



Administrative Policies and Procedures: 14.3

Subject:	Screening, Response Priority and Assignment of Child Protective Services Cases
Authority:	TCA; 37-1-401 et seq.; 37-5-105; 37-5-106; 37-5-107
Standards:	DCS Practice Model Standard - 5-200; 11-100; 11-101; 11-102; 11-103; 11-300A; 11-301A; COA: CPS 4.05
Application:	All Department of Children's Services Child Protective Services, Central Intake, and Including Special Investigations Unit Employees
Policy Statement:	
All reports alleging the abuse and/or neglect of children shall be screened to determine the need for a CPS assignment and shall either be assigned for investigation/assessment in the appropriate jurisdiction or "screened out" if the report does not meet the criteria for investigation/assessment. If the report is assigned, it will be given a Response Priority based on the critical nature of the allegations of harm.	
Purpose:	
To ensure reports meet the criteria for CPS assignment, appropriate information is gathered in a timely and efficient manner to make a disposition and determine if additional services are needed to keep children safe. The Central Intake Supervisory Staff will screen the report to determine if the report meets CPS policy and will use the Structured Decision Making (SDM) Child Abuse/Neglect Screening Criteria to assess safety and risk factors. The report will be assigned a response priority (P-1, P-2 or P-3) that determines the time frame in which CPS must initiate face-to-face contact with the alleged victim. The case will then be assigned to the appropriate county/region.	
Procedures:	
A. Screening and assignment	<ol style="list-style-type: none"> 1. The Central Intake Staff will: <ol style="list-style-type: none"> a) Screen each report to determine need for CPS assignment, b) Assign a response priority, and c) Make assignment to appropriate county/region. 2. The Central Intake Staff will take one of the following actions on each report based on criteria listed in DCS Policy 14.1, Central Intake, (Section G). <ol style="list-style-type: none"> a) Gather more information in order to accurately assess the risk of harm to the child, b) CPS assignment c) Screen out the report.

	<p>3. All cases will be assigned, referred, or screened out within twenty-four (24) hours.</p>
<p>B. Reports requiring more information</p>	<p>If the Central Intake Staff decides to gather more information before making a screening decision, it must be documented on the appropriate screens in TFACTS as follows:</p> <ol style="list-style-type: none"> 1. Specific time frames for gathering more information, and 2. Activities that were conducted to gather more information and the results.
<p>C. Reports “screened out”</p>	<ol style="list-style-type: none"> 1. For all screened out reports, the Team Leader or designee will document why the report did not meet the criteria for investigation in the intake narrative box in TFACTS (or on form CS-0680, Child Protective Services Intake¹, when TFACTS is inoperable. 2. Screened out reports will be maintained in TFACTS. 3. If a report is not accepted for CPS but involves other agencies with investigative and/or licensure responsibilities (e.g., law enforcement, DMH/DD licensed facilities, DHS daycare or DCS licensure), <u>the appropriate agency will be notified by Central Intake on the day the screening decision is made or the next business day.</u> The name of the agency and person notified will be documented on the appropriate screens in TFACTS. 4. Duplicate reports from the same reporter with the same information will be “screened out”.
<p>D. Reports “screened in” or accepted</p>	<ol style="list-style-type: none"> 1. When Central Intake determines that the report meets criteria to be “screened in”, Central Intake will complete the SDM Response Priority Decision Tree to assess critical safety and risk factors of the child(ren) using the SDM Response Priority Definitions to determine the response priority assignment. 2. If a report is accepted for CPS but involves other agencies with investigative and/or licensure responsibilities (e.g., law enforcement, DMH/DD licensed facilities, DHS daycare or DCS licensure), the appropriate agency will be notified on the day the report is accepted or the next business day by the case worker after consultation with the Team Leader. The name of the agency and person notified will be documented on the appropriate screens in TFACTS. 3. On open cases, multiple reports with the same information from different reporters will be “screened out.” CI will send out the Confidential Notification Letter for Reporter with appropriate notation and notify assigned case worker who will document receipt of “screened out” information in TFACTS and follow up with reporter per DCS policy <u>14.5 Child Protective Services Planning, Initiation and Assessment of Safety and Protection.</u>

¹ This form is no longer used to gather CPS intake information but will remain in “DCS Forms” on the Intranet in the event **TFACTS** failure.

