tr>
<tr>
<td>maltreated the child is responsible for the child’s health and welfare, the report must be</td>
<td>cook, the janitor, the groundskeeper, etc., the report would not be accepted for CPS Assessment</td>
</tr>
<tr>
<td>accepted for CPS Assessment. This includes a correctional officer or any employee with the</td>
<td>but reported to law enforcement.</td>
</tr>
<tr>
<td>Division of Juvenile Justice and Delinquency Prevention that has responsibility for the health</td>
<td></td>
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<tr>
<td>and welfare of a juvenile.</td>
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</tbody>
</table>
Intake: Reports Involving Out-of-Home Care Providers

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
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</thead>
<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.</td>
<td></td>
</tr>
<tr>
<td>Additional requirements are contained in Chapter V, Jurisdiction.</td>
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</tbody>
</table>

Reports Involving Children Living in an Institutional Setting Where a Child Has Died Due to Suspected Maltreatment

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 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,
- 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))
### Intake: Multiple Reports Involving the Same Child or Family

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<tr>
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</thead>
<tbody>
<tr>
<td><strong>Multiple Reports Involving the Same Child or Family</strong></td>
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</tr>
<tr>
<td>If a CPS report is received that describes the exact, same allegations and incidents already being assessed,</td>
<td></td>
</tr>
<tr>
<td>- The information must be documented and the allegations must be considered screened-in.</td>
<td></td>
</tr>
<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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</tbody>
</table>
### Intake: Reports Involving Open CPS In-Home Services Cases

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

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
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</tr>
</thead>
<tbody>
<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>
<td></td>
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</tbody>
</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

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
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</tr>
</thead>
<tbody>
<tr>
<td>The Maltreatment Screening Tools are one component of Intake Decision-Making. Use of the Maltreatment Screening tools:</td>
<td></td>
</tr>
<tr>
<td>• Must occur for every CPS report:</td>
<td></td>
</tr>
<tr>
<td>o Regarding a child under the age of 18, and</td>
<td></td>
</tr>
<tr>
<td>o Alleging abuse, neglect, and/or dependency by a parent or caretaker,</td>
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</tr>
<tr>
<td>• Provide for consistent screening across the state, and</td>
<td></td>
</tr>
<tr>
<td>• Determine whether the allegations meet the legal definitions of abuse, neglect and dependency.</td>
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</tbody>
</table>

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.
Protocol – What you must do | Guidance – How you should do it
---|---
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.

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.

Policy states that whatever county starts the assessment finishes it. However, the county that receives the report should consider notifying the other county of the report and including an offer to initiate the assessment as an assist.

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

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
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<tbody>
<tr>
<td><strong>Response Priority Tools</strong> 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>
<tr>
<td>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.</td>
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<tr>
<td>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.</td>
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</table>
## Intake: Determination of Response Approach

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<tr>
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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>
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</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.
**Intake: Determination of Response Approach**

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<thead>
<tr>
<th>Protocol – What you must do</th>
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<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>
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<td>• A child fatality when there are surviving children in the family;</td>
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<td>• A child in custody of a county child welfare agency, family foster homes, or residential facilities;</td>
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<td>• A child taken into protective custody by physician or law enforcement, pursuant to N.C.G.S. §7B-308 (<a href="http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-308.html">http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-308.html</a>) and §7B-500 (<a href="http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-500.html">http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-500.html</a>);</td>
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<td>• The medical neglect of disabled infants with life threatening condition, pursuant to Public Law 98-457 (Baby Doe);</td>
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<td>• A child hospitalized (admitted to hospital) due to suspected abuse/neglect;</td>
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<td>• Abandonment;</td>
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<td>• The suspected or confirmed presence of a methamphetamine lab where children are exposed;</td>
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<td>• A child less than a year who has been shaken or subjected to spanking, hitting or other form of corporal punishment</td>
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<tr>
<td>• 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. <em>(added June 15, 2018)</em></td>
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### Intake: Assignment of Report

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
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<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>
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<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>
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## Intake: Two Level Decision Making

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<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>
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<tr>
<td>All persons participating in the screening decision must sign the Structured Intake Report tool where indicated.</td>
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<td>The Intake supervisor must review every CPS report for compliance with policy and protocol.</td>
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**Intake: Notification**

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
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<tbody>
<tr>
<td><strong>DISTRICT ATTORNEY / LAW ENFORCEMENT NOTIFICATION</strong></td>
<td><strong>DA / LE NOTIFICATION</strong></td>
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<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>
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<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, prior to receipt of the 7-day letter, 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 officer who is</td>
</tr>
<tr>
<td>4. Send subsequent written notification to the appropriate local law enforcement agency within 48 hours.</td>
<td>further 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>
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Whenever a report is received, where there is evidence that a child may have been harmed in violation of any criminal statute, child welfare agencies must:

1. Give immediate verbal notifications to the District Attorney or designee;
2. Send subsequent written notification to the District Attorney within 48 hours;
3. Give immediate verbal notification to the appropriate local law enforcement agency, and
4. Send subsequent written notification to the appropriate local law enforcement agency within 48 hours.

**REPORTER NOTIFICATION**

For all CPS Intake reports, there must be documentation that:

1. Written notice was sent to the person making the report within 5 business days after receipt of the report; or
2. The person making the report waived their right to notice; or
3. The person making the report refused to provide identifying information.

The notice to the reporter must include:

- a) A statement about whether the report was or was not accepted for CPS Assessment based on statutory definitions, citing the relevant statutes. Providing a brief description regarding the type of CPS Assessment (Investigative or Family) is helpful for reporters.
- b) The date the report was made;
## Intake: Notification

| c) 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; |
| d) 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; |
| e) A statement about whether the report was referred to the appropriate state or local law enforcement agency; |
| f) The identity of the county responsible for conducting the CPS Assessment, if different than the county who received the Intake; |
| g) Information and resources on human trafficking, as appropriate, regardless if the report is screened in or screened out (added June 15, 2018); |
| h) 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 |
| i) The name and contact information for the assigned County child welfare worker, the supervisor, or other identified person. |

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

1. 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**, and
       - **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 the 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 judgment. 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
  - Yes: Is the parent/caretaker causing serious non-accidental physical injury which creates a substantial risk of death, disfigurement, or impairment?
  - No

- Accept for Investigative Assessment
  - Yes: Is the parent/caretaker causing the child to be at a substantial risk of non-accidental abuse or injury?
  - No

- Accept for CPS Assessment
  - Yes: Has the parent/caretaker been criminally charged with driving while intoxicated?
  - No

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.
Intake: Maltreatment Screening Tools

Cruel/Grossly Inappropriate Behavior Modification Screening Tool

1. Is the parent/caretaker using sadistic measures to modify the child's behavior?
   - Yes: Accept for Investigative Assessment
   - No: Proceed to next question

2. Is the parent/caretaker using extreme confinement measures to modify the child's behavior?
   - Yes: Accept for Investigative Assessment
   - No: Proceed to next question

3. Is the parent/caretaker using weapons to modify the child's behavior?
   - Yes: Accept for Investigative Assessment
   - No: Proceed to next question

4. Is the parent/caretaker forcing the child to ingest harmful substance?
   - Yes: Accept for Investigative Assessment
   - No: 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.
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.
Sexual Abuse Screening Tool

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

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>
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<th>Normal Child Sexual Development</th>
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<td>Infancy (birth through one year)</td>
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<td>• Pair bonding</td>
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<td>Latency (6 to 9 years)</td>
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<td>• Concrete interest in anatomic differences, pregnancy, birth</td>
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<td>• Modesty about bodies</td>
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<td>• Increased secretive behavior among peers</td>
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<td>• Interest in socialization</td>
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</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

(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.

Return to Maltreatment Screening Tools page 1.
Emotional Abuse Screening Tool

- Accept for Investigative Assessment
- Is the parent/caretaker’s rejection of the child causing serious emotional damage?
  - No
  - Accept for Investigative Assessment
  - Is the parent/caretaker’s criticism of the child causing serious emotional damage?
    - No
    - Accept for Investigative Assessment
    - Is the parent/caretaker’s insulting of the child causing serious emotional damage?
      - No
      - Accept for Investigative Assessment
      - Is the parent/caretaker’s humiliating of the child causing serious emotional damage?
        - No
        - Accept for Investigative Assessment
        - Is the parent/caretaker’s isolation of the child causing serious emotional damage?
          - No
          - Accept for Investigative Assessment
          - Is the parent/caretaker’s terrorizing of the child causing serious emotional damage?
            - No

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?

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

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

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?

