1407 – STRUCTURED INTAKE
CHANGE # 02-2016
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I. OVERVIEW

A. Legal Requirements for the Department of Social Services

North Carolina General Statute §7B-300 (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-300.html) states:

"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. The provisions in this Article shall also apply to child care facilities as defined in G.S. § 110-86."

County child welfare agencies must receive and screen all reports of abuse, neglect, or dependency, regardless of residency. The Intake social worker shall use the North Carolina Division of Social Services' Structured Intake Form, DSS-1402 (http://info.dhhs.state.nc.us/olm/forms/dss/dss-1402.pdf), to document information about the report of suspected abuse, neglect or dependency. The Intake social worker and supervisor determine whether the facts alleged in the report are sufficient to warrant intervention on the basis of suspected abuse, neglect, or dependency. The intake decision not only determines if there is a valid Child Protective Services (CPS) report, but also which county child welfare agency shall be responsible for conducting the CPS Assessment. Initiation response times and prioritization shall be determined by the county conducting the CPS Assessment. The two CPS Assessment responses are the Family Assessment response and the Investigative Assessment response. The Intake social worker and supervisor shall sign the completed intake form.

North Carolina General Statute §7B-302 (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-302.html) states: "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." When a report of abuse, neglect, or dependency is received regarding a non-institutional setting, all children living in the home shall 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 shall be assessed to determine whether they require protective services or immediate removal.

In the course of providing child protective services, the director of the county child welfare agency and staff should have a clear understanding of the legal basis for intervention on an involuntary basis and to accept the responsibility for offering services to non-voluntary clients. The county child welfare agency should minimize the intrusion into the family without increasing the risk of harm for children.

B. Duty to Report - Legal Requirements for the Public

North Carolina has a mandatory reporting law that states "Any person or institution who has cause to suspect that any juvenile is abused, neglected, or dependent, as defined by G.S. §7B-101 (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-101.html), 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 intent of this legislation is to encourage reporting to the proper authority in situations where children may be at risk***. It 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.

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 according to G.S. §7B-309 (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-309.html). This statute also guarantees immunity to anyone who cooperates with the county child welfare agency in its CPS Assessment, testifies in any court action resulting from the report, or participates in authorized procedures or programs for screening and responding to reports of abuse, neglect, or dependency.

II. INTAKE AND SCREENING

The county child welfare agency has the statutory responsibility to screen reports and to intervene in situations meeting the legal definitions of:

- abuse
- neglect, and/or
- dependency.

A. Establishment of county child welfare agency jurisdiction

Screening in child protective services is the action of receiving reports of abuse, neglect, and/or dependency and, through the process of gathering preliminary information from the reporter, determining what further action is required. A critical part of the screening process involves knowing 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.

1.) Statutory Definitions

The North Carolina Juvenile Code sets forth the following definitions (GS §7B-101 http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-101.html):

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 G.S. 14-27.2; rape of a child by an adult offender, as provided in G.S 14-27.2A; second degree rape as provided in G.S. 14-27.3; first degree sexual offense, as provided in G.S. 14-27.4; sexual offense with a child by an adult offender, as provided in G.S 14-27.4A; second degree sexual offense, as provided in G.S. 14-27.5; intercourse and sexual offenses with certain victims; consent no defense**,** as provided in G.S. 14-27.31 and G.S. 14-27.32; unlawful sale, surrender, or purchase of a minor, as provided in G.S. 14-43.14; crime against nature, as provided in G.S. 14-177; incest, as provided in G.S. 14-178 and 14-179; preparation of obscene photographs, slides or motion pictures of the juvenile, as provided in G.S. 14-190.5; employing or permitting the juvenile to assist in a violation of the obscenity laws as provided in G.S. 14-190.6; dissemination of obscene material to the juvenile as provided in G.S. 14-190.7 and G.S. 14-190.8; displaying or disseminating material harmful to the juvenile as provided in G.S. 14-190.14 and G.S. 14-190.15; first and second degree sexual exploitation of the juvenile as provided in G.S. 14-190.16 and G.S. 14-190.17; promoting the prostitution of the juvenile as provided in G.S. 14-205.3(b); and taking indecent liberties with the juvenile, as provided in 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 G.S. 14-43.11 (human trafficking), G.S. 14-43.12 (involuntary servitude), or 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.

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, 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.

NOTE: 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, it is the position of both the North Carolina Division of Social Services (NC DSS) and the child welfare attorneys within the North Carolina Attorney General's Office that 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 shall be considered caretakers. Therefore, when reports are made alleging child maltreatment that meet the statutory definition of abuse, neglect and dependency and include information that an extended step-relative acted in the capacity as caregiver, county child welfare agencies shall accept these reports for CPS Assessment.

A relative entrusted with the care 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. This includes the duration and frequency of care provided by the adult, the location in which that care is provided, and the decision-making authority granted to the adult. A temporary arrangement for supervision is not the equivalent of entrusting a person with the care of the juvenile.

County child welfare agencies are required to screen child protective services reports considering whether the alleged perpetrator meets statutory requirements for a caretaker at the time the report is made. In making this determination, the county child welfare agency is to consider whether the alleged perpetrator meets the statutory requirements for a caretaker at the time of the alleged incident. If the intake social worker cannot determine whether the adult meets the statutory requirements of a caretaker at the time the screening decision is being made, it may be appropriate to accept the report for assessment. The determination about the person's caretaker status may be combined with the determination of whether any abuse and/or neglect occurred, by considering the totality of the circumstances. County child welfare agencies may also need to assess whether the parent made an appropriate decision regarding the child's safety and welfare when he/she placed the child with the relative, regardless of whether the alleged perpetrator meets the caretaker definition.

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 shall be narrowly construed and exclusive to only mean those adult members of the juvenile's household. Therefore, when reports are made alleging child maltreatment by a primary parent's friend, guardian's friend, custodian's friend, or caretaker's friend who resides outside of the child's home, county child welfare agencies shall not accept these reports for CPS Assessment but shall, instead, refer these cases to local law enforcement if appropriate.

In instances where it is determined that the individual does not meet the criteria for being a relative entrusted with the child's care, it is appropriate, per policy, to refer those cases to the district attorney, as well as the local law enforcement agency in order to ensure the protection of the child victim(s). In light of this guidance change, county child welfare agencies may find it helpful to revisit their partnership with law enforcement. This could include meeting with the appropriate agencies; developing or revising a Memorandum of Agreement; and/or possibly offering training on child protection matters. The safety and wellbeing of children is the concern of the entire community and in cases where the alleged perpetrator is not considered a caretaker, the criminal system is the most appropriate setting for seeking justice.

The North Carolina Division of Juvenile Justice and Delinquency Prevention is housed within the North Carolina Department of Public Safety. The definition of "caretaker" referring to "any employee or volunteer of a division, institution, or school operated by North Carolina Department of Health and Human Services "does not apply to secure detention facilities". 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. For example, if a report is received and the person alleged to have abused or neglected the juvenile is the cook, the janitor, the groundskeeper, etc., the report would not be accepted for CPS Assessment but reported to law enforcement when required. If the person alleged to have abused or neglected the juvenile is a correctional officer employed with the Division of Juvenile Justice and Delinquency Prevention or

otherwise has "responsibility for the health and welfare of a juvenile", the report would be accepted for a CPS Assessment and referred to law enforcement when required. To determine if a facility is a part of the juvenile justice system go to https://www.ncdps.gov/Index2.cfm?a=000003,002476,002486. Notices of the assessment and the case decision shall be sent by fax to:

NC Department of Public Safety
Juvenile Justice
4212 Mail Service Center
Raleigh, North Carolina 27699-4212.
(919) 733-3388 (P)
(919) 715-2503 (F)

Reports alleging abuse or neglect in boarding schools also are subject to CPS Assessment based on the caretaker definition.

Serious neglect: Conduct, behavior, or inaction of the juvenile's parent, guardian, custodian, or caretaker that evidences a disregard of consequences of such magnitude that the conduct, behavior, or inaction constitutes an unequivocal danger to the juvenile's health, welfare, or safety, but does not constitute abuse.

Family Assessment response: A response to selected reports of child neglect and dependency as determined by the Director 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.

Investigative Assessment response: A response to reports of child abuse and selected reports of child neglect and dependency as determined by the Director using a formal information gathering process to determine whether a juvenile is abused, neglected, or dependent.

2. Policy Definition

Self-reporting child: Any juvenile who contacts a county child welfare agency directly or asks specifically for assistance in contacting the county child welfare agency in order to report allegations of child abuse, neglect, and/or dependency.