<p>E. Priority response options</p>	<p>Response Priorities are assigned to reports to determine the timeframe in which an investigation/assessment must be initiated (initiation of the investigation/assessment includes any required investigative activities identified in DCS policy 14.5 Child Protective Services Planning, Initiation and Assessment of Safety and Protection).</p> <p><u>THE FOLLOWING ARE OPTIONS FOR ASSIGNING A RESPONSE PRIORITY:</u></p> <p><u>Central Time Zone vs. Eastern Time Zone:</u> The case worker will record the response time in TFACTS using <u>local time</u> regardless of the Time Zone to which the report is assigned.</p> <ol style="list-style-type: none"> 1. 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 immediately if the supervisor deems an immediate response is necessary. Priority 1 reports allege that children may be in imminent danger. 2. Priority-2 (P-2): 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, 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. 3. 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 to the child</u> where three (3) business days will not compromise the investigative effort or reduce the chances for identifying the level of risk to the child. 4. Refer to Priority Response Definitions/Examples for a listing of allegations of harm listed under each response priority. 5. When reports are determined to be P-1's or P-2's, Central Intake will notify the county's Team Leader by e-mail, page or phone of the emergency report as follows: <ol style="list-style-type: none"> a) During the regular business day, after hours, weekends and holidays Central Intake will notify the Counties of all P-1's; b) Central Intake will notify the County of any P-2's on Friday, weekends, holidays and the day before any holiday.
<p>F. Reconsideration</p>	<ol style="list-style-type: none"> 1. Reconsideration² is a request from the regional staff for a change in the assignment, screening decision or response priority of a CPS assignment.

² A reconsideration request does not affect the response time.

<p>procedures</p>	<p>Requests made for reconsideration can occur from the region for each referral by the Team Leader (TL)/designee and/or Team Coordinator (TC).</p> <p>2. If there is a reconsideration disagreement between the field and Central Intake, the regional supervising TL or TC will contact the supervisor of Central Intake for resolution.</p> <p>3. Reconsideration can occur under one of the following circumstances:</p> <ul style="list-style-type: none"> a) Regional staff has additional information that might result in a change in the assignment decision or response priority; b) There is a question of jurisdiction of an assigned report; c) Allegation does not match CPS policy; d) Inaccurate Response Priority; or e) No allegation of harm/imminent harm <p>4. Requesting a reconsideration:</p> <ul style="list-style-type: none"> a) A P-1 sent back for reconsideration must be reconsidered via a verbal conversation between the regional team leader and the Central Intake screener. b) The regional team leader will submit the report back to Central Intake via the reconsideration process in TFACTS or by telephone if the report is received after hours. c) The original Central Intake screener must not reconsider any reports they assigned. The report must be submitted to another CPS staff person to ensure an unbiased reconsideration. d) SIU will use the same reconsideration process. <p>5. Timeframe for reconsiderations:</p> <ul style="list-style-type: none"> a) Priority-1 reports must be re-evaluated immediately. b) Priority-2 reports must be re-evaluated the same day they are submitted to the region. c) Priority-3 reports must be sent back for re-evaluation by the next business day. <p>6. After the team leader assigns the report to a case worker, the team leader will <u>not</u> make any changes without re-submitting to Central Intake.</p>
<p>G. Case assignment based on jurisdiction</p>	<ul style="list-style-type: none"> 1. Reports alleging child sexual abuse or severe abuse (involves Child Protective Investigative Team (CPIT)) will be assigned to a case worker in the jurisdiction where the alleged abuse occurred. 2. All other reports (that do not involve CPIT) will be assigned to the county where the child resides. 3. If the report involves abuse or neglect that allegedly occurred in another state and the alleged victim is physically present in the state of Tennessee at the time the report is received, the case will be assigned in the county where the