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 an Investigative Assessment due to other information obtained during Intake.
G. Human Trafficking Screening Tool Instructions Modified June 15, 2018

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

- Accept for CPS Assessment
  - Yes
    - Is the parent/caretaker failing to provide sufficient food?
      - No
  - No

- Accept for CPS Assessment
  - Yes
    - Is the parent/caretaker failing to provide appropriate and reasonable clothing?
      - No
  - No

- Accept for CPS Assessment
  - Yes
    - Is the parent/caretaker failing to ensure proper hygiene?
      - No
  - No

- Accept for CPS Assessment
  - Yes
    - Is the parent/caretaker failing to provide adequate shelter?
      - No
  - No

- Accept for CPS Assessment
  - Yes
    - Is the parent/caretaker failing to provide basic education?
      - No
  - No

- Accept for CPS Assessment
  - Yes
    - Is the parent/caretaker providing drugs/alcohol to the child?
      - No

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 willfully 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

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

No

Accept for CPS Assessment

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

No

Accept for CPS Assessment

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.
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

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.
Substance Abuse Screening Tool

Accept for CPS Assessment

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

Accept for CPS Assessment

Is 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?

Accept for CPS Assessment

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

Accept for CPS Assessment

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

Go to Substance Affected Infant Screening Tool.

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

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.
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

Continued from Substance Abuse Screening Tool

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

YES

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

Accept for CPS Assessment

NO

Continue with Substance Affected Infant Screening Tool, Part II.
Did the mother have a positive drug or alcohol toxicology screen at the time of infant’s birth?

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?

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

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

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?

Accept for CPS Assessment

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.
Domestic Violence Screening Tool

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

No

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.
Dependency Screening Tool

- **Accept for CPS Assessment**
  - Yes
  - **Is the child without a parent/caretaker?**
    - No
    - **Is the parent/caretaker lacking capacity to provide care and supervision to the child without having an appropriate alternative child care arrangement?**
      - No
      - **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.
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

1. Immediate Response
   - Yes
   - Is the child preschool or limited by disability?

2. Immediate Response
   - Yes
   - Is the child being tormented or tortured?

3. Immediate Response
   - Yes
   - Is the child in a life threatening situation?

4. Immediate Response
   - Yes
   - Is this a self-reporting child under 12? Is this child afraid to go home?

5. Immediate Response
   - Yes
   - Does the child live in a home in which another child died as a result of maltreatment?

6. 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

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.

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.
SEXUAL ABUSE RESPONSE PRIORITY DECISION TREE DEFINITIONS

**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 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 12? 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

24 Hour 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?

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

Yes  
Is this an infant that has been safely surrendered?

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

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

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

All dependency reports require at least a 72 hour response.
DEPENDENCY RESPONSE PRIORITY DECISION TREE DEFINITIONS

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.
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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>N.C.G.S. § 7B-300 states:</td>
</tr>
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<td>o The household family members of such children.</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>
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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.

Sufficient information must be gathered to assess:

| o The safety of the child and the potential risk of harm during the CPS Assessment period; | N.C.G.S. § 7B-302 states: |
| o What actions might be needed to assure the safety of the child; | “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.” |
| o Whether the facts identified through a structured gathering of information support the substantiation that a child is abused, neglected, and/or dependent as defined by statute, and the extent of the abuse, neglect, and/or dependency; | N.C.G.S. § 7B-101 provides the legal definitions of abused, neglected, and dependent juveniles: |
| 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 | 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. |
| o Whether the specific environment in which the child is found meets the child’s need for care and protection. | N.C.G.S. § 7B-302(a) states: |

To assess reports of abuse, neglect, and/or dependency, each county child welfare agency may use either:

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

- The Family Assessment Response; or
- 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.
N.C.G.S. § 7B-302(h) states:
The director or the director’s representative may not enter a private residence for assessment purposes without at least one of the following:
(1) The reasonable belief that a juvenile is in imminent danger of death or serious physical injury.
(2) The permission of the parent or person responsible for the juvenile’s care.
(3) The accompaniment of a law enforcement officer who has legal authority to enter the residence.
(4) An order from a court of competent jurisdiction.

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.
**CPS Assessments: Family & Investigative Assessments: Required Timeframes (Policy and Protocol)**

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<th><strong>Upon screen in of report</strong></th>
<th><strong>Ongoing during assessment</strong></th>
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<tr>
<td>• Time clock for initiation begins</td>
<td>• Contact with parent(s) and child(ren). See Required Contact Section – Frequency determined by risk level (minimum of twice a month and at least 7 calendar days apart)</td>
</tr>
<tr>
<td>• At time the report is received by any NC county child welfare agency</td>
<td>• Collateral contacts – At least two during assessment</td>
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<tr>
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<td>• Visit at home where child(ren) resides (with parent/caretaker or Temporary Safety Provider) – Minimum of monthly</td>
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<tr>
<td><strong>If/When case involves a Temporary Safety Provider</strong></td>
<td><strong>If/When county files petition for custody</strong></td>
</tr>
<tr>
<td>• Prior to placement of child(ren) with safety provider</td>
<td>• Prior to filing petition</td>
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<td></td>
<td>• Meet with family to develop a safety plan and hold a CFT</td>
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<td></td>
<td>• Complete Background checks for all household members 16 years or older</td>
</tr>
<tr>
<td></td>
<td>• Complete Initial Safety Provider Assessment and approved by supervisor</td>
</tr>
<tr>
<td><strong>Current within 7 calendar days</strong></td>
<td><strong>Prior to placing child(ren) out of the home</strong></td>
</tr>
<tr>
<td></td>
<td>• 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)</td>
</tr>
<tr>
<td><strong>If/When county files petition for custody</strong></td>
<td><strong>At time of child(ren) placement</strong></td>
</tr>
<tr>
<td>• Within 3 days after the day of placement</td>
<td>• Provide to placement provider: custody order, all available child information, &amp; county child welfare agency contact information</td>
</tr>
<tr>
<td>• Within 7 calendar days of custody</td>
<td><strong>Within 14 calendar days of custody</strong></td>
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<tr>
<td></td>
<td>• Face to face visit with child(ren). This contact is (in addition to any contact or interaction with the child(ren) on the day of placement)</td>
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<td></td>
<td>• Child(ren) medical exam occurs (Child Health Status completed) &amp; Educational Stability addressed (Child Educational Status or Best Interest Determination form completed) including BID meeting (within 5 school days) prior to any school change</td>
</tr>
<tr>
<td></td>
<td>• Visitation of child(ren) with parent(s) and siblings,</td>
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<td></td>
<td>• Face to face contact with the placement provider (all adult caretakers) in the provider’s home</td>
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<td></td>
<td><strong>NOTE:</strong> This face to face contact with the placement provider can occur at the same time as the face to face contact with the child(ren) within 3 days after the placement if all requirements are met.</td>
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Revision Date: 06/15/18
### Case Closure Requirements

<table>
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<th>Details</th>
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| • Within 45 calendar days of CPS report. Prior to or at time of case closure: | • Risk Assessment & Strengths and Needs Assessment  
• Case Decision Summary |
| • Within 3 calendar days following case decision of Substantiation or Services Needed | • 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). |
| • Within 5 working days after case decision | • Notification letters, RIL notification (if applicable) |
| • 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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<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>
</tr>
<tr>
<td>• Review all (county and state) 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>o the county child welfare agency has conducted such a check in the 60 calendar days prior to the new report or</td>
<td>• CPS Central Registry checks. The CR provides previous CPS involvement.</td>
</tr>
<tr>
<td>o the agency is providing ongoing children’s services to the family;</td>
<td>For some cases, it may be appropriate to complete a criminal record check on an individual who does not reside in the home or request 911 call logs regarding an address that is not the current location of the family home to assess child safety and risk.</td>
</tr>
<tr>
<td>• Check criminal records for all relevant individuals who are 16 years of age or older, and</td>
<td>A request for 911 call logs can:</td>
</tr>
<tr>
<td>• Determine the need for a request of 911 call logs on the relevant address(es) and review obtained information.</td>
<td>• Provide additional information regarding child safety, especially when there are allegations of domestic violence, and</td>
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<td>• Inform decisions regarding worker safety.</td>
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</table>

## 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:

- 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
- Contact local law enforcement agencies and/or conduct a criminal record check on the alleged perpetrator of domestic violence.

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.

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.

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.
### CPS Assessments: Family & Investigative Assessments: Checking Agency Records

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<th>Protocol – What you must do</th>
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<tr>
<td><strong>Civil Case Processing System (VCAP)</strong></td>
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</tr>
<tr>
<td>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.</td>
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</tbody>
</table>
### CPS Assessments: Family & Investigative Assessments: Initiation

<table>
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<tr>
<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>
</tr>
</tbody>
</table>

All reports accepted for a CPS Assessment must:
- Be assessed promptly through individual 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>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
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</thead>
<tbody>
<tr>
<td>Investigative Assessments with allegations of abuse must be initiated by first interviewing the child.</td>
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</table>

**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](#).

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Revision Date: 06/15/18
### CPS Assessments: Family & Investigative Assessments: Unable to Locate

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<tr>
<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 (<a href="#">DSS-5010</a>).</td>
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<tr>
<td>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.</td>
<td></td>
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<tr>
<td>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.</td>
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</table>
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.
## CPS Assessments: Family & Investigative Assessments: Safety Planning

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<tr>
<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>
<td></td>
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</tbody>
</table>
| • Treat the information as a new report (through Intake) and  
  • Respond within appropriate timeframes to assess the safety of the child. |  |
| 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: |  |
| • Ensure that the county child welfare worker responds to the new allegations within appropriate timeframes to assess the safety of the child and  
  • Develops a new or modified Safety Assessment that reflects the new information. |  |
| If the county child welfare agency discovers information that necessitates law enforcement involvement, the county child welfare agency must: |  |
| • Give immediate verbal notification to the district attorney (DA) or their designee;  
  • Send subsequent written notification to the district attorney within 48 hours;  
  • Give immediate verbal notification to the appropriate local law enforcement (LE) agency; and  
  • Send subsequent written notification to the appropriate local law enforcement agency within 48 hours. |  |
| The notification to the DA/LE must include: |  |
| • The name and address of the child, of the parents; or  
  • The perpetrator when this person is different from the parents or caretaker;  
  • Whether the abuse was physical, sexual, or emotional;  
  • The dates that the CPS Assessment was initiated and that the evidence of abuse was found;  
  • What evidence of abuse was found; and |  |
CPS Assessments: Family & Investigative Assessments: Safety Planning

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<tr>
<td>- What plan to protect the child has been developed and what is being done to implement it.</td>
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"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.

