



Administrative Policies and Procedures: 14.26

Subject:	Multiple Response Assessment Track
Authority:	TCA 37-1-102 ; 37-1-131; 37-1-132; 37-1-168; 37-1-169; 37-5-105; 37-5-106; 37-5-601, et Seq.
Standards:	COA: CPS 4.05; DCS Practice Model Standards: 12-300; 12-301
Application:	To All Department of Children's Services Assessment Services and Family Crisis Intervention Program Services Employees
Policy Statement:	
Upon determination that a case meets criteria for the Multiple Response System Assessment Track, the Department of Children Services working with other public agencies, or community-based private agencies, which may include faith-based organizations shall offer needed services to children and families for meeting the needs of the family as appropriate.	
Purpose:	
To safeguard and enhance the welfare of children and to preserve family life, prevent harm and <u>abuse</u> to children by strengthening the ability of families to parent their children effectively through the multiple response system using available community-based public and private services.	
Procedures:	
A. Screening and assignment	<p>1. Response Priorities are defined as:</p> <p>a) Priority-1 (P-1): Within twenty-four (24) hours or immediately at the supervisor's discretion. Investigations assigned this priority must be initiated by a face-to-face contact with the victim(s) no later than twenty-four (24) hours but <u>immediately</u> if the supervisor deems an immediate response is necessary. Priority 1 reports allege that children may be in imminent danger.</p> <p>b) Priority-2 (P-2): Forty-eight (48) hours: Investigations/assessments assigned this priority must be initiated by face-to-face contact with the victim within forty-eight (48) hours. <u>Priority-2 reports allege injuries or risk of injuries that are not imminent or life threatening or do not require immediate medical care</u> where a forty-eight (48) hour delay will not compromise the investigative effort or reduce the chances for identifying the level of risk to the child.</p> <p>c) Priority-3 (P-3): Three (3) business days: investigations/assessments given this priority must be initiated by face-to-face contact with the victim within three (3) business days. <u>Priority-3 are reports that allege situations/incidents considered to pose low risk of harm</u> to the child</p>

	<p>where three (3) business days will not compromise the investigative effort or reduce the chances for identifying the level of risk to the child.</p> <p>d) Refer to <u>Priority Response Definitions/Examples</u> for a listing of allegations of harm listed under each response priority.</p> <p>2. The Child Protective Services Assessment (CPSA) worker will follow Sections A, B, and D of DCS policy <u>14.5, Child Protective Services Planning, Initiation and Assessment of Safety and Protection</u> for initiating good faith attempts.</p> <p>3. Contact by telephone with family to schedule appointment is preferred. However, child safety should never be jeopardized and should always be considered first.</p> <p>4. Each region must work with local juvenile court judges to establish local protocols to notify juvenile court of every child abuse and neglect referral.</p> <p>5. All requirements for local procedures or protocols will be documented on form <i>CS-0251 Local Administrative Procedures and Instructions</i>.</p>
<p>B. Initial Assessment</p>	<p>1. Initial Assessment (First 30 days):</p> <p>a) A Family Services Team Meeting (FSTM) must be held by the 30th day from the date of referral if services are needed¹. Participants at the FSTM should include case worker, family and the family support team. Complete <i>Family Permanency Plan</i>.</p> <p>b) Complete appropriate Structured Decision Making (SDM) and assessment tools.</p> <p>c) FAST will be completed thirty (30) days from date of referral if services are needed. (Refer to DCS <i>FAST Case Protocol</i>.)</p> <p>d) Ensure all required forms are completed and documents are reviewed with family/client as applicable. (See list of required forms and documents in the <i>Forms and Collateral Documents</i> sections of this policy.)</p> <p>e) If a child comes into DCS <u>custody</u> prior to thirty (30) days from date of referral, CPS will initiate a Family Functional Assessment within five (5) business days.</p> <p>f) When it appears that the case is moving toward a removal the CPS worker will initiate a <i>Child and Adolescent Needs and Strengths (CANS)</i> assessment prior to the potential removal CFTM.</p> <p>g) Multiple Response System Assessment cases must be classified by thirty (30) days from date of referral. Review DCS policy <u>14.7 Classification of a Child Protective Services Case</u> for general task requirements.</p>

¹ Note: Additional FSTM's may be held at any point during the life of the case as circumstances dictate.