B. Intake and Screening Requirements

1.) All CPS reports are to be documented:

(a.) in writing, in a structured format, and
(b.) at the time the report is received.

The CPS Structured Intake Report tool, DSS-1402 (http://info.dhhs.state.nc.us/olm/forms/dss/dss-1402.pdf), addresses all of the requirements for capturing information to be collected at Intake. The form can be formatted to make it more user-friendly for an individual county, but **all** questions that are currently in Sections I through V, as well as Section VII, on the tool shall be asked and documented during Intake. Questions in all other sections shall be asked & documented if

appropriate. Other information that a county child welfare agency feels would be helpful, such as what services the family is receiving in the county, may be added.

Strengths-Based, Structured Intake is one of the seven strategies of the Multiple Response System (MRS). Recognizing strengths and partnering with families from the initial contact is an important aspect of this approach. Obtaining information regarding culture allows the county child welfare agency to provide family-centered services and gives valuable information about the family.

North Carolina General Statute §7B-301 (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-301.html) **requires** that the person making the report give his or her 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. 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, with the exception of releasing it to law enforcement when they are assisting with the CPS Assessment. This statute does not grant the right for the reporter to remain anonymous. Please see Section 1428 Confidentiality and Release of Information in the Child Welfare Services Manual (http://info.dhhs.state.nc.us/olm/manuals/dss/csm-60/man/CS1428.pdf) for further information on confidentiality.

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. The reporter should be informed that his or her identity will remain confidential, unless a court orders otherwise; or without a court if a local, state, or federal entity demonstrates a need for the reporter's name to carry out its mandated responsibilities (S.L. 2012-153 (S 910). 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.

2.) Reports received for CPS Assessment

All CPS Intakes require:

(a.) a two party review of the Intake decision;
(b.) one of the parties be in a management position, and all persons participating in the Intake decision must sign the Structured Intake Report tool;
(c.) a written notice be sent to the reporter, unless waived or anonymous, within 5 business days after receipt of the report. It is essential that reporters receive notification as to the status of the report, as it could impact whether or not children are, first and foremost, protected from abuse and neglect.

The notice to the reporter shall 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;
(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 or not the report was referred to the appropriate state or local law enforcement agency;
(f.) information about referrals to outreach services or other agencies as appropriate, if the report was not accepted;
(g.) the identity of the county responsible for conducting the CPS Assessment, if different than the county who received the Intake;
(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 social worker, the supervisor, or other identified person.

It is crucial that reports that are accepted for CPS Assessment clearly invoke the statutory authority to provide child protective services. All persons participating in the screening decision shall sign the Structured Intake Report tool where indicated.

Documentation in the case record must reflect the following:

(a.) the notice sent to the person making the report; or
(b.) the person making the report waived his or her right to notice; or
(c.) the person making the report refused to provide identifying information.

3.) Non-Caretaker Reports

When a report that is not accepted for CPS Assessment includes information that a child may have been physically harmed in violation of any criminal statute by a non-caretaker, the agency shall:

(a.) give immediate verbal notifications to the District Attorney or designee;
(b.) send subsequent written notification to the District Attorney within 48 hours;
(c.) give immediate verbal notification to the appropriate local law enforcement agency, and
(d.) send subsequent written notification to the appropriate local law enforcement agency within 48 hours.

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; and reports alleging maltreatment of a child by staff of an acute physical care hospital. These situations do not meet the current definition of caretaker and are inappropriate for child protective services intervention.

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.

4.) Duty of the County Child Welfare Agencies to Report Allegations of Child Abuse and Neglect in Child Care

If during the Intake process, a county child welfare agency receives a report of suspected child maltreatment pertaining to a caregiver in a child care facility, the Child Protective Services Intake Social Worker shall continue to complete the intake report tool and once completed, screen it out. North Carolina General Statute § 7B-307 states "the director shall notify the Department of Health and Human Services (DCDEE) within 24 hours or on the next working day of receipt of the report." The completed intake tool shall be faxed to DCDEE at 919-715-1013. The contact number for any individual that would like to make a report of suspected child maltreatment in a child care facility is 1-800-859-0829 or locally at 919-527-6500.

5.) Reports involving a Child Who Lives in Another County or State

The county child welfare agency may receive a CPS report involving a child who resides in another county or state. If the child lives in another county the child welfare agency receiving the CPS report shall take the information from the reporter and then screen the report for acceptance prior to it being assigned to the county where the child lives. If the child lives in another state, the county child welfare agency receiving the report shall take the information from the reporter and make the report to the appropriate CPS agency in that state.

In the interest of providing maximum protection to children, reporting of suspected child abuse, neglect, or dependency should be made as convenient as possible for reporters. They should not be required to look up unfamiliar telephone numbers or to make long distance calls. They should be advised that their names will be provided to the agency where the CPS Assessment will be conducted so that further information can be obtained, if necessary, and the five day notice can be sent.

The county child welfare agency may receive a report on a child that it knows resides in another county but is "found" in the county receiving the report. The county where the child is found should proceed with screening the report to determine if it meets the legal definition of abuse, neglect, and/or dependency and if so, initiate the CPS Assessment as an assist to the child's county of residence. It is the responsibility of the county where the child resides to complete the CPS Assessment and make the case decision using the interview information from the county where the child was found.

The county child welfare agency may receive a report on a child that resides in another state but is "found" in a county in North Carolina. The county shall proceed

with the screening process and if accepted, conduct a CPS Assessment. The state where the child resides must be notified of the county's actions.

When a report is received on a child that resides in another state but is found in a county, and the Intake decision is to not accept the report for CPS Assessment, the other state shall be notified of the report and the county's screening decision. That allows the resident state to make a screening decision based on its statutes and also gives the state information for when the child returns.

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 another state and is "found" 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 in interviewing the child.

Jurisdictional barriers should not prevent a county from protecting children.

6.) Out-of State Requests to Provide Protective Services

When county child welfare agencies receive requests from out-of-state agencies to provide protective services to children and their families who are now living in this state, it is necessary to initiate a new CPS Assessment. In order to establish jurisdiction in North Carolina, the county child welfare agency must assure that the allegations would have constituted abuse, neglect, or dependency according to the definitions set forth in G.S. §7B-101 (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-101.html) had the maltreatment occurred in this state. This procedure is based on child protective services policy and the recognition that statutes vary among the states.

In addition to the decision-making process related to child protective services, the receiving county child welfare agency shall 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 should also refer the matter to the ICPC office, housed within NCDSS for review. The ICPC telephone number is (919) 527-6390. Such referrals should be made without delay in order to assure compliance with the Compact and the continuation of appropriate services to the family. Please see Chapter XI in the Child Welfare Services Manual (http://info.dhhs.state.nc.us/olm/manuals/dss/csm-70/man/) for further information.

7.) Reports Involving Out-of-Home Care Providers

When a report is received alleging abuse, neglect, and/ or dependency, of a child by out-of-home care providers, and the allegations meet the definitions of abuse or neglect and the out-of-home care provider meets the definition of caretaker under N.C.G.S §7B-101 (http://www.ncleg.net/EnactedLegislation/Statutes/PDF/BySection/Chapter_7B/GS_7B-101.pdf), the county child welfare agency county shall complete a CPS Assessment.

- While most aspects of CPS Assessments are identical, there may be some differences. Additional requirements for specific types of CPS Assessments are contained in Chapter V and the Conflict of Interest Policy contacted in the Child Welfare Services Manual.

8.) Multiple Reports Involving the Same Child or Family

County child welfare agencies often receive information about a child from more than one reporter. Several reporters may call within hours of each other, especially in the early stages of screening or a CPS Assessment. The agency may be well into completing a CPS Assessment and may be contacted by a new reporter. If a CPS report is received that describes the exact, same allegations and incidents that are currently being assessed, the information shall be documented in the case record and not accepted for a CPS Assessment. If the report describes the exact, same allegations and incidents that are currently being assessed, the reporter should be told that the agency is taking steps to determine the circumstances of the child. The county child welfare agency shall notify all individuals making a CPS report, if they want to be notified, even though they may not have been the initial reporter.

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 social worker as a part of the CPS assessment) is to be documented and must be responded to within the legal time frames to assess the safety of the child. The new information is not counted as a separate report, but must be responded to within appropriate time frames to assess the safety of the child. 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 CPS Assessment Social Worker has uncovered and is fully and appropriately responding to the new allegations as a part of the current CPS Assessment.

9.) Reports Involving Open CPS In-Home Services Cases

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 shall be documented as a new report and the agency shall 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 shall 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.