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
CPS Assessments: Family & Investigative Assessments: Safety Planning

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<td>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.</td>
<td>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.</td>
</tr>
<tr>
<td>See Use of TPSA with Parents &amp; Caretakers Decision Tool.</td>
<td>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.</td>
</tr>
</tbody>
</table>
| 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. | 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. |
| 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. | 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 |
| 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). | |
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.
Use of TPSA with Parents & Caretakers

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

YES

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

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

YES

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 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 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.

** 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.

This person is defined by statute as a caretaker.

- 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.

This person is NOT defined by statute as a caretaker.

NO

NO

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

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.

NO

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

NO

This person is defined by statute as a caretaker.

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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<tr>
<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>
</tr>
<tr>
<td>Face-to-face interviews with the parents or primary caretakers with whom the child resides must:</td>
<td>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.</td>
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<tr>
<td>• Be conducted the same day the child is seen, or</td>
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<td>• There must be documentation to reflect diligent efforts made or rationale for delaying the interview that does not compromise the safety of the child.</td>
<td>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.</td>
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<tr>
<td>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:</td>
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<tr>
<td>• Be conducted within seven calendar days of initiating the CPS Assessment, or</td>
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<tr>
<td>• There must be documentation to reflect efforts made.</td>
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<td>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.</td>
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<tr>
<td>At initial face to face contact with the parent(s)/caretaker(s), the county child welfare worker must:</td>
<td>Assessment Interviews with Non-Offending Parent/Caretaker</td>
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<tr>
<td>• Communicate that the CPS Assessment must be completed within 45 calendar days of the date of the report;</td>
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<tr>
<td>• Provide a written explanation (e.g. a brochure) of the CPS Assessment response (Family Response or Investigative Response). The county child welfare worker must also verbally explain MRS and potential case decisions;</td>
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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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<tr>
<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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<tr>
<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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<tr>
<td>• Ascertain family strengths and needs using SEEMAPS or equivalent.</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>• Their history of seeking help</td>
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<td>• Their plan for the children and himself or herself</td>
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<td></td>
<td>• The frequency/intensity of the domestic violence</td>
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<td></td>
<td>• If their partner had ever used physical force on him or her (pushed, pulled, slapped, punched or kicked),</td>
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<td>• If he or she has ever been afraid for the safety of their children?</td>
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The presence of relatives or friends may affect disclosure and safety. Information concerning resources and referrals to

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**CPS Assessments: Family & Investigative Assessments: Initial Face to Face Contacts with Household Members**

**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:

- Provide services that immediately be given to the non-offending parent/adult victim and children (as appropriate).
### CPS Assessments: Family & Investigative Assessments: Initial Face to Face Contacts with Household Members

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<td>• Focus on information from third party reports such as law enforcement, medical providers, or the Administrative Office of the Courts</td>
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<td></td>
<td>• Follow up on legal accountability and/or treatment, and other service referrals for the alleged perpetrator of domestic violence.</td>
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<td></td>
<td>• 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.</td>
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<tr>
<td></td>
<td>• 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.</td>
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<tr>
<td></td>
<td>• 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.</td>
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### 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>
</tr>
<tr>
<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. The 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 and a full assessment of a child’s safety, risk and well-being.</td>
</tr>
<tr>
<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>
</tr>
<tr>
<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>
</tr>
</tbody>
</table>

If the allegations are made against the non-resident parent, a home visit must also be made to that home.

Documentation must reflect the above or diligent efforts to accomplish these requirements.

The county child welfare agency worker must not enter a home without at least one of the following:

- The reasonable belief that a juvenile is in imminent danger of death or serious physical injury;
- The permission of the alleged victim child’s parent or person responsible (adult) for the juvenile’s care;
- The accompaniment of a law enforcement officer who has legal authority to enter the residence; or
- An order from a court of competent jurisdiction.

The county child welfare worker must request to tour the home and property to assess the family’s living environment and how it impacts child safety and risk. The county child welfare worker must specifically address:

- Fire safety. The case record must contain documentation that fire safety has been discussed with the family at least once during the assessment;
- Firearm safety. The case record must contain documentation that firearm safety has been discussed with the family at least once during the assessment. See GS 14-315.1;  
- Safe sleep for infants. If an infant resides in the home, the county child welfare worker must specifically discuss safe sleeping and observe the

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**Revision Date:** 06/15/18  
**Return to [CPS Family and Investigative Assessments TOC](#)  
**Return to [Manual TOC](#)  
**Page 23**
### CPS Assessments: Family & Investigative Assessments: Home Visits

<table>
<thead>
<tr>
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<tr>
<td>sleeping arrangements. This must be documented on the DSS-5010 and covered in the Temporary Parental Safety Agreement when appropriate.</td>
<td>The home visit also supports the identification of resources within the neighborhood or community and the family’s access to these resources. For information regarding sleep related infant deaths and recommendations to reduce the risk of occurrence, please refer to The American Academy of Pediatrics policy statement at: <a href="#">Updated 2016 Recommendations for a Safe Infant Sleeping Environment</a></td>
</tr>
</tbody>
</table>

If, after requesting to tour the home, the county child welfare worker is denied access:

- 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.
**CPS Assessments: Family & Investigative Assessments: Non-resident Parent & Collateral Contacts**

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<td><strong>Non-Resident Parent</strong></td>
<td>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.</td>
</tr>
<tr>
<td>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.</td>
<td>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.</td>
</tr>
<tr>
<td>If the non-resident parent cannot be located, the record must include documentation showing the diligent efforts made to locate him or her.</td>
<td>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.</td>
</tr>
<tr>
<td>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:</td>
<td></td>
</tr>
<tr>
<td>- Specify and verify the safety threat and/or risk of harm;</td>
<td></td>
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<tr>
<td>- State the reason(s) why contact is not in the best interest of the child and/or resident parent’s/caretaker’s safety;</td>
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<tr>
<td>- Indicate the decision was reviewed and approved by a supervisor/manager; and</td>
<td></td>
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<tr>
<td>- Document all the above.</td>
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</tr>
<tr>
<td><strong>Non-Resident Child and Non-Resident Child’s Parent/Caretaker</strong></td>
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</tr>
<tr>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
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</tbody>
</table>
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.
### Protocol – What you must do

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.

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. These face to face contacts must include individual interviews with each child. Documentation must support the frequency of face to face contact.

### Guidance – How you should do it

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.
### 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.

#### 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

### Protocol

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 and/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**, parent 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 decision;
- Prior to filing a petition; and
- Whenever there is a change in circumstance that impacts the safety and/or risk to a child(ren).

Two level decisions/reviews must occur within the context of a staffing between the county child welfare worker and a county child welfare supervisor at a minimum.


The case supervisor must review every CPS Assessment case file for compliance with policy and protocol.

### Guidance

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.

It is recommended that other county child welfare workers, other supervisors, or higher-level managers participate in case staffings and decisions. If necessary to meet timeframes for case decision, it is appropriate for another supervisor or higher-level manager to participate in the case decision staffing.

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.
# CPS Assessments: Family & Investigative Assessments: Using the Child Medical Evaluation Program (CMEP)/Child and Family Evaluation Program (CFEP)

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<td>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.</td>
<td>Refer to Section 1422 - CHILD MEDICAL &amp; CHILD/FAMILY EVALUATION PROGRAM of Chapter VIII</td>
</tr>
</tbody>
</table>

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

<table>
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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 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>
</tr>
<tr>
<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.</td>
</tr>
<tr>
<td>• State and verify evidence of the person’s obstruction or interference.</td>
<td>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</td>
</tr>
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</table>

This obstruction of, or interference with, the CPS Assessment includes:

| • Refusing to disclose the whereabouts of the juvenile; | |
| • Refusing to allow the agency to have personal access to the juvenile; | |
| • Refusing to allow the agency to observe or interview the juvenile in private; | |
| • Refusing to allow the agency access to confidential information and records upon request; | |
| • Refusing to allow the director/agency to arrange for an evaluation of the juvenile by a physician or other expert; or | |
| • 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. | |

Filing the Petition: Obstruction of or Interference with Juvenile Investigation

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:

| • Obstruction of or Interference with Juvenile Investigation (form AOC-J-120) and | |
**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>
</tr>
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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**

**Using the Assessment Tools**

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.