	<p>2. No Services Needed</p> <ul style="list-style-type: none"> a) Cases must be classified as no services needed by thirty (30) days from date of referral. b) One (1) visit must be in the home. Each parent/caretaker(s) significant other and sibling(s) residing in the home must be seen before the determination not to provide services is made. c) Additional Face-to-Face contact with the alleged child victim is required at case closure if the child has not been seen within the last ten (10) business days. The TL may waive this requirement after reviewing and declaring that there are no safety/risk concerns and CPS is no longer warranted. The TL will document the reason for the waiver in TFACTS. d) SDM forms, CS-0740, CPS Investigation Summary and Classification Decision of Child Abuse/Neglect Referral, and all documentation will be entered in TFACTS as appropriate. e) Each region must work with local juvenile court judges to establish written local protocols to notify juvenile court with a summary of the results of every child abuse and neglect case. <p>3. Refer to <u>A Case Workers Guide to Opening and Transitioning Cases</u> that outlines the time frames/documentation and pertinent information required to be met by the FSW or applicable staff serving the family.</p>
<p>C. Assessment tasks</p>	<p>Assessment tasks are only required for cases that are classified as “<i>Services Recommended</i>” or “<i>Services Required</i>” where DCS is purchasing the services. Cases may be closed if DCS is not purchasing the services or is not required to monitor the service provision. If services are needed after day thirty (30) from the referral date, an FSTM must be held upon identification of services. Create/revise a Family Permanency Plan.</p> <p>1. Family Willing to Accept Services (<u>RECOMMENDED</u>) Day 30 thru 60</p> <ul style="list-style-type: none"> a) There must be a minimum of two (2) face-to-face contacts per month with the victim. At least one (1) visit must be in the home. Each parent/ caretaker(s) significant other and sibling(s) residing in the home must be seen at least one (1) time per month. b) Upon initiation of services, CPS will make contact with service providers every other week. Contact may be by telephone, e-mail or face-to-face. <p>2. Services provided beyond sixty (60) days</p> <ul style="list-style-type: none"> a) A FSTM must be held by sixty (60) days from date of referral to evaluate the Family Permanency Plan progress, determine continued need for services or to close case. Participants at the FSTM should include case worker, family and the family support team. Complete a new/revise Family Permanency Plan. b) There must be a minimum of one (1) face-to-face contact in the home per month with the victim/family. Each victim, parent/caretaker(s) significant other and sibling(s) residing in the home must be seen at least one (1) time per month.

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

3. Case Transition

- a) If need for services will continue beyond one hundred twenty (120) calendar days, CPS will convene a FSTM with FSW and FSTL to transition to FSW. A FSTM will be convened ten (10) days prior to the one hundred twenty (120) day closure. CPS will provide copy of CPS file to FSW.
- b) A CFTM must be held prior to filing a petition for state custody to explore all options, unless it is an emergency. The CFTM must be held prior to the seventy-two (72) hour preliminary hearing when an emergency removal has taken place. Each region must establish a written local protocol to consult MSW's in the removal process. Team Coordinator (TC) and DCS Regional Legal Counsel must approve decision to petition for custody. Team Leader (TL) must attend CFTM. (Refer to DCS policy [31.7, Building, Preparing and Maintaining Child and Family Teams](#)).

4. Case Closure

- a) SDM forms, **CS-0740, CPS Investigation Summary and Classification Decision of Child Abuse/Neglect Referral**, and all documentation will be entered in **TFACTS**, as appropriate.
- b) If services are no longer needed, case may be closed at any time.
- c) Additional Face-to-Face contact with the alleged child victim is required at case closure if the child has not been seen within the last ten (10) business days. The TL may waive this requirement after reviewing and declaring that there are no safety/risk concerns and CPS is no longer warranted. The TL will document the reason for the waiver in TFACTS.
- d) In accordance with *TCA 37-5-604* (d), if the family does not cooperate with the provision of community-based public or private services or provide alternative services of its own to meet such needs, then the department will assess whether further steps should be taken to assess needed services. If a family that declines services that are offered to them and does not provide adequate alternative services of its own, the department will inform the parents that their actions in declining services may be considered in future action by the department. All documentation will be entered in **TFACTS**.
- e) Each region must work with local juvenile court judges to establish written local protocols to notify juvenile court with a summary of the results of every child abuse and neglect case.

5. Family Willing to Accept Services (REQUIRED) Day 30 – 60

- a) There must be a minimum of two (2) face-to-face contacts per month with the victim beginning thirty (30) days from date of referral. At least one (1) visit must be in the home. Each parent/caretaker(s) significant other and sibling(s) residing in the home must be seen at least one (1) time per month.
- b) Upon initiation of services, CPS will make contact with service providers

every other week for the life of the case. Contact may be made by telephone, e-mail or face-to-face.