The designation of new allegations as "**Additional Information" no longer exists.**

10.) Reports Involving Open Child Placement Cases

Any new allegation and/or incident that meets the legal definitions of abuse, neglect, and/ or dependency received at any time during the course of the child receiving Child Placement Services, shall be documented as a new report and the

agency shall conduct a prompt and thorough CPS Assessment.

County child welfare agencies often receive reports on children are receiving child placement services. For example, if a child is home for a trial visit and the county child welfare agency receives a report regarding this visit, it should be documented as a new report and the county child welfare agency shall conduct a prompt and thorough CPS Assessment.

11.) Reports Involving a Deceased Child in a Residential Setting

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.

North Carolina General Statutes §7B-302(b) states: "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." Only children identified as victims shall be subjects of the Investigative Assessment. However, other children in the institutional setting shall be considered as victims if an assessment of the circumstances warrants the inclusion of those children in the Investigative Assessment.

12.) Reports Involving a Child who Lives in a Home Where a Child has Died or been Abused or Neglected

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. 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 shall be referred to law enforcement for investigation.

When there are other children residing in the home at the time of the child fatality, the county child welfare agency shall focus its activities on the safety of the surviving children. North Carolina General Statute §7B-302(b) (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-302.html) 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."

There are special considerations for reports involving a child who lives in a home where a child has died as a result of maltreatment or lives in a home where another

child has been subjected to abuse or neglect. North Carolina General Statute §7B-101(15) (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-101.html) includes the following sentence in the definition of neglected juvenile: " 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."

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. North Carolina General Statute §7B-302b (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-302.html) requires that all children living in the home of the reported victim child shall be assessed as alleged victim children. These laws support what has been good practice in CPS--i.e. the physical or sexual abuse of one child in a home by an adult resident of that home necessitates consideration as to whether other children have been neglected or subjected to physical, sexual, or emotional abuse even without specific allegations involving them.

While the prior physical or sexual abuse or death from abuse or neglect of one child in a home does not 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.

III. INTAKE DECISIONS

Intake is the first stage of the child welfare process. Careful, detailed, and thorough work at this stage lays the foundation for making well-informed decisions throughout the life of the case. The quality and consistency of the information gathered at this stage directly impacts the safety of the alleged victim children and any subsequent intervention. It is crucial that the Intake social worker use interviewing skills to gather sufficient information from the reporter. Judgments shall be made as to whether a CPS Assessment is required and the urgency of the response required.

The goal is to make decisions that are consistent when it comes to screening, to case decisions, to the removal of children from their families, to reunification, to pursuit of court intervention, and to all other service-related decisions. An appropriately structured intake process, based on specific criteria, significantly improves a decision to accept a report for CPS Assessment. Defining how the criteria are to be applied to the screening decision increases consistency in decision-making.

A. Maltreatment Screening Tools Consultation

Maltreatment Screening Tools are one component of the Structured Decision Making System (SDM). They are based on North Carolina General Statutes, research from the U.S. Department of Health and Human Services, and various states. The use of the SDM tools results in consistent screening and identification of child abuse, neglect, and dependency reports.

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 shall 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 shall be consulted. A review of the screening tool will help answer the question: If the reported information were true, does it minimally meet the statutory guidelines for child abuse, neglect and/or dependency? This requires that Intake social workers have a current knowledge of statutory guidelines in order to identify and categorize child abuse, neglect and dependency. Screening decisions at Intake remain a two-level decision that incorporates the social worker and supervisor's professional judgment.

B. Response Priority Decision Tree Consultation

After a determination that the CPS report is valid, the decision trees incorporate and prioritize critical factors which lead to a decision about the initiation response time. The Response Priority Trees include:

- Physical Abuse Response Priority Decision Tree
- Sexual Abuse Response Priority Decision Tree
- Human Trafficking Response Priority Decision Tree
- Neglect Response Priority Decision Tree
- Dependency Response Priority Decision Tree

During the intake process, the county child welfare agency that screens and accepts the report shall determine the county of residence for the family (child). 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. Please see Section 1410 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.

C. Strengths Based Interviewing

Making effective intake decisions requires social 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/impressions regarding the allegations need 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 actually 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 social 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?
6.) Would the parents of the family agree with your assessment of the situation?

Many times reporters will think more carefully about family situations when they are questioned about family strengths. 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.

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?

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/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?

Talking with the reporter about the goal for contacting child welfare can also be initiated through the use of scaling questions. The Intake social 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 social 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.

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 social 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.

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 is able to speak to a professional regarding his or her concerns and is not forced to leave a message or required to say the exact words, "I want to make a CPS report", in order to share his or her safety concerns regarding the child and family. Every effort should be made to speak with the reporter at the time the call is placed. It is important to remember that time frames for responding to reports of abuse, neglect, and/or dependency begin at the time the reporter contacts the county child welfare agency. In instances where the reporter left a message, this means that the time frame for response begins at the time the reporter left the message--not the time the call was returned. There may be many times where 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 general public. County child welfare agencies are mandated to provide Child Protective Services 24 hours per day, 7 days per week, as well as, to respond immediately to emergency situations. 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.

IV. INTAKE PROCESS

The Intake social worker shall gather sufficient information from the reporter and agency records to be able to:

- identify and locate the child(ren), parents, or primary caretaker;
- determine if the report meets the statutory guidelines for child maltreatment;
- assess the seriousness of the child's situation; and
- understand the relationship of the reporter to the family and the motives of the reporter.

The Intake social worker shall provide support and encouragement to the reporter by:

- explaining the purpose of CPS (to protect and strengthen the family);
- emphasizing the importance of reporting;
- dealing with fears and concerns of the reporter; and

- discussing confidentiality and explaining how a reporter's identity may be revealed (through court action in a particular case).

The Intake social worker shall check agency records to determine if the family or child has been reported/known to the agency previously. The North Carolina Administrative Code **only** allows access to the Central Registry once a report has been accepted for CPS Assessment. County child welfare agencies are required to conduct a Central Registry check as a part of a thorough CPS Assessment of reports alleging abuse, neglect, or dependency. **It is not acceptable to check the Central Registry/Responsible Individual List or contact another community agency or another county DSS in order to make a screening decision.**

In some instances, a reporter may be considered a "designated reporter" for his or her agency, meaning he or she is calling on behalf of the person who 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. Two examples of this situation would be a designated reporter in a school system, when the teacher has firsthand knowledge, but the school social worker made the report; and a nurse in an ER calling on behalf of the doctor whose examination revealed possible abuse or neglect concerns.

The Intake social worker shall handle crisis situations such as:

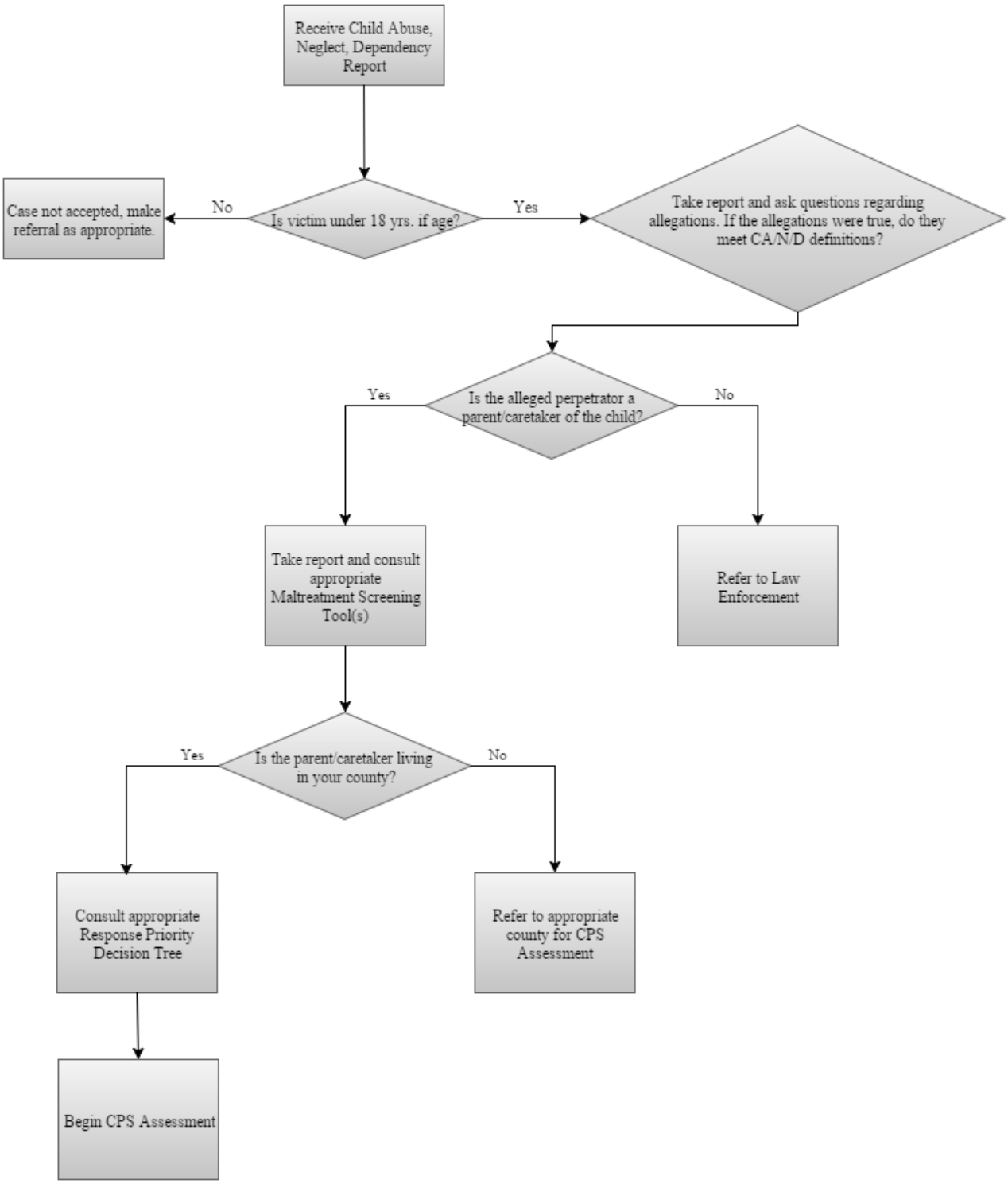
- calming the caller; and
- determining how to meet the immediate needs of the child and family through identifying the appropriate response time.