	<p>child is residing/visiting in Tennessee.</p> <p>4. If it is not clear in which state the incident occurred, Tennessee will assume jurisdiction and the report will be assigned to a case worker in the county where the alleged victim is residing/visiting. This same county will take responsibility for classification.</p> <p>5. If neither the alleged victim nor the alleged perpetrator lives in the state of Tennessee, but the incident allegedly occurred in Tennessee and the child was not physically present in the state of Tennessee at the time of the report, then the case will not be assigned, but referred to the law enforcement agency within the jurisdiction where the incident allegedly occurred.</p> <p>6. Requests for courtesy response by an out of state agency will be forwarded to Central Intake and assignment to the appropriate jurisdiction. Central Intake will obtain the child's name, address and all information relative to the request for courtesy case work activities. Courtesy case responses will be documented in TFACTS.</p> <p>7. Allegations of child abuse or neglect involving non-custodial children under the supervision or care of an individual or individuals functioning in an official employment or volunteer capacity at the time of the incident; such as licensed day care facilities, licensed child care agencies, unlicensed daycare facilities if the facility should be licensed (such as a daycare with more than four (4) children, excluding biological children toward the 4), schools, religious organizations or youth groups will be investigated by SIU. SIU will investigate allegations of child abuse or neglect of biological, foster, or adoptive children residing in a foster home. Reports to Special Investigations Unit (SIU) will be handled as outlined in DCS policy 14.25, Special Investigations.</p>
<p>H. Documenting/ gathering information on Native American ancestry</p>	<p>During the first initial contact with the family, the case worker will inquire if there is any Native American lineage or ancestry that might make the child/family eligible for membership in any Native American Tribe. If the child/family confirms that Native American lineage or ancestry does exist, refer to policy 16.24 Children of Native American Heritage for follow-up. If the family/child confirms that no Native American lineage or ancestry exists, form CS-0824, Native American Heritage Veto Verification will be signed by the child/family to document that an inquiry was made. Efforts to identify the tribe and notifications made to the Bureau of Indian Affairs must be documented on the appropriate screens in TFACTS.</p>

<p>Forms:</p>	<p>CS-0680, Child Protective Services Intake</p> <p>CS-0824, Native American Heritage Veto Verification</p>
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Collateral Documents:	<u>Priority Response Definitions/Examples</u>
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Glossary:	
Term	Definition
Duplicate reports:	The same information from the same reporter.
Initiated:	The act of contacting or meeting with the victim or family for a face-to-face interview (CPS).
Multiple reports:	The same information reported by different reporters.
Response priority:	Response priorities are assigned to reports of alleged abuse/neglect to determine the timeframe in which an investigation must be initiated. (See <i>Section E</i> above for definitions and time requirements for initiating a face-to-face contact with the alleged victim.)
Structured Decision Making (SDM) Child Abuse/Neglect Screening Criteria:	The SDM screening criteria that determine whether a report meets agency criteria for a child abuse/neglect investigation. Immediately upon receipt of all available information pertaining to the report, but no later than within twenty-four (24) hours of receipt of the report, unless the intake supervisor decides that more time is needed to gather information. When the intake supervisor decides to gather more information, the screening criteria must be completed no later than twenty-four (24) hours from receipt of the report.
SDM Response Priority Decision Tree:	A set of decision trees in the priority response assessment that guides Central Intake Team Leaders and CPS case workers through key questions that allow them to determine how quickly a CPS investigation must be initiated. The decision trees structure this analysis to determine a response priority level. (See definition of <i>Response Priority</i> .)