6. Services provided beyond sixty (60) days

- a) The FSTM must be held by sixty (60) days after date of referral to evaluate the **Family Permanency Plan** progress, determine continued need for services or to close case. Participants will include case worker, team leader, family and the family support team. Complete new/revised **Family Permanency Plan**.
- b) There must be a minimum of two (2) face-to-face contacts per month with the victim. At least one (1) visit must be in the home. Each parent/ caretaker(s) significant other and sibling(s) residing in the home must be seen at least one (1) time per month.
- c) Upon initiation of services, CPS will make contact with service providers every other week for the life of the case. Contact can be by telephone, email, or face-to-face.

7. Case Transition

- a) If need for services will continue beyond one hundred twenty (120) calendar days, CPS will convene a FSTM with FSW and FSTL to transition to FSW. An FSTM will be convened ten (10) days prior to the one-hundred twenty (120) day closure. The FSW will write a new **Family Permanency Plan** with input from all FSTM participants. CPS will provide a copy of CPS file to the FSW.
- b) A CFTM must be held prior to filing a petition for state custody to explore all options, unless it is an emergency. The CFTM must be held prior to the seventy-two (72) hour preliminary hearing when an emergency removal has taken place. Each region must establish a written local protocol to consult MSW's in the removal process. Team Coordinator (TC) and DCS Regional Legal Counsel must approve decision to petition for custody. Team Leader (TL) must attend CFTM. (Refer to DCS policy [31.7, Building, Preparing and Maintaining Child and Family Teams](#)).
- c) The CFTM case transition meeting will be documented in the case conference section of **TFACTS**.

8. Case Closure

- a) Structured Decision Making (SDM) assessment forms, **CS-0740, CPS Investigation Summary and Classification Decision of Child Abuse/Neglect Referral**, and all documentation will be entered into **TFACTS** and completed, as appropriate.
- b) If services are no longer needed, case may be closed at any time.
- c) Additional Face-to-Face contact with the alleged child victim is required at case closure if the child has not been seen within the last ten (10) business days. The TL may waive this requirement after reviewing and declaring that there are no safety/risk concerns and CPS is no longer warranted. The TL will document the reason for the waiver in **TFACTS**.
- d) Each region must work with local juvenile court judges to establish written local protocols to notify juvenile court with a summary of the

	<p>results of every child abuse and neglect case.</p> <p>9. Family Not Willing to Accept Services (Required)</p> <ul style="list-style-type: none"> a) Case worker and Team Leader will consult to determine whether risk/safety factors exist. b) If Court does not order services, the case will be closed after consultation with Legal Counsel and TC for other options. Document in TFACTS. c) If court does order services, there must be a minimum of two (2) face-to-face contacts per month with the victim from date of court order. At least one (1) visit must be in the home. Each parent/caretaker(s) significant other and sibling(s) residing in the home must be seen at least one (1) time per month. d) Upon initiation of services, CPS will make contact with service providers every other week for the life of the case. Contact can be by telephone, email, or face-to-face.
<p>D. Investigation referral on Open Assessment cases</p>	<ul style="list-style-type: none"> 1. If the CPS Assessor (CPSA) becomes aware of any child abuse not already being addressed by the CPSA, he/she will consult with the Supervisor to determine if there is a need to make a referral to Central Intake. If the issue that the CPSA is already addressing escalates, but does not warrant an investigation, the CPSA will consult with the Supervisor and continue to work with the case. 2. If during the assessment case, an investigation referral on the family comes from Central Intake, CPS workers and the Supervisors may choose for the CPSA to collaborate and/or accompany the CPSI while the investigation is being conducted. 3. If the investigation allegations are unfounded, the investigation case will be closed and the CPSA will be notified of the outcome, and will resume with CPSA role. 4. If the investigation determines a need for additional services, the investigator will convene a FSTM and will initiate services. Participants at the FSTM should include the family, family support team, both CPSI and CPSA and their Supervisors. A revised Family Permanency Plan is completed to address added services. CPSA resumes role and follow up with additional provided services. 5. A CFTM must be held prior to filing a petition for state custody to explore all options, unless it is an emergency. The CFTM must be held prior to the seventy-two (72) hour preliminary hearing when an emergency removal has taken place. Each region must establish a written local protocol to consult MSW's in the removal process. Team Coordinator (TC) and DCS Regional Legal Counsel must approve decision to petition for custody. Team Leader (TL) must attend CFTM. (Refer to DCS policy 31.7, Building, Preparing and Maintaining Child and Family Teams).
<p>E. Assessment referral received on</p>	<ul style="list-style-type: none"> 1. If multiple reports with additional assessment allegations are received on an open case within thirty (30) days of the initial report, these multiple reports may