The more comprehensive the information provided by the reporter, the better able Intake social workers are to determine 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.

A. Structured Intake Steps

1) Complete Structured Intake Report tool using strengths based approach with reporter.
2) Consult Maltreatment Screening Tool(s) which corresponds to the allegations.
3) Determine the county responsible for completing the CPS assessment.
4) Consult Response Priority Decision Tree.
5) Determine appropriate Assessment Response--Investigative vs. Family.

CPS Intake Decision Tree



V. MALTREATMENT SCREENING TOOL AND PROCEDURES

The purpose of the screening tools is to determine which reports meet the legal definitions of abuse, neglect, and/or dependency and to aid in achieving consistency in regards to the screening of CPS reports.

Which cases: **The screening tools shall be utilized with every CPS report received in order to determine whether the allegations meet the legal definitions of abuse, neglect and dependency.** This includes telephone calls and all other means of referral. It includes information 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. If the information received meets the legal definitions, a CPS Assessment is required.

Who: Every staff member who has the responsibility for CPS Intake.

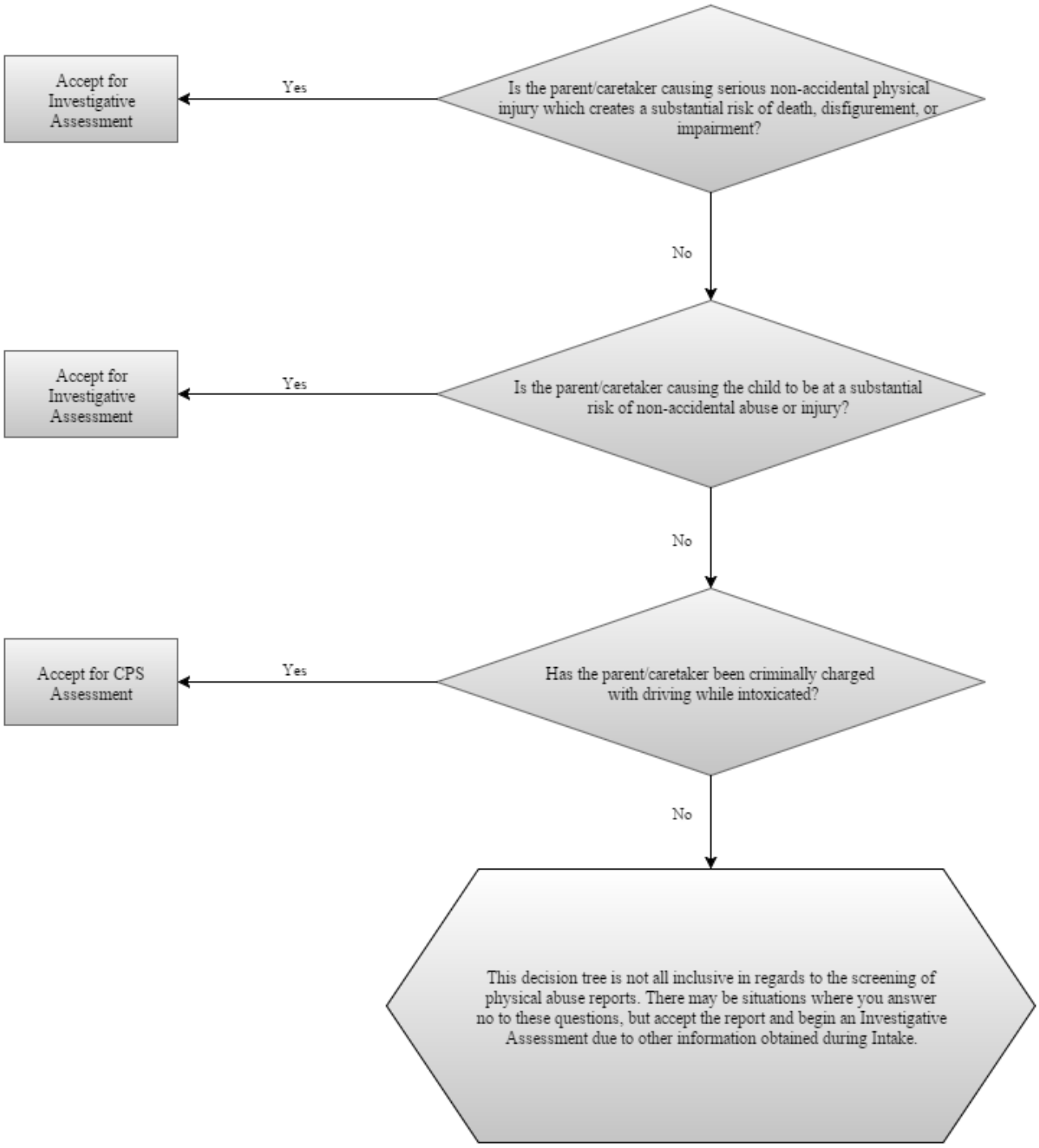
Decision: Screening tools assist in determining whether the report should be accepted for CPS Assessment. **This is a joint decision made with the CPS Intake social worker and the supervisor.**

When: Screening tools are consulted immediately upon receipt of the report.

Appropriate Consultation: Please refer to the definitions page for each screening tool. The tools correspond with the abuse, neglect, and dependency statutes. The corresponding screening tools for abuse reports include: physical injury, cruel/grossly inappropriate behavior modification, sexual abuse, emotional abuse, moral turpitude, and human trafficking. The corresponding tools for neglect reports include: improper care, improper supervision, improper discipline, abandonment, improper medical/remedial care, injurious environment, and illegal placement/adoption. There is also a screening tool for dependency. The directions provide case examples but are not all-inclusive. It is impossible to account for all incidences of child abuse, neglect, and dependency. These tools are guidelines to assist in the decision-making process. The Intake social worker shall consult each tool as it corresponds to the allegations. It is likely that a reporter will allege maltreatment which requires an examination of multiple screening tools. It is crucial to evaluate each allegation based on the statutory definitions of abuse, neglect and dependency, and consulting the Maltreatment Screening Tools serves this purpose.

Overrides: The decision trees are designed to guide decisions--not to replace social worker judgement. If, after consultation with a supervisor, it is agreed that appropriate completion of the tool leads to a decision that does not apply to a particular case due to unique circumstances not captured by the tool, or because critical information is unknown, the supervisor may approve an override. **If the appropriate response is in doubt, the agency decision shall be to respond in a way that ensures the children are, first and foremost, protected from harm.**

Physical Injury Screening Tool



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.