**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](http://example.com) or [FAMILY ASSESSMENTS](http://example.com) for more guidance regarding case decisions.

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<tr>
<td>• The North Carolina Family Assessment of Strengths and Needs (DSS-5229) must be completed during the CPS Assessment.</td>
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<td></td>
<td>Refer <a href="http://example.com">INVESTIGATIVE ASSESSMENTS</a> or <a href="http://example.com">FAMILY ASSESSMENTS</a> for more guidance regarding case decisions.</td>
</tr>
<tr>
<td><strong>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 concerning the family units for all parents/caretakers. This may require more than one North Carolina Family Risk Assessment of Abuse / Neglect (DSS-5230) and North Carolina Family Assessment of Strengths and Needs (DSS-5229) depending on where each parent resides (one or more residences).</strong></td>
<td><strong>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:</strong></td>
</tr>
<tr>
<td><strong>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:</strong></td>
<td>• Face-to-face interviews with and/or observation of parents, caregivers, other household members, and children,</td>
</tr>
<tr>
<td>• 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;</td>
<td>• As well as pertinent collateral contacts.</td>
</tr>
<tr>
<td>• 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);</td>
<td><strong>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:</strong></td>
</tr>
<tr>
<td>• Document specific caretaker behavior that resulted in harm to the child(ren) or clarify the absence of risk of harm;</td>
<td>• 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;</td>
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CPS Assessments: Family & Investigative Assessments: Decision Making and Case Closure

- 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
- 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
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:
  - using domestic violence shelters or programs,
  - calling law enforcement,
  - utilizing court services for domestic violence protection orders,
**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?
- 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?

**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.

---

For a case finding of Substantiated and Closed, contact with the family should occur prior to the case decision to provide an explanation for 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.
### CPS Assessments: Family & Investigative Assessments: Decision Making and Case Closure

<table>
<thead>
<tr>
<th><strong>See Initial Contact in In-Home Services. The only exception to this requirement is for a case finding of Substantiated and Closed.</strong></th>
<th><strong>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.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>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.</strong></td>
<td></td>
</tr>
</tbody>
</table>
CPS Assessments: Family & Investigative Assessments: Case Closure Notifications

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<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 (DSS-5104) to the North Carolina Division of Social Services. For additional state policy and other information, see Chapter VIII: Section 1426 - Central Registry.</td>
</tr>
<tr>
<td>- The caretakers or parents alleged to have abused, neglected, and/or rendered the child dependent;</td>
<td></td>
</tr>
<tr>
<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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<tr>
<td>- Other parents as appropriate;</td>
<td></td>
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<tr>
<td>- Any agency in which the court has vested legal custody;</td>
<td></td>
</tr>
<tr>
<td>- The licensing authority as appropriate;</td>
<td></td>
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<tr>
<td>- RIL, if appropriate</td>
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<tr>
<td>- The Central Registry; and</td>
<td></td>
</tr>
<tr>
<td>- All reporters, including those who reported the same allegations and incidents after the initial report was accepted.</td>
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</tbody>
</table>

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.
### Protocol – What you must do

<table>
<thead>
<tr>
<th>CPS ASSESSMENTS INVOLVING MORE THAN ONE COUNTY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refer to <a href="#">Chapter V - Jurisdiction in Child Welfare</a> for information on CPS Assessments involving more than one county. An open CPS Assessment must not be transferred to another county.</td>
</tr>
</tbody>
</table>

Refer to Chapter VIII: [Section 1410 Conflict of Interest](#) of this manual for information on providing Child Welfare Services when there is a conflict of interest or a perceived conflict of interest.

<table>
<thead>
<tr>
<th>CPS ASSESSMENTS OF OUT-OF-HOME PLACEMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refer to <a href="#">Chapter V - Jurisdiction in Child Welfare</a> for information on CPS Assessments involving reports of abuse and/or neglect in out-of-home placements.</td>
</tr>
</tbody>
</table>

**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.

<table>
<thead>
<tr>
<th>MEDICAL NEGLECT OF INFANTS WITH LIFE THREATENING CONDITIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refer to <a href="#">Chapter VIII: Section 1438 - Investigative Assessments of Medical Neglect of Infants with Life Threatening Conditions</a>.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SUBSTANCE AFFECTED INFANTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refer to <a href="#">Chapter VIII: Section 1439 – Substance Affected Infants</a>.</td>
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</table>

<table>
<thead>
<tr>
<th>SAFE SURRENDER</th>
</tr>
</thead>
<tbody>
<tr>
<td>The CPS Assessment of a safely surrendered infant does not alter any of the requirements to complete a CPS Assessment.</td>
</tr>
</tbody>
</table>

Initiation on Safe Surrender cases

The assigned county child welfare agency must:

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.

<table>
<thead>
<tr>
<th>SAFE SURRENDER</th>
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<tbody>
<tr>
<td>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...</td>
</tr>
</tbody>
</table>
• 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.
## MRS Requirements

Adherence with the strategies of Multiple Response System (MRS) impacts CPS Assessments through:

- The ability to assign CPS Assessments to one of two tracks:
  - The Family Assessment, and
  - The Investigative Assessment.

- The requirement for collaboration between CPS and:
  - WorkFirst, and
  - Law Enforcement (LE).

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.

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### 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:
   - A child fatality when there are surviving children in the family;
   - A child in the custody of a county child welfare agency residing in a family foster home or residential facility;
   - 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;
   - The medical neglect of disabled infants with life threatening condition, pursuant to Public Law 98-457;
   - A child hospitalized (admitted to hospital) due to suspected abuse and/or neglect;
   - Abandonment (excludes Safe Surrender);
   - 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

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

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.

<table>
<thead>
<tr>
<th>SWITCHING APPROACH/TRACK</th>
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<tbody>
<tr>
<td>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.</td>
<td>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.</td>
</tr>
<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>
<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>
<tr>
<td>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.</td>
<td>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.</td>
</tr>
<tr>
<td>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.</td>
<td>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.</td>
</tr>
</tbody>
</table>

Revision Date: 06/15/18

Return to [CPS Family and Investigative Assessments TOC](#)  Return to [Manual TOC](#)
CPS Assessments: Family & Investigative Assessments: Family Assessment Approach

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial contact:</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>
</tr>
<tr>
<td>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>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>The county child welfare agency must contact the parent/caretaker to schedule the initial family contact. 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. (moved to Protocol from Guidance)</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>
<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>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 information the agency will use to make the case finding. If a family informs the county child welfare worker that it is their desire not to have the tools completed with them, the county child welfare worker should use their knowledge of the tools as a resource to refer to during the family assessment or while explaining the case finding. County child welfare workers should not force a family to have the tools completed in their presence.</td>
</tr>
<tr>
<td>For DV cases, refer to DV initiation protocol.</td>
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Revision Date: 02/12/18
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<tr>
<th>Family Assessment Case Findings:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• 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:</td>
</tr>
<tr>
<td>o 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;</td>
</tr>
<tr>
<td>o The child would not be safe if the family ever becomes non-compliant with services.</td>
</tr>
</tbody>
</table>

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
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.”

<table>
<thead>
<tr>
<th>Family Assessment Case Decision-Making</th>
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<tbody>
<tr>
<td>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.</td>
</tr>
</tbody>
</table>

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 “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
CPS Assessments: Family & Investigative Assessments: Family Assessment Approach

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 wellbeing 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:
  - 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 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 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 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.
CPS Assessments: Family & Investigative Assessments: Family Assessment Approach

<table>
<thead>
<tr>
<th>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.</th>
</tr>
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<tbody>
<tr>
<td>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”.</td>
</tr>
<tr>
<td>• 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.</td>
</tr>
<tr>
<td>• 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.</td>
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</tbody>
</table>

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

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.
### Protocol – What you must do

**Initiation**

The interviewing sequence in an investigative assessment is:
- All children living in the home;
- The non-perpetrating parent;
- The perpetrator; and then
- Collaterals

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:
- Individually; and
- 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](#).

### Guidance – How you should do it

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.

County child welfare workers should have another adult present when a full body assessment is necessary.

Coordination between law enforcement agencies and Child Protective Services for investigative assessments:
- Achieves joint efforts in interviewing and ensuring safety of families and children;
- Reduces the number of interviews children experience;
- Prevents or reduces the repeat traumatization of children;
- Holds perpetrators accountable for harming children;
- Ensures an effective working relationship; and
- Enhances the evidence process for criminal prosecution.

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.
**CPS Assessments: Family & Investigative Assessments:** Investigative Assessment Approach

### 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

This scenario should be a rare occurrence. County child welfare agencies are encouraged to consider if there are additional case activities that would help to identify a perpetrator before using this option.

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.
## CROSS FUNCTION TOPICS

### 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;
CROSS FUNCTION TOPICS

- 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 calendar 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.