<p>open cases</p>	<p>be linked to the open case.</p> <p>2. If during an investigation, an assessment referral on the family is received from Central Intake, the CPS investigator will consult with the Supervisor and address the additional concerns while continuing to conduct the investigation.</p>
<p>F. CPS referral on open non-CPS cases</p>	<p>1. If the issue that the FSW is already working on escalates, the FSW will consult with the FSTL and continue to work with the case. If the FSW becomes aware of any child abuse not already being addressed by the FSW that warrants a CPS referral, the FSW will make a referral to Central Intake.</p> <p>2. If during the FSW case, a CPS referral on the family comes from Central Intake, the FSW, CPS worker and their Supervisors may:</p> <p>a) Determine if the referral contains no new allegations or the concerns can be addressed by the FSW, and referral is sent back to Central Intake by CPS with a detailed explanation requesting a screen out; OR</p> <p>b) Choose for the FSW to collaborate and/or accompany the CPS worker while the investigation/assessment is being conducted. The FSW case is kept open and the FSW will resume upon CPS completion. FSW will follow up with additional services.</p> <p>3. If the allegations are unfounded or no services are needed, the CPS case will be closed and the FSW worker will be notified of the outcome, and will resume delivery of service.</p> <p>4. If allegations are indicated or classified as services needed, the CPS worker will convene a FSTM including the family, family support team, FSW, along with CPS and FSW TL's. A Family Permanency Plan will be completed by the FSW worker with input from CPS. The Family Permanency Plan will be worked within the requirements of the FSW case.</p> <p>5. A CFTM must be held prior to filing a petition for state custody to explore all options, unless it is an emergency. The CFTM must be held prior to the seventy-two (72) hour preliminary hearing when an emergency removal has taken place. Each region must establish a written local protocol to consult MSW's in the removal process. Team Coordinator (TC) and DCS Regional Legal Counsel must approve decision to petition for custody. Team Leader (TL) must attend CFTM. (Refer to DCS policy 31.7, Building, Preparing and Maintaining Child and Family Teams)</p>
<p>G. Data system documentation</p>	<p>Unless other requirements are specified in policy for documentation, or events not documented elsewhere, or requiring a broader explanation, all information required to be documented in case recordings or appropriate screens in TFACTS must be entered within thirty (30) days from the date of the contact or occurrence.</p>
<p>H. Case file documentation and organization</p>	<p>Case file documentation and organization for Multiple Response assessment non-custodial cases will be uniform as outlined on form CS-0726, Child Protective Services/Non-Custodial Case File Documentation and Organization Checklist.</p>

Forms:	<p><u>CS-0158, Notification of Equal Access to Programs</u></p> <p><u>CS-0251 Local Administrative Procedures and Instructions</u></p> <p><u>CS- 0668, Authorization for Release of Information to the Department of Children's Services and Notification of Release</u></p> <p><u>CS-0699, Notices of Privacy Practices</u></p> <p><u>CS-0726, Child Protective Services/Non-Custodial Case File Documentation and Organization Checklist</u></p> <p><u>CS-0740, CPS Investigation Summary and Classification Decision of Child Abuse/Neglect Referral</u></p> <p><u>CS-0824, Native American Heritage Veto Verification</u></p> <p><u>CS-0827, Non Custodial Consent for Transportation</u></p> <p><u>CS-0835 Acknowledgment of Receipt of Client Rights Handbook</u> (Last page of Client Right's Handbook)</p>
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Collateral documents:	<p><u>A Case Worker's Guide to Opening and Transitioning Cases</u></p> <p><u>Child and Adolescent Needs and Strengths (CANS)</u></p> <p><u>Client's Rights Handbook</u></p> <p><u>Confirmation of Native American Heritage Letter</u></p> <p><u>Determination of Tribal Affiliation Letter</u></p> <p><u>Pamphlet – The Multiple Response Approach to Child Maltreatment Concerns</u></p> <p><u>Priority Response Definitions-Examples</u></p> <p>Structured Decision Making Assessments</p> <p><u>Work Aid 2 - CPS Tasks by Allegations</u></p> <p><u>CPS Case Closure Protocol</u></p> <p>Family Permanency Plan – (In TFACTS)</p> <p><u>FAST Case Protocol</u></p>
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Glossary:	
Term	Definition
Child and Adolescent Needs and Strengths (CANS):	A decision support tool used to provide a structured assessment of children along a set of dimensions relevant to service planning and decision-making.

No Service Needed:	Assessment completed and no risk or service needs identified. Safety of a child is not an issue and future risk of harm is not a concern.
Services Required:	There is an immediate threat of harm, and without services the safety of the child or family is at question or at risk. Safety issues and future risk of harm is so great that the agency must provide involuntary services.
Services Recommended:	There is a need for services, but there is no immediate threat of harm to the child or family safety. Unlike services required, these services are voluntary. Families may also continue with existing services.