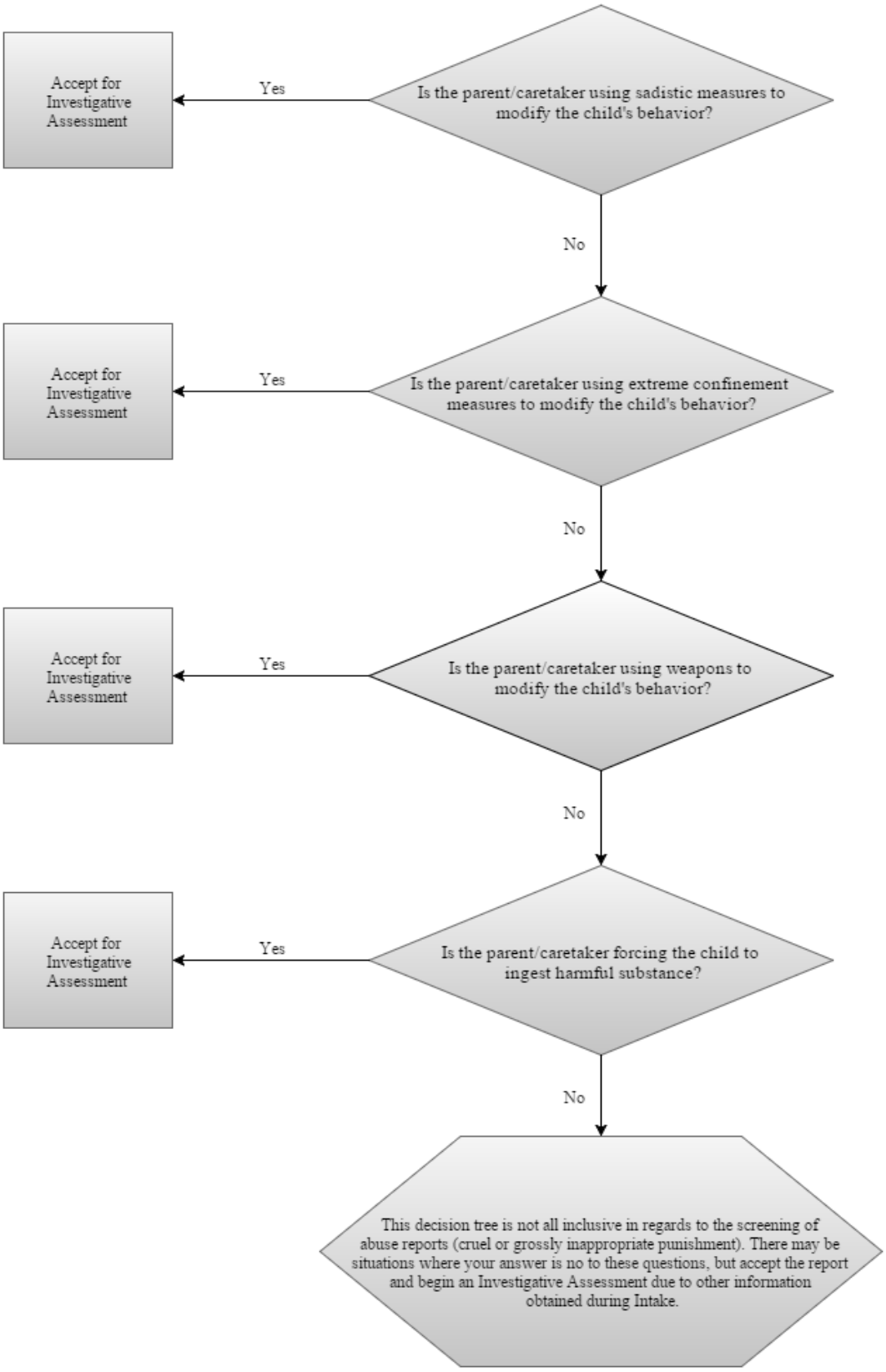
Is the parent/caretaker causing the child to be at a substantial risk of serious non-accidental abuse or injury?

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 **shall** 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.

Cruel/Grossly Inappropriate Behavior Modification Screening Tool



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.

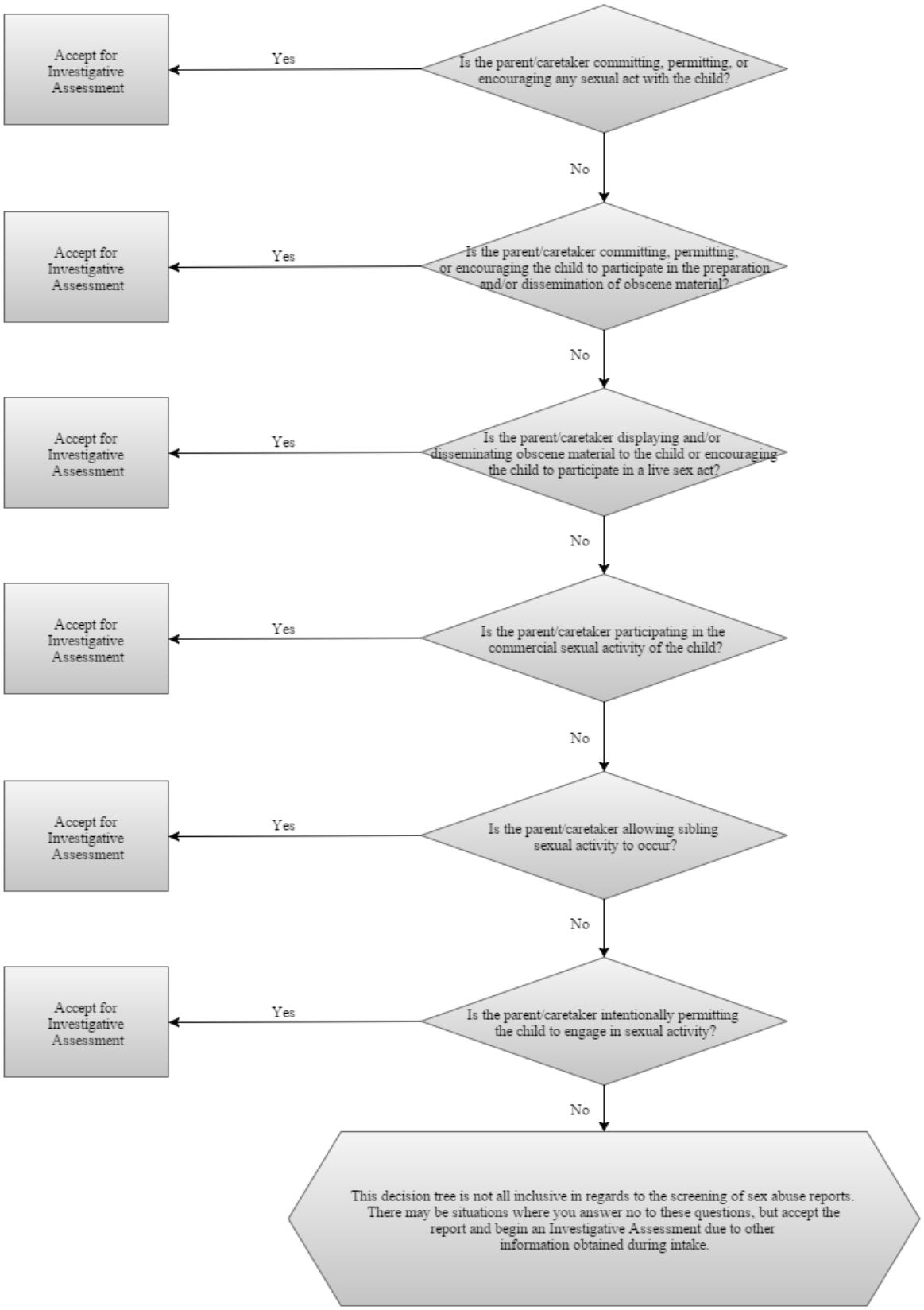
Is the parent/caretaker using weapons to modify the child's behavior?

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.

Sexual Abuse Screening Tool



C. 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 his or her 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 G.S. 7B-101(1)(d) or G.S. 7B-101(1)(g).

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

The parent/caretaker has knowledge that siblings are engaging in sexual activity and permits/encourages the continuation of this activity requires a CPS Assessment. 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 shall be based on current risk. If it is believed the children are at risk, the report shall 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.

A report involving parental knowledge and permission of sexual activity of an incompetent juvenile requires a CPS Assessment, 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 his or her 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 North Carolina General Statute § 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.

The following situations would require a CPS Assessment based on improper supervision:

- 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.