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.
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## CROSS FUNCTION TOPICS: Intensive Family Preservation Services

### 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

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.

### Guidance – How you should do it

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.

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Return to [CPS Family and Investigative Assessments TOC](#)  Return to [In-Home Services TOC](#)
CROSS FUNCTION TOPICS: Safety

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<th>Policy</th>
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<tr>
<td>The primary concern of Child Welfare Services is protecting children.</td>
<td>Non-secure custody will only be granted when one or more criteria exist as</td>
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<tr>
<td>When a safety threat (present or impending) is identified, the county</td>
<td>specified in N.C.G.S. § 7B-503.</td>
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<tr>
<td>child welfare agency must respond and develop a plan of safety. At no</td>
<td>North Carolina statute N.C.G.S. § 7B-101 (19) defines a safe home as “a</td>
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<tr>
<td>time, should a county child welfare agency worker leave a child in</td>
<td>home in which the child is not at substantial risk of physical or emotional</td>
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<td>unsafe circumstances. The intent of safety planning is to reach an</td>
<td>abuse or neglect.”</td>
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<td>agreed upon plan with the family that imposes the lowest level of</td>
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<td>intrusiveness possible while assuring a child’s safety.</td>
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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 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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<td><strong>Assessing Safety</strong></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>The Safety Assessment DSS-5231 must be used during a CPS Assessment and establishes the safety threats for ongoing service needs. The assessment of safety is an ongoing process that starts at the time a case is accepted for a CPS Assessment and continues until case closure.</td>
<td><strong>Safety Planning</strong> 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><strong>Safety Planning</strong></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>An individualized safety agreement must be developed when a safety threat has been identified. The safety agreement/plan must be documented through:</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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<tr>
<td>• The Temporary Parental Safety Agreement developed with a CPS Safety Assessment or</td>
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<tr>
<td>• The safety agreement developed with a family during a CFT during the provision of CPS services (Assessments or In-Home).</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>
<td></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 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>
<tr>
<td>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:</td>
<td>4) Separation or restriction refers to the removal of any household member from the home for a period of time or otherwise interfering with a parent’s custodial rights. Separation is viewed as a temporary action. Separation may involve, among other things, the child temporarily moving to a safe environment; a friend or relative moving into the home; the protective parent moving with the child to a safe environment; a parent agreeing not to have unsupervised contact with the child; a parent agreeing to forfeit decision-making authority over the child; or the alleged perpetrator agreeing to leave the home.</td>
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<tr>
<td>• A Safety Agreement signed by the county child welfare supervisor or</td>
<td>At any time while a Safety Agreement is in place, the county child welfare agency may consider involving the court.</td>
</tr>
<tr>
<td>• Documentation that reflects the joint decision-making process between the county</td>
<td>A CFT meeting may be held at any time during a CPS involvement to address issues of safety planning.</td>
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<tr>
<td>child welfare worker and supervisor and the supervisor’s subsequent approval of the plan.</td>
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<td>A CFT meeting must be held when a safety threat exists and:</td>
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<td>• A Safety Agreement requiring separation or restriction is being proposed or</td>
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<td>• Non-secure custody is the only means necessary to ensure safety of the child.</td>
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<td>During this CFT meeting, other safety interventions, as well as, possible Temporary Safety</td>
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<td>Providers must be discussed.</td>
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<td>If a CFT cannot be held prior to making a Safety Agreement involving separation or</td>
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<td>restriction or filing a petition for non-secure custody, a CFT must be held as soon as</td>
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<td>possible.</td>
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<td>A Safety Agreement must be used when part of the environment must be controlled to</td>
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<td>determine whether there is sufficient evidence to support a case decision finding that the</td>
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<td>reported allegations of abuse, neglect, or dependency occurred. In some cases, it may</td>
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<td>involve one or more family members leaving the home or an agreement that certain family</td>
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<td>members will not have unsupervised contact with other family members.</td>
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<td>When a Safety Agreement involves separation or restriction, the county child welfare agency</td>
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<td>must complete an Initial Provider Assessment (DSS-5203) and have it approved by the county</td>
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<td>child welfare supervisor, prior to the child being in the care of the identified Temporary</td>
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<td>Safety Provider. See Temporary Safety Provider regarding ongoing monitoring.</td>
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### 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.
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| 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. | |}

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.
CROSS FUNCTION TOPICS: Risk and Use of Assessment Tools

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<td>The primary concern of Child Welfare Services is protecting children from maltreatment.</td>
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<tbody>
<tr>
<td>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.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Risk:</th>
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<tr>
<td>• Occurs on a continuum from mild to severe;</td>
</tr>
<tr>
<td>• Includes family situations and behaviors from onset progressing into seriously troubled;</td>
</tr>
<tr>
<td>• Applies to aspects of family life relevant to understanding the likelihood of maltreatment;</td>
</tr>
<tr>
<td>• Impacts child well-being and safety;</td>
</tr>
<tr>
<td>• Is based on an unlimited time frame (could occur any time in the future);</td>
</tr>
<tr>
<td>• Is associated with family functioning and behaviors that need to be managed or treated; and</td>
</tr>
<tr>
<td>• Requires a judgement about the negative effects on the child from future maltreatment.</td>
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</tbody>
</table>

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.

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<tr>
<th>Protocol – What you must do</th>
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<tr>
<td>MONITORING AND ASSESSING RISK Risk assessment is an ongoing process that starts at the time a case is accepted for a CPS Assessment and continues until case closure. County child welfare efforts must assess the risk and develop a plan to reduce the risk to an acceptable level with a focus on</td>
<td>When assessing risk, a county child welfare agency should consider:</td>
</tr>
</tbody>
</table>

  - 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

<table>
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<tbody>
<tr>
<td>maintaining the child(ren) in the family home.</td>
<td>• What is the impact of the potential risk on the child(ren);</td>
</tr>
<tr>
<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>
</tr>
<tr>
<td>ASSESSMENT TOOLS</td>
<td>• What is the timeframe within which the risk is likely to occur; and</td>
</tr>
<tr>
<td>The following assessment tools must be completed <strong>accurately and thoroughly</strong>, approved and signed within the timeframes indicated in the appropriate functional protocol:</td>
<td>• What is protective capacity of the parent(s)/caretaker(s) to address the identified risk.</td>
</tr>
<tr>
<td>• Safety Assessment DSS-5231 (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>
</tr>
<tr>
<td>• Risk Assessment DSS-5230 (Assessments),</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>
</tr>
<tr>
<td>• Risk Reassessment DSS-5230 (In-Home),</td>
<td>IMPACT ON CHILDREN</td>
</tr>
<tr>
<td>• Reunification Risk Assessment DSS-5227 (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>
</tr>
<tr>
<td>and the</td>
<td>• Bruising, burn, bites or broken bones from abuse or neglect;</td>
</tr>
<tr>
<td>• Family Strengths and Needs Assessment DSS-5229 (Assessments, In-Home, and Permanency Planning).</td>
<td>• Medical condition from lack of medical care; and/or</td>
</tr>
<tr>
<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>• Exposure to an unsafety condition, for example: young child running across busy street due to lack of supervision.</td>
</tr>
</tbody>
</table>

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 provide may indicate abuse or neglect:

- Changes in behavior, for example, a change in school performance, acting out or irrational behavior, or change in appetite;
- Difficulty focusing that cannot be attributed to physical or psychological causes;
- Hyperactive, inability to calm themselves;
- Hypervigilant, as if always concerned that something will happen;
- Anxiety, with symptoms that may include headaches, stomach aches, nightmares, inability to relax or sleep through the night;
- Overly compliant, passive or withdrawn;
- Demanding or aggressive;
- Reluctance to interact with or be around a specific adult;
**CROSS FUNCTION TOPICS: Risk and Use of Assessment Tools**

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<tr>
<th>Protocol – What you must do</th>
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<tr>
<td><strong>The tools must be:</strong></td>
<td><strong>•</strong> Attaches easily and quickly to strangers or new adults;</td>
</tr>
<tr>
<td>• Based on face-to-face interviews</td>
<td><strong>•</strong> Fear, stated or demonstrated (shrinks away from an adult);</td>
</tr>
<tr>
<td>with and/or observation of parents,</td>
<td><strong>•</strong> Abuses animals or pets;</td>
</tr>
<tr>
<td>caretakers, other household</td>
<td><strong>•</strong> Poor hygiene, lack of self-care;</td>
</tr>
<tr>
<td>members, and children,</td>
<td><strong>•</strong> Use of alcohol or drugs;</td>
</tr>
<tr>
<td>• Based on information gained</td>
<td><strong>•</strong> Runs away;</td>
</tr>
<tr>
<td>through collateral contacts,</td>
<td><strong>•</strong> Stealing or other juvenile involvement;</td>
</tr>
<tr>
<td>• Be reviewed and updated as</td>
<td><strong>•</strong> Depression;</td>
</tr>
<tr>
<td>necessary when new information is</td>
<td><strong>•</strong> Sudden knowledge about drugs or sexual activities;</td>
</tr>
<tr>
<td>received regarding safety and risk, and</td>
<td><strong>•</strong> Lack of follow up care for medical, mental health or other needs;</td>
</tr>
<tr>
<td>• Be signed by the case county child</td>
<td><strong>•</strong> Repeated incidents of hunger, tardiness, missed appointments or school absences;</td>
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<tr>
<td>welfare worker and case supervisor</td>
<td>or</td>
</tr>
<tr>
<td>to designate two-level review within</td>
<td><strong>•</strong> Delay in physical or emotional development.</td>
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<tr>
<td>time frames specified by each functional area.</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, place and space? (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?
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<td>advises you to consistently meet their own emotional needs via other adults, services.</td>
<td></td>
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<tr>
<td>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:</td>
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<tr>
<td>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.</td>
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<tr>
<td>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”?</td>
<td></td>
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<tr>
<td>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?</td>
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<tr>
<td>Does the parent/caretaker actively engage in a plan to protect the child from further harm? Is the plan workable?</td>
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<tr>
<td>Does the parent/caretaker demonstrate actions that are consistent with verbal intent or is it contradictory?</td>
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</table>

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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<tr>
<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.