Normal Child Sexual Development
Infancy (birth through one year) • Pair bonding • Genital play • Identification of gender
Toddler/Early Childhood (2 to 5 years) • Toilet training • Genital play • Interpersonal games: family, marriage, doctor, etc.
Latency (6 to 9 years) • Concrete interest in anatomic differences, pregnancy, birth • Private, occasional masturbation • Modesty about bodies • Increased secretive behavior among peers • Interest in socialization
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.

D. 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 social worker must refer to this information when screening sexual abuse reports.

§ 14-27.2. First-degree rape

(a) A person is guilty of rape in the first degree if the person engages in vaginal intercourse:

(1) With a victim who is a child under the age of 13 years and the defendant is at least 12 years old and is at least four years older than the victim; or
(2) With another person by force and against the will of the other person, and:

a. Employs or displays a dangerous or deadly weapon or an article which the other person reasonably believes to be a dangerous or deadly weapon; or
b. Inflicts serious personal injury upon the victim or another person; or
c. The person commits the offense aided and abetted by one or more other persons.

§ 14-27.2A. Rape of a child by an adult offender

(a) A person is guilty of rape of a child if the person is at least 18 years of age and engages in vaginal intercourse with a victim who is a child under the age of 13 years.

§ 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.

§ 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.

§ 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.

§ 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.

§ 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.

§ 14-43.14. Unlawful sale, surrender, or purchase of a minor

(a) 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.

§ 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.

§ 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.

§ 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.

§ 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.

§ 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 G.S. 14-190.1, shall be guilty of a Class I felony.

§ 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 G.S. 14-190.1 shall be guilty of a Class I felony.

§ 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 G.S. 14-190.1 shall be punished as a Class I felon.

§ 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.

§ 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.

§ 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 engage 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.

(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, 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.

§ 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.

§ 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 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.

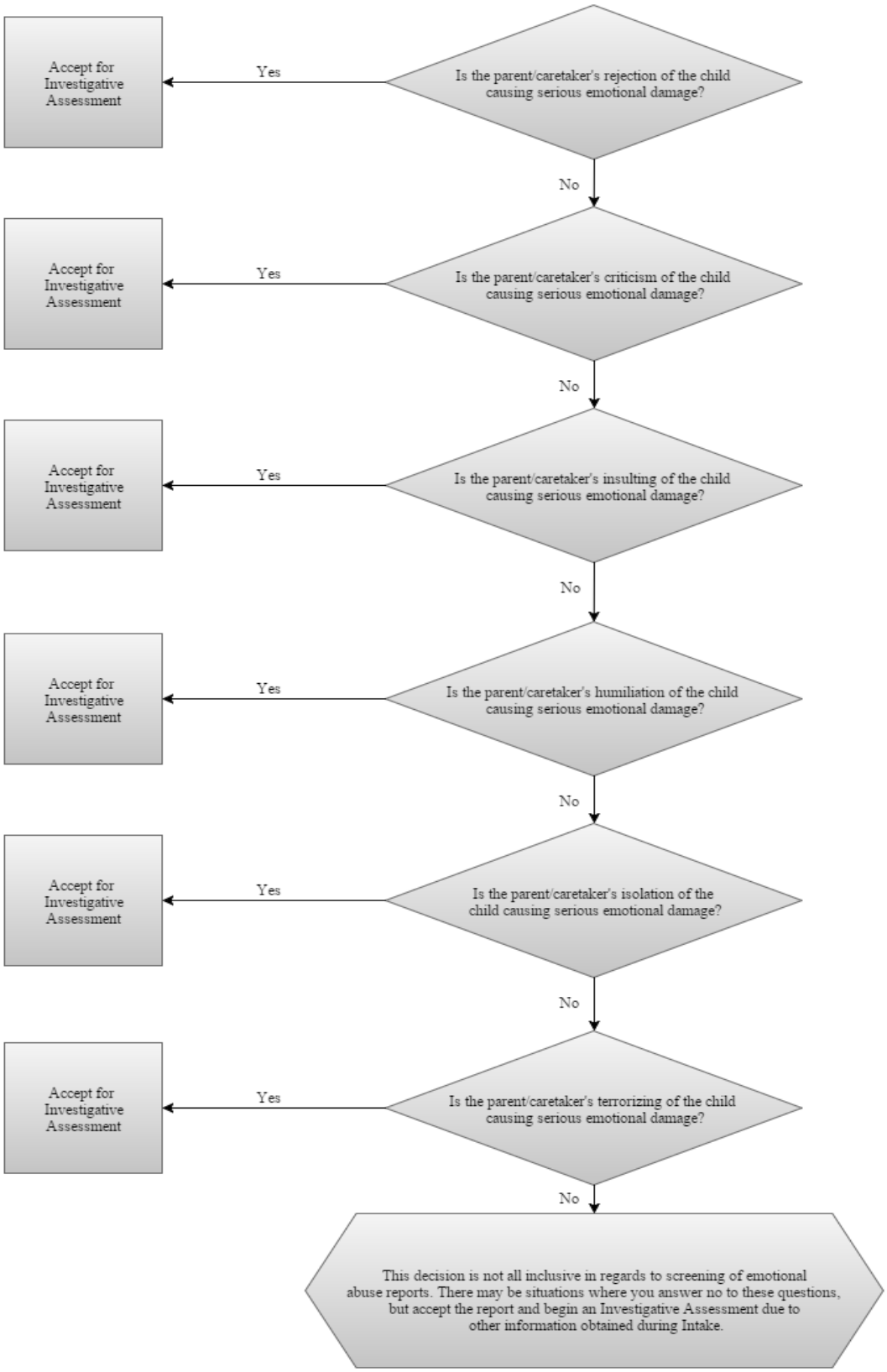
§ 14-202.1. Taking indecent liberties with children

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

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

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

Emotional Abuse Screening Tool



E. 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 his or her 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.

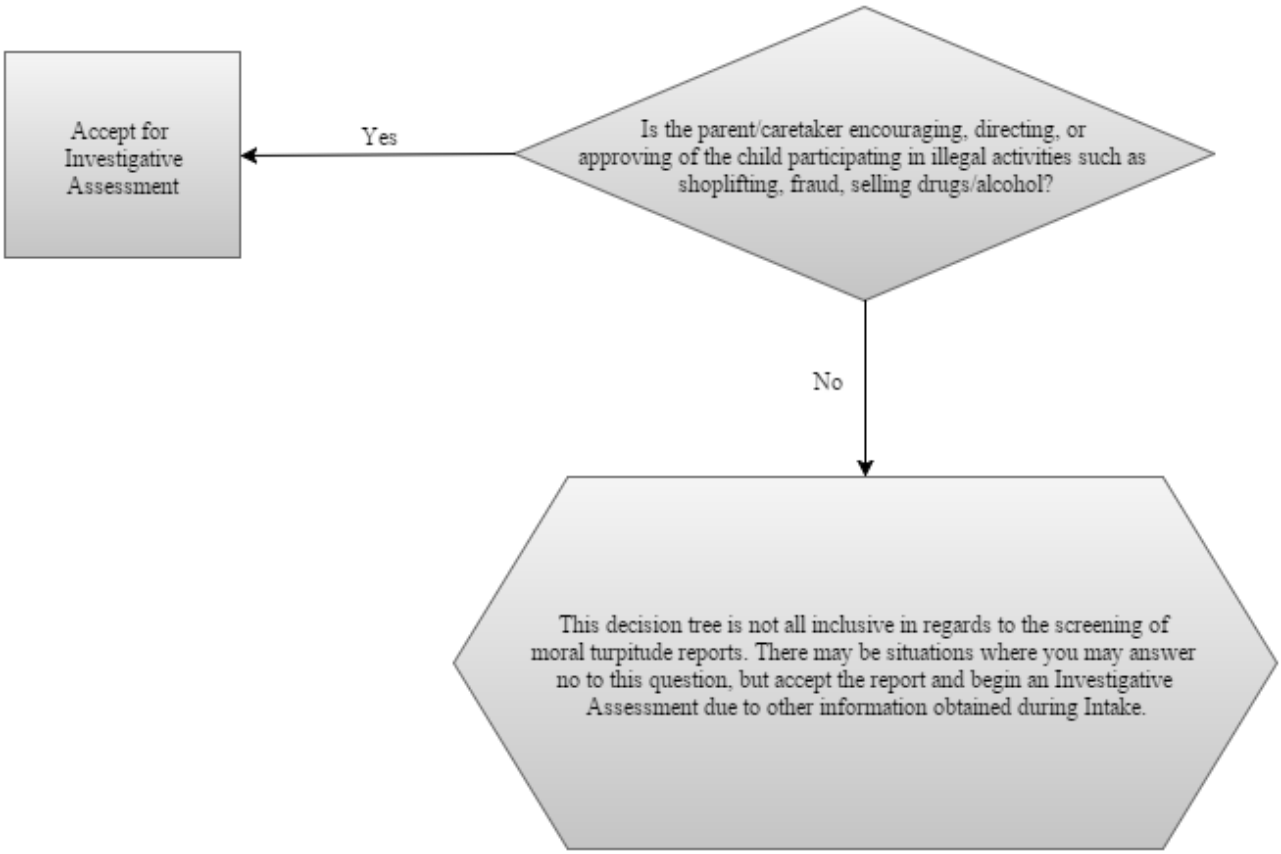
Is the parent/caretaker's isolation of the child causing serious emotional damage?

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.

Moral Turpitude Screening Tool

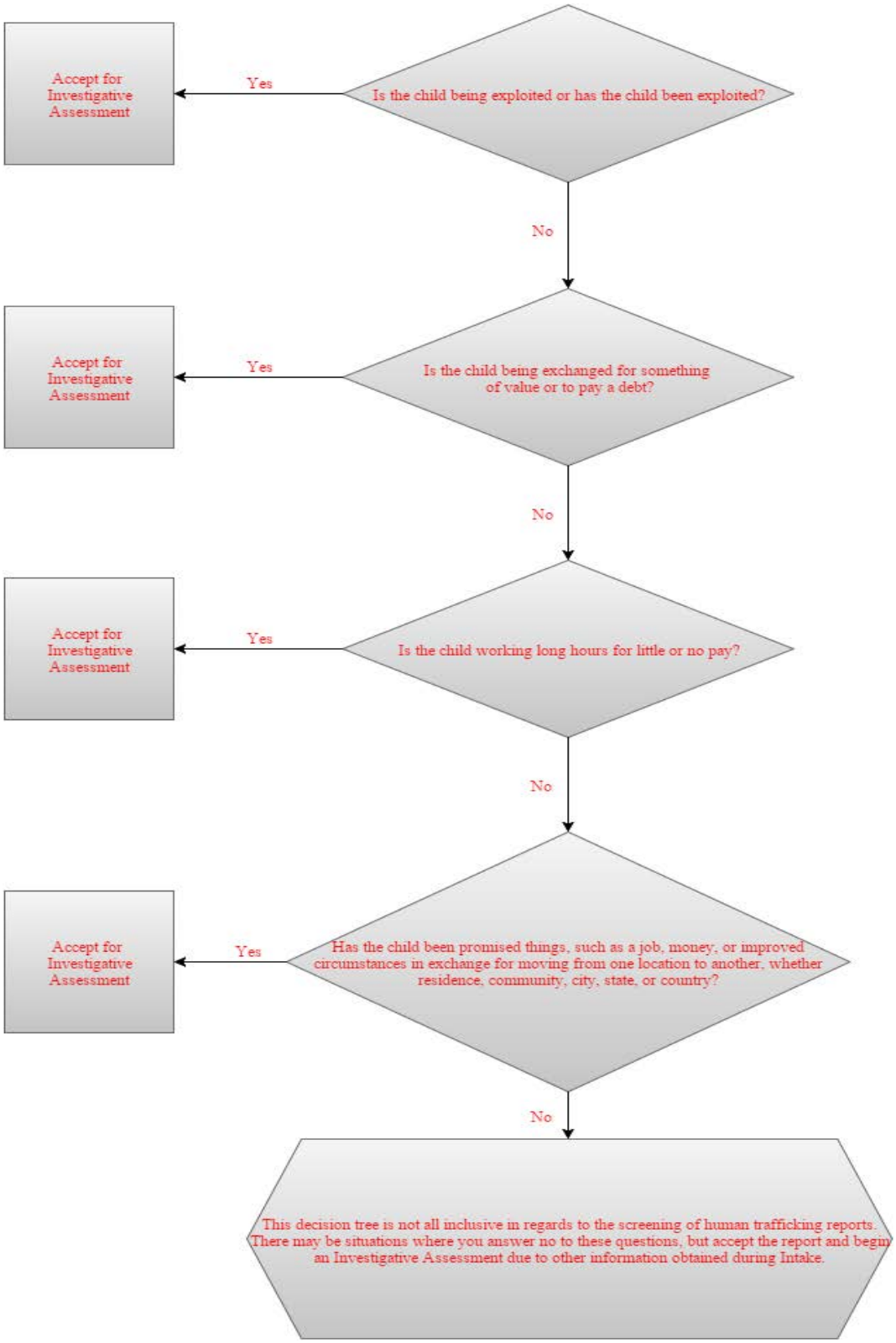


F. Moral Turpitude Screening Tool Directions

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 is required *(In re M.G.__ N.C. App. __.653 S.E.2d 581 (2007))*.

Human Trafficking Screening Tool



G. Human Trafficking Screening Tool Instructions

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

Exploitation of children occurs when individuals buy, trade, or sell children for the purposes of sex or to perform labor. Sexual exploitation 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 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 or traded 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 or traded for sex or labor is an abused child.

Intake workers should gather as much information about the circumstances of the exploitation as the reporter is able to provide, such as:

- whether the child being exchanged for sex or labor
- who is selling/trading/exchanging the child;
- who is buying the child;
- whether there are multiple buyers;
- how often the exchange is taking place;
- where the exchange is taking place; and,
- who else may be involved.

Is the child being exchanged for something of value or to pay a debt?

A parent, guardian, custodian, or caretaker who:

- has directly or indirectly given, promised, or has received anything of value or to satisfy a debt;
- has exchanged his/her child for the purposes of sex or labor; and/or,
- has allowed the child to be exchanged for something of value or to pay a debt for the purpose that the child be used for sex or labor

has trafficked that child or allowed the child to be trafficked. Trafficking the child or allowing the child to be trafficked is abuse.

If the reporter believes the child is being exchanged for something of value or to satisfy a debt, intake workers should gather as much information about the circumstances including but not limited to:

- the circumstances of the debt the parent, guardian, custodian or caretaker is attempting to pay;
- who will be receiving the child in exchange for the debt or something of value (including his/her name and other identifying information, if known, and/or a physical description);
- for what purpose the child is being or has been exchanged;
- when the child is exchanged;
- where the child is exchanged; and,
- how often the child is exchanged.

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, coerces, intimidates, or forces or a child to perform labor, whether or not for compensation or the satisfaction of a debt, or who allows the child to be deceived, 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

The following chart provides other possible indicators of human trafficking. With the exception of the indicator in the "Other" category which states, "anyone under the age of 18 years old involved in a commercial sex act," the observation of one or more of these indicators does not conclusively determine whether a child or youth is being trafficked. A child/youth who exhibits one or more of these indicators may be a victim of trafficking or at risk of being trafficked. However, it is also recognized that it is possible the child/youth may be experiencing some other form of maltreatment or life circumstances that are unrelated to trafficking. These indicators are meant solely to provide child welfare workers information about situations that, if described during a child protective services intake, warrant deeper, more focused questions to determine whether trafficking or another form of maltreatment is present.

Possible Indicators of Human Trafficking

Behavioral:

- Child/youth has significantly older, controlling, or abusive boyfriend/girlfriend;
- Child/youth is fearful, anxious, depressed, submissive, tense or nervous;
- Child/youth avoids eye contact, has numerous inconsistencies in his/her story;
- Child/youth exhibits a sudden or dramatic change in behavior;
- Multiple delinquent charges, school attendance issues;
- Chronic runaway episodes;
- Substance abuse issues

Environmental – Working/Living Conditions:

- Multiple people living in one house;
- Child/youth is isolated, not allowed to participate in community activities, or interact with others;
- Homelessness;
- Child/youth's communication is restricted;
- Child/youth does not/cannot speak for themselves;
- Child/youth works excessively long hours, is unpaid, paid very little or only paid through tips;
- At work the child/youth is not allowed to take breaks, or suffers under unusual restrictions