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).
CROSS FUNCTION TOPICS: Collateral Contacts

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."

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<tr>
<td>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:</td>
<td>Professional Collateral Contacts</td>
</tr>
<tr>
<td>• 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.</td>
<td>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.</td>
</tr>
<tr>
<td>• Educational providers.</td>
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</tr>
<tr>
<td>• 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:</td>
<td>Non-professional Collateral Sources</td>
</tr>
<tr>
<td>o Extended family members,</td>
<td>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</td>
</tr>
<tr>
<td>o Friends,</td>
<td></td>
</tr>
<tr>
<td>o Community members,</td>
<td></td>
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<tr>
<td>o Faith community members.</td>
<td></td>
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<tr>
<td>• Reporters/Intake Form Collaterals.</td>
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</table>

The following case participants must be contacted but are not considered collateral contacts:

• Placement provider, including but not limited to:
  o Foster care provider, including residential providers
  o Kinship provider
  o Temporary Safety Provider

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### CROSS FUNCTION TOPICS: Collateral Contacts

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<tr>
<td><strong>Parents or caretakers, including non-residential parents</strong></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>
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</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.
## CROSS FUNCTION TOPICS: Diligent Efforts

### 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;

### Guidance – How you should do it

To locate a parent that is in prison, contact the [NC Department of Corrections](http://www.doc.state.nc.us/dop/index.htm) 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 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.
## 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.
## CROSS FUNCTION TOPICS: Filing a Petition

<table>
<thead>
<tr>
<th>Policy</th>
<th>Legal Basis</th>
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<tbody>
<tr>
<td>The agency must make reasonable efforts to protect the child(ren) in</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>
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<tr>
<td>their own home and to prevent placement.</td>
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<tr>
<td>A county child welfare agency must file a petition requesting</td>
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<td>adjudication of abuse, neglect, and/or dependency:</td>
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<td>• When safety related circumstances necessitate the need for</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>
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<td>circumstances necessitate the need for immediate removal;</td>
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<td>• Due to the family’s unwillingness to accept critically needed</td>
<td>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.”</td>
</tr>
<tr>
<td>services and those services are necessary to keep the family</td>
<td>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.</td>
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<tr>
<td>intact; or</td>
<td></td>
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<tr>
<td>• When despite agency efforts to provide services, the family has</td>
<td>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.</td>
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<td>made no progress towards providing adequate care for the child</td>
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<td>and those services are necessary to keep the family intact.</td>
<td>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.</td>
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<tr>
<td>For the 2nd and 3rd bullet above, the petition may be filed with or</td>
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<td>without requesting non-secure custody, depending on the</td>
<td>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</td>
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<tr>
<td>circumstances that exist in the family at the time.</td>
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</table>
CROSS FUNCTION TOPICS: Filing a Petition

| 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 Multiethic 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>
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<td>- Clearly state all the conditions that would invoke the court’s jurisdiction and</td>
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<td>- Contain sufficient information to make a legally valid case.</td>
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<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>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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**CROSS FUNCTION TOPICS: Filing a Petition**

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<tr>
<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.</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 be grounds for release of the juvenile);

County child welfare agencies are strongly encouraged to record the allegations of fact regarding the caretaker’s neglectful and/or abusive behavior along with allegations of fact of the harm this neglectful and/or abusive behavior has caused to the children. Both should be stated in a plain, concise, and objective manner. Petitions should also state the severity of harm and explain how the behavior of the caretaker has resulted in the children’s condition. The petition should also state the ability and willingness of the caretaker to adequately care for the child and, if appropriate, any services the parents

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Revision Date: 06/15/18

[Manual TOC](#)
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.
## CROSS FUNCTION TOPICS: Placement (or Placement Change) Preparation and Follow-Up

### Preparing Parents, Children and Placement Providers

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<td><strong>PREPARING PARENTS AND CHILDREN</strong></td>
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<tr>
<td>The parents must be appropriately prepared for placement of their children into agency custody by explaining:</td>
<td>Preparing children and parents for placement can be accomplished even when the removal is an emergency. County child welfare workers need to enlist the cooperation of the parent in helping the child understand the need for a new living arrangement. If the parent cannot do this, the county child welfare worker must take this role with the child. Even very young children can understand that a change is being made and that the parent cannot care properly for the child at this time.</td>
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<tr>
<td>• The reason for the removal;</td>
<td>It is generally helpful if the county child welfare worker can provide pictures of the placement provider when the child does not know the provider. This can be done on the way to the foster home and can help the child begin to master the move.</td>
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<td>• Appropriate details about the placement provider;</td>
<td>Young children have a different concept of time and they have vivid imaginations. In strange surroundings, they imagine that terrible things have happened to the parent or that they will never see members of the family again. The county child welfare worker is the child’s link to his family in the first few hours of the move.</td>
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<tr>
<td>• What to expect from the placement provider and county child welfare worker;</td>
<td>Through the eyes of the child, it is traumatic to be removed from parents and home. To be separated from siblings adds to the impact of loss and trauma. When siblings can 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 younger siblings may have looked to their older siblings for comfort and guidance.</td>
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<tr>
<td>• How to reach the county child welfare worker and/or agency;</td>
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<td>• When the next contact with the child will occur; and</td>
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<td>• The legal process.</td>
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The Understanding Foster Care – A Handbook for Parents ([DSS-5201](#)) must be provided to the parents.

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>PREPARING PLACEMENT PROVIDERS</td>
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<tr>
<td>The placement provider must be appropriately prepared for the placement by providing the following:</td>
<td>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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<td>• Necessary information regarding the child's educational needs; and</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>• Specific information regarding the child’s behaviors;</td>
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<td>• Any other strengths and needs of the child; and</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>• Any other information that will make the transition less traumatic for the child(ren).</td>
<td>• Any child injury or medical issue;</td>
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<tr>
<td>Placement providers must be provided county child welfare agency contact information.</td>
<td>• Any child significant behavioral 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 disclosure by the child regarding incidents of abuse and/or neglect;</td>
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<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 scheduled or canceled child appointments; and/or</td>
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<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.
### CROSS FUNCTION TOPICS: Placement (or Placement Change) Preparation and Follow-Up

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| Out of State placements must comply with the **Interstate Compact** on the Placement of Children (ICPC). County child welfare agencies must:  
  - 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;  
  - 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.) | child-specific alternative discipline plan for children in agency custody.  
  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. |

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) must be provided to the child’s current school. See DSS-5133ins.

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.
## CROSS FUNCTION TOPICS: Placement (or Placement Change) Preparation and Follow-Up

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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>Within 3 calendar days following out-of-home placement the county child welfare agency must:</td>
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<td>• Have face to face contact with the child to assess the child’s adjustment to the placement, or</td>
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<td>• Document diligent efforts and a plan to address these requirements.</td>
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The 3-day contact with a child(ren) is in addition to any contact or interaction with the child(ren) at time of placement.

Within 7 days the county child welfare agency must:

• Provide to the placement provider the Child Educational Status DSS-5245  
• Ensure a medical exam occurs for the child(ren), use Form DSS-5206,  
• 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  
• Document diligent efforts and the plan to address these requirements.

See [Permanency Planning](#) for additional After Placement requirements.

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Return to [In-Home Services TOC](#)  
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Policy

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.

Definitions

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.

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.

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.

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.

Guidance – How you should do it

INITIATING USE OF A SAFETY PROVIDER, TEMPORARY SAFETY PROVIDER OR KINSHIP PROVIDER

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:

- Background checks that includes:
  - Criminal check. A review of ACIS for any criminal charges or convictions in North Carolina through the AOC data base or equivalent;

Critical information for the relative or kin considering taking the child into their home is the potential for
### CROSS FUNCTION TOPICS: Temporary Safety Providers & Kinship Providers

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<tr>
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<tr>
<td>- Check of Civil Case Processing System (VCAP) for civil actions such as domestic violence protective orders; and</td>
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<tr>
<td>- Review of county child welfare agency records and RIL records;</td>
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<tr>
<td>- Initial Provider Assessment, <a href="#">DSS-5203</a>, 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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</table>

**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.

In some cases, the county child welfare agency may file a petition for abuse or neglect and obtain a non-secure custody order. At the adjudication/disposition, the county child welfare agency may recommend custody be awarded to the relative or kinship caregiver. Adoption Assistance later would be an option because the child was in the custody of a county child welfare agency, though briefly.

At the first conversations with relatives or kin about having the child placed with them, either by the parent with county child welfare involvement, or by the county child welfare agency through court order, all options must be explained. This should occur throughout the case when changes in the planning occur.
### CROSS FUNCTION TOPICS: Temporary Safety Providers & Kinship Providers

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<tbody>
<tr>
<td>• A Temporary Safety Provider moving into the family home to supervise parental contact.</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>
</tr>
</tbody>
</table>

The Temporary Safety Provider must be someone that both parents and the county child welfare worker agree will safely care for the child.

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.

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.

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 [Initiating Use of Safety Provider](#).

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.

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.

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.

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.

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.

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.
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.

### 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
## CROSS FUNCTION TOPICS: Temporary Safety Providers & Kinship Providers

### Protocol – What you must do
- 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.

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.

### Guidance – How you should do it

**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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| 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. | 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](#).

### USE OF KINSHIP PROVIDERS
Providing all information to a kinship providers 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.

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.

### 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.

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Revision Date: 06/15/18

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### CROSS FUNCTION TOPICS: Temporary Safety Providers & Kinship Providers

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</table>
| **SERVICES FOR SAFETY PROVIDERS, TEMPORARY SAFETY PROVIDERS OR KINSHIP PROVIDERS**
For all safety providers, services must be identified and provided to assure that the safety provider can meet the child’s needs.

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.

| **SERVICES FOR TEMPORARY SAFETY PROVIDERS OR KINSHIP PROVIDERS**
Agency staff should help the safety provider locate and develop support and resources needed in caring for the child.

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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Return to [CPS Family and Investigative Assessments TOC](#)

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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.

Definition

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.

While victims and families may experience and be affected by domestic violence in different ways, there are still core aspects of

Legal Basis

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.
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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<tr>
<td>INTERACTION WITH NON-OFFENDING PARENT/CARETAKER</td>
<td>Each parent or caretaker is only responsible for their own actions to provide safe, nurturing care for their children.</td>
</tr>
<tr>
<td>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.</td>
<td>INTERACTION WITH NON-OFFENDING PARENT/CARETAKER</td>
</tr>
<tr>
<td>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.</td>
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<tr>
<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. The presence of relatives or friends may also affect disclosure and safety.</td>
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<td>Information concerning resources and referrals to services should immediately be given to the non-offending parent/adult victim and children (as appropriate).</td>
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<td>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.</td>
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**CROSS FUNCTION TOPICS:** Domestic Violence

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<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>
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<tr>
<td>• Safety planning with the non-offending parent/adult victim and</td>
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<td>• Assisting in the development of service agreements.</td>
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<tr>
<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>
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<tr>
<td>To develop and monitor a coordinated services plan for every case with domestic violence, the county child welfare worker should:</td>
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<td>• Seek out and utilize the consultation of a domestic violence expert throughout the life of the case.</td>
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<tr>
<td>• Communicate with a domestic violence perpetrator’s probation or parole officer regarding any current abuse.</td>
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<tr>
<td>• Reach out and make connections with school social workers and teachers to gain information about the child’s day-to-day functioning.</td>
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<tr>
<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>
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**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.

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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| **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. | **INTERACTION WITH THE 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.

Interaction with the alleged perpetrator of domestic violence provides 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 interaction with the perpetrator, the county child welfare worker should:

- 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 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.
## CROSS FUNCTION TOPICS: Domestic Violence

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<td>COLLATERAL CONTACTS</td>
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<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>• Collateral contacts being unaware of the occurrence of violence does not mean that it is not happening.</td>
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### Forms
- 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)
CROSS FUNCTION TOPICS: Child Well-Being

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<tr>
<td>CHILD WELL-BEING</td>
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</table>
| All child well-being needs or any lack of medical, dental, mental health or other care of the child must be:  
  - Assessed during the provision of all child welfare services,  
  - Addressed by the child welfare agency or through service referrals,  
  - Reviewed during development and review of Family Services Agreements, and  
  - Documented (all the above). | Assessment of and identification of child well-being needs is an important aspect of child welfare services. |

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;
### CROSS FUNCTION TOPICS: Child Well-Being

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<td>• Early intervention services;</td>
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<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>
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<tr>
<td>• How the educational needs of the child have been included in the case planning.</td>
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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.
## CROSS FUNCTION TOPICS: Child Well-Being

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
<th>Guidance – How you should do it</th>
</tr>
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<tbody>
<tr>
<td><strong>Early Intervention</strong></td>
<td><strong>Early Intervention</strong></td>
</tr>
<tr>
<td>A referral must be made to the local Children's Developmental Services Agency (CDSA) for early intervention:</td>
<td>Whenever a county child welfare worker or a parent expresses concern about how a child’s development, CDSA can be contacted for consultation.</td>
</tr>
<tr>
<td>- There is the appearance or presence of any of the North Carolina Infant Toddler Program eligibility conditions of “Established Conditions” or “Developmental Delay”, or</td>
<td>Definition for “Established Conditions” or “Developmental Delay” can be found at <a href="http://www.ncei.org/">http://www.ncei.org/</a>.</td>
</tr>
<tr>
<td>- There is the likelihood that a child has a mild developmental delay in the areas of:</td>
<td>Use the DSS Referral Form for Early Intervention Services (CDSA) (DSS-5238).</td>
</tr>
<tr>
<td>- Cognitive Development;</td>
<td>Parental consent is not required to make this referral.</td>
</tr>
<tr>
<td>- Physical Development, including fine and gross motor function;</td>
<td>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.</td>
</tr>
<tr>
<td>- Communication Development;</td>
<td></td>
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<tr>
<td>- Social-Emotional Development; or</td>
<td></td>
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<tr>
<td>- Adaptive Development.</td>
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</tbody>
</table>

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.

[Return to CPS Family and Investigative Assessments TOC](#)

[Return to In-Home Services TOC](#)

[Return to Permanency Planning TOC](#)

[Return to Cross Function TOC](#)
## Purpose
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:

- Reach agreement on which identified child welfare issues will be addressed and how they will be addressed throughout the life of the case;
- 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
- Plan for how all participants will take part in, support, and implement the Family Service Agreement or safety plan developed by the team.

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.

## Definition
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:

- A clear but open-ended purpose;
- An opportunity for the family to be involved in decision-making and planning;
- Options for the family to consider and decisions for the family to make;
- The family’s involvement in the development of specific safety or permanent plans and in the development of services and supports; and
- The outcome of the meeting will be reflected in the development or revision of a Family Services Agreement or a safety plan.

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

<table>
<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>
<tr>
<td>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.</td>
<td>• Involved professional providers</td>
</tr>
<tr>
<td>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.</td>
<td>• Relatives</td>
</tr>
<tr>
<td>A facilitator, who is neither the county child welfare worker for the family nor the supervisor of that</td>
<td>• Safety Providers</td>
</tr>
</tbody>
</table>

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.|

• The child(ren) and youth’s own wishes.
CROSS FUNCTION TOPICS: Child and Family Team (CFT) Meetings

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:

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.
CROSS FUNCTION TOPICS: Child and Family Team (CFT) Meetings

<table>
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<th>Protocol - What Must Occur</th>
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</table>
|                           | 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:  
  • Have there been any threats of harm, use of weapons, escalation or increase in frequency of the threats or conflict, or criminal involvement?  
  • Is there a history of mental illness?  
  • Is there a history of substance abuse? |
|                           | 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. |
|                           | c) Where there is a history of violence or a concern for potential violence, consider, but don’t limit considerations to:  
  • Choose a safe, neutral location;  
  • Have support people or mentors for threatened or potentially volatile family members;  
  • Have some members participate through pre-meeting interviews, written statements, or conference calls;  
  • Arrange for a private check-in after the meeting with any vulnerable participants;  
  • 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  
  • Arrange for the presence of security and/or law enforcement. |
CROSS FUNCTION TOPICS: Parent Engagement and Needs Assessment

Policy

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 than 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>
</tr>
<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
“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

“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

<table>
<thead>
<tr>
<th>Protocol</th>
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</table>
| **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

**PARENT ENGAGEMENT**  
Successfully involving parents in case planning may be the most critical component in child welfare practice. When parents are engaged, and have a significant role in case planning, they are more motivated to actively commit to achieving the case plan. Engaged parents are more likely to recognize and agree with the identified needs and problems to be resolved, perceive goals as relevant and attainable, and be satisfied with the planning and decision-making process. Following are reminders regarding the principles and beliefs of NC CW (when manual revisions are complete, these will be links) that support parent engagement.  
**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.
the Family Services Agreement identifies services that are appropriate to address family needs.

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:
  o Household physical and environmental conditions,
  o Household routines, and
  o Transportation availability.

These assessments can be formal or informal but must be documented in the case file.

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.
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.

<table>
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<tr>
<th>CROSS FUNCTION TOPICS: Parent Engagement &amp; Needs Assessments</th>
</tr>
</thead>
<tbody>
<tr>
<td>The following county child welfare agency worker behaviors support a collaborative relationship and increased family engagement:</td>
</tr>
<tr>
<td>• Listening to and addressing issues that concern the family;</td>
</tr>
<tr>
<td>• Having honest discussions about the agency’s authority and how it may be used (required by CAPTA);</td>
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<tr>
<td>• Sharing openly with family members what to expect, particularly regarding court and timelines;</td>
</tr>
<tr>
<td>• Balancing discussions of problems and needs with the identification of strengths and resources;</td>
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<tr>
<td>• Incorporating the family’s terminology regarding needs (rather than the caseworker’s words);</td>
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<tr>
<td>• Setting goals that are mutually agreed upon and when possible primarily created by the family and stated in their words;</td>
</tr>
<tr>
<td>• Focusing on improving family members’ skills rather than providing insights;</td>
</tr>
<tr>
<td>• Providing family members with choices whenever possible;</td>
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<tr>
<td>• Getting a commitment from family members that they will engage in mutually identified tasks;</td>
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<tr>
<td>• Spending time with the family discussing goals and progress; and</td>
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<tr>
<td>• Recognizing and praising progress.</td>
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</tbody>
</table>

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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<tr>
<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.).

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.

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

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 arise. It is the role of the child welfare agency to...
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.
### Multiethnic Placement Act

<table>
<thead>
<tr>
<th>Policy and Definitions</th>
<th>Legal Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MEPA</strong>&lt;br&gt;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. 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><strong>MEPA</strong>&lt;br&gt;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. 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>
</tr>
</tbody>
</table>

### Protocol – What you must do

**MEPA Placement Requirements (Initial and Placement Changes)**<br>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.
CROSS FUNCTION TOPICS: SPECIAL LEGAL CONSIDERATIONS (MEPA, ICWA, Mexican Heritage)

- Agencies should enhance their ability to reach various populations by developing partnerships with groups from the communities from which foster children come “to help identify and support potential foster and adoptive families and to conduct activities which make the waiting children more visible.”

To comply with MEPA’s “diligent efforts requirements,” each county’s recruitment plan must include the above-listed features. In addition, each plan must also include the following information:

- A description of the characteristics of foster and adoptive children in the custody of the agency (e.g. age, race, time in care, special needs, etc.);
- Specific strategies to reach all parts of the community (as reflected in the demographics of the foster care population);
- Diverse methods of disseminating general and child specific information;
- Strategies for assuring that all prospective parents have equitable access to the preparation and selection process and the location and hours of services that facilitate access by all members of the community;
- Strategies for training foster and adoptive staff in cultural, racial and economic diversity and dealing with linguistic barriers;
- Assurance of non-discrimination in any fee structures;
- Procedures for ensuring a timely search for prospective parents for a waiting child, including the use of exchanges and other inter-agency efforts, provided that such procedures ensure that placement of a child in an appropriate household is not delayed by the search for a same race or ethnic placement; and
- Assurance that the agency does not use any “arbitrary or unnecessary” standards (such as those related to age, income, education, or housing situation) which exclude groups of prospective parents on the basis of race, color, or national origin.

Indian Child Welfare Act of 1978

<table>
<thead>
<tr>
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<tr>
<td>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...</td>
<td>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.</td>
</tr>
</tbody>
</table>
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.

### Definitions

| **Indian** | 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 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. | 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** | 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 |
| 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. | 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 Tribe** | 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 |
| 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.
### CROSS FUNCTION TOPICS: SPECIAL LEGAL CONSIDERATIONS (MEPA, ICWA, Mexican Heritage)

**Indian Child Welfare Act of 1978**

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<td><strong>American Indian Child / ICWA</strong></td>
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</tr>
<tr>
<td>Throughout the provision of child welfare services, including child protective services, agencies must complete the Indian Child Welfare Act Compliance Checklist (<a href="#">DSS-5291</a>) whenever a family member indicates any American Indian heritage.</td>
<td>Having knowledge of a child’s American Indian tribe membership, whether a state recognized or federally recognized tribe, is important for assurance of culturally competent practice, as well as for possible future placement planning.</td>
</tr>
<tr>
<td>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.</td>
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<tr>
<td>- <strong><a href="#">DSS-5335</a></strong> - completed with a parent/caretaker who has indicated that he/she has heritage in an American Indian tribe.</td>
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<tr>
<td>- <strong><a href="#">DSS-5336</a></strong> – 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.</td>
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</tbody>
</table>

### 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.
**CROSS FUNCTION TOPICS: SPECIAL LEGAL CONSIDERATIONS (MEPA, ICWA, Mexican Heritage)**

- 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](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.

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
**CROSS FUNCTION TOPICS: SPECIAL LEGAL CONSIDERATIONS (MEPA, ICWA, Mexican Heritage)**

- **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.**

- **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.

Revision Date: 06/15/18
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.
CPS Assessments: Family & Investigative Assessments: 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.

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<tr>
<td>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:</td>
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<tr>
<td>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.</td>
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<tr>
<td>- Facts – what, when, where, etc.</td>
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<tr>
<td>- Information obtained from professionals – medical, educational, mental health information</td>
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<tr>
<td>- Family background – CPS history, criminal history, other service history</td>
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<tr>
<td>- Assessments</td>
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<tr>
<td>- Observations</td>
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<tr>
<td>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.</td>
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</tbody>
</table>
| 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,
### Protocol – What you must do

- **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
- **Progress** – what changes have occurred, what has a family accomplished, what services were effective
- **Decisions and/or Findings**
- **Summaries** (for case transfer or case closing)

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.

### Guidance – How you should do it

- assessment or decision making, and planning or next steps) and what those narrative types should include.

#### OBJECTIVE NARRATIVE

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:

- **Who** (who participated)? Include the social worker, all family members, all professionals, family supports, and others who were a part of the action
- **Why**? What is the purpose of the action, what need or concern will be addressed during the action, why must the action occur
- **Where**? What was the location of the action
- **How**? For interactions, state if the contact was by telephone, face to face, in a meeting, etc.
- **When**? What was the date and other pertinent information regarding time of action
- **What** (what occurred)? Describe what occurred, to include, but not limited to:
  - The interaction witnessed between participants,
  - Capture statements word for word when appropriate,
  - Describe the body language,
  - Describe observed behaviors, reactions, and conditions (including tone of voice),
  - Include diagnosis, treatment recommendation, or outcome from meeting or appointment,
  - Describe each service task provided.

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.

Objective Narrative is typically what will be used for ongoing activities, to include but not limited to:

- Home, school, office or community visits,
- Email or telephone contacts,
- Staffing with supervisor,
- Case meetings (treatment or family meetings),
- Court hearings,
- File review,
- Completing referrals or NC child welfare forms.
**CPS Assessments: Family & Investigative Assessments: Documentation**

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</thead>
<tbody>
<tr>
<td>Documentation, including narrative, must be current within 7 days of every activity or action.</td>
<td>Example Home Visit Documentation</td>
</tr>
<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.</td>
</tr>
<tr>
<td><strong>DOCUMENTATION OF DECISIONS</strong></td>
<td>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>
</tr>
<tr>
<td>The case narrative regarding any case decision must concisely articulate:</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>• What decisions were made,</td>
<td>• Monthly In-Home Services Contact Record</td>
</tr>
<tr>
<td>• Who was involved in the decision making,</td>
<td>• Monthly Permanency Planning Contact Record</td>
</tr>
<tr>
<td>• What information, condition, or factors the decision was based on, and</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>• The basis for all decisions.</td>
<td><strong>SUBJECTIVE NARRATIVE</strong></td>
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<td>if this information is not captured on another document (or NC DSS form).</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>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>• Describe how you feel when this occurs.</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 on a form or other documentation.</td>
<td>• How often does this happen or how long has this been going on?</td>
</tr>
<tr>
<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></td>
<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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</table>
# CPS Assessments: Family & Investigative Assessments: Documentation

<table>
<thead>
<tr>
<th>Protocol – What you must do</th>
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<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>the social worker to identify jointly with family members ideas to address concerns and strengths to build upon.</td>
</tr>
</tbody>
</table>

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.

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.

## 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
- Permanency Planning Review part of the DSS-5240 form
### Protocol – What you must do

- Child and Family Team Safety Planning form (pre-petition form)
- Case decision portion of the Assessment Documentation tool, DSS-5010

Model Court Report forms provide a template for reporting recommendations, based on child welfare decisions, to the court.

### Guidance – How you should do it

**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,
- Status of family service agreements or safety plans,
### CPS Assessments: Family & Investigative Assessments: Documentation

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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).

Return to [CPS Family and Investigative Assessments TOC](#) Return to [In-Home Services TOC](#)

Return to [Permanency Planning TOC](#) Return to [Cross Function TOC](#)

**END OF CROSS FUNCTION TOPICS**