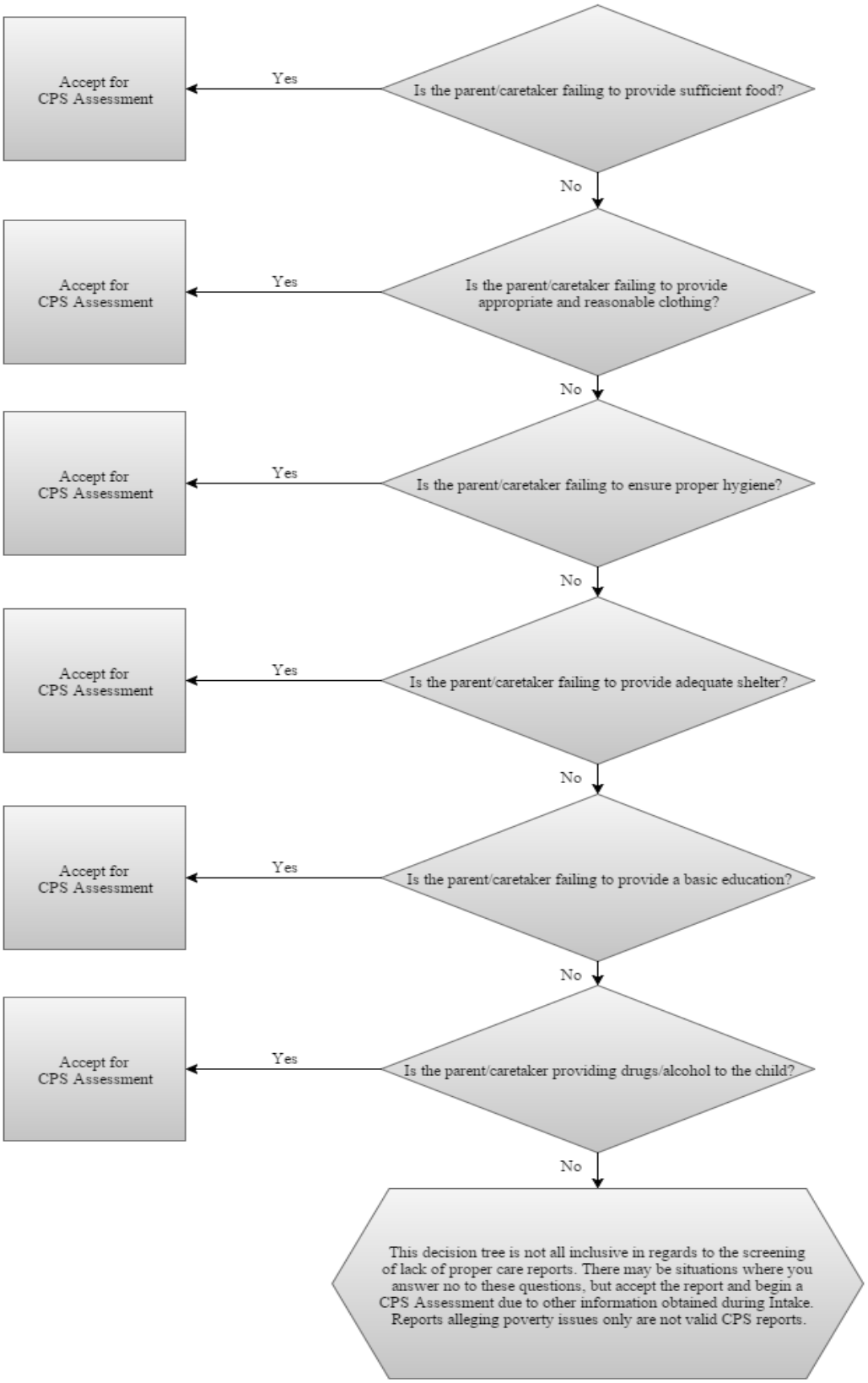
Physical:

- Signs of trauma (physical or other);
- Special indelible marks or tattoos;
- Child/youth lacks healthcare, appears malnourished, or shows signs of torture, physical restraint, confinement, or deprivation;
- Untreated sexually transmitted infections

Other:

- Anyone under the age of 18 years old involved in a commercial sex act;
- Child/youth travels with older adult person who is not a parent, guardian, custodian or caretaker;
- Child/youth owes a debt and is unable to pay it off;
- History of trauma in family of origin, or history of involvement with the child welfare system;
- Reporter indicates that the child/youth has a "boyfriend" or "girlfriend" that they are making money for, or makes any reference to a "pimp";
- Reporter uses words like "slave" or "slave like" or "he/she is treated like a slave," or talks about child being "sold".

Improper Care Screening Tool



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 is required 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. Failure to meet specific dietary needs of the child requires a CPS Assessment.

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

A CPS Assessment to determine whether clothing neglect exists is required 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 is required 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 shall determine whether to undertake an investigation under N.C.G.S. §7B-302. Intervention by DSS is required 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.

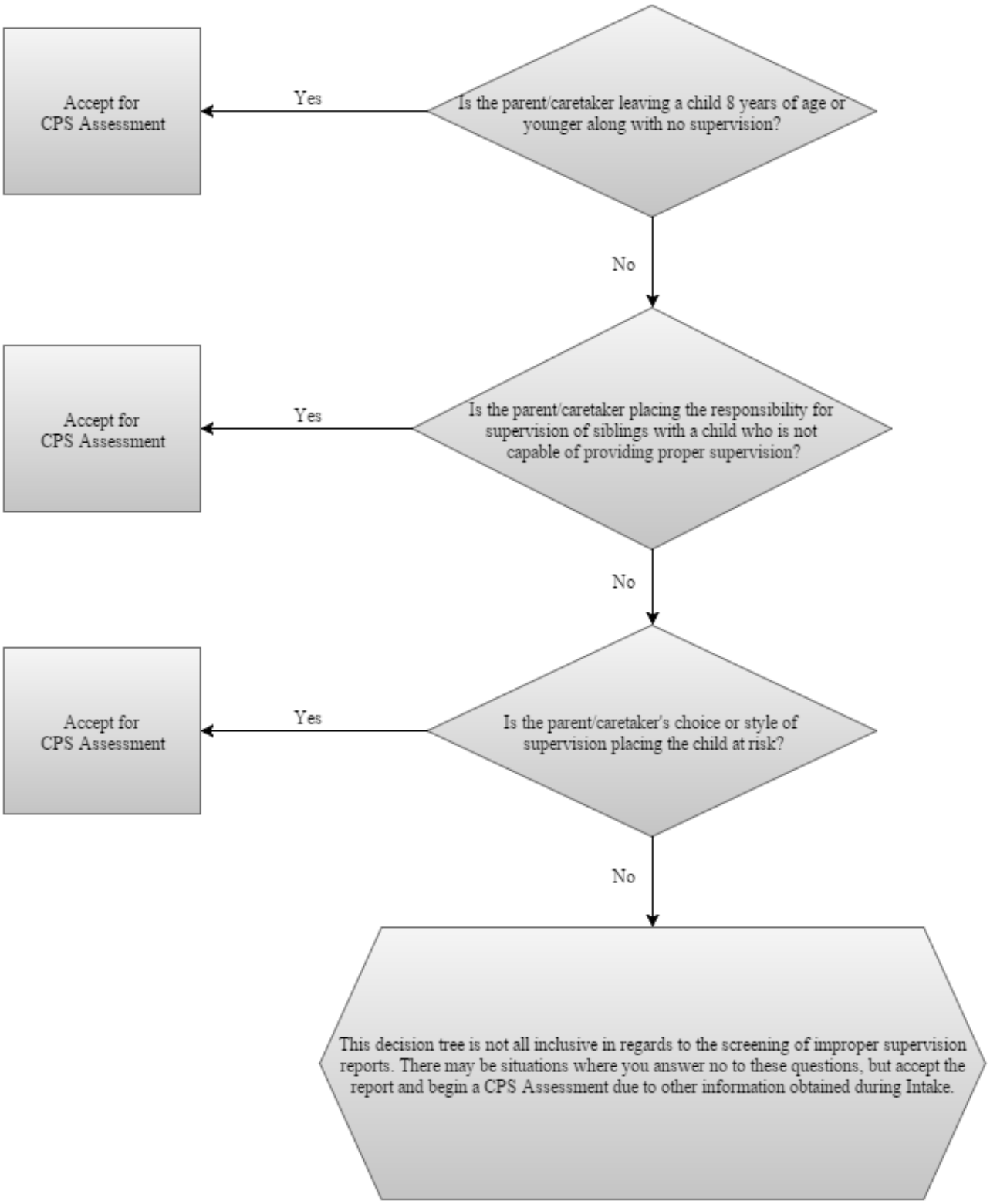
In North Carolina, children between the ages of seven and sixteen are required to be enrolled in a public school or an equivalent, or receive private instruction through home schooling Educational neglect may take the form of failure to home school, to register, or to enroll a child of mandatory school 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 require a CPS Assessment.

Improper Supervision Screening Tool



I. Improper Supervision Screening Tool Directions

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

There is no legal age established for when a child can stay at home alone; however, North Carolina fire code specifies that children under age 8 should not be locked or confined. A report alleging a child under age 6 left alone requires 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 regards 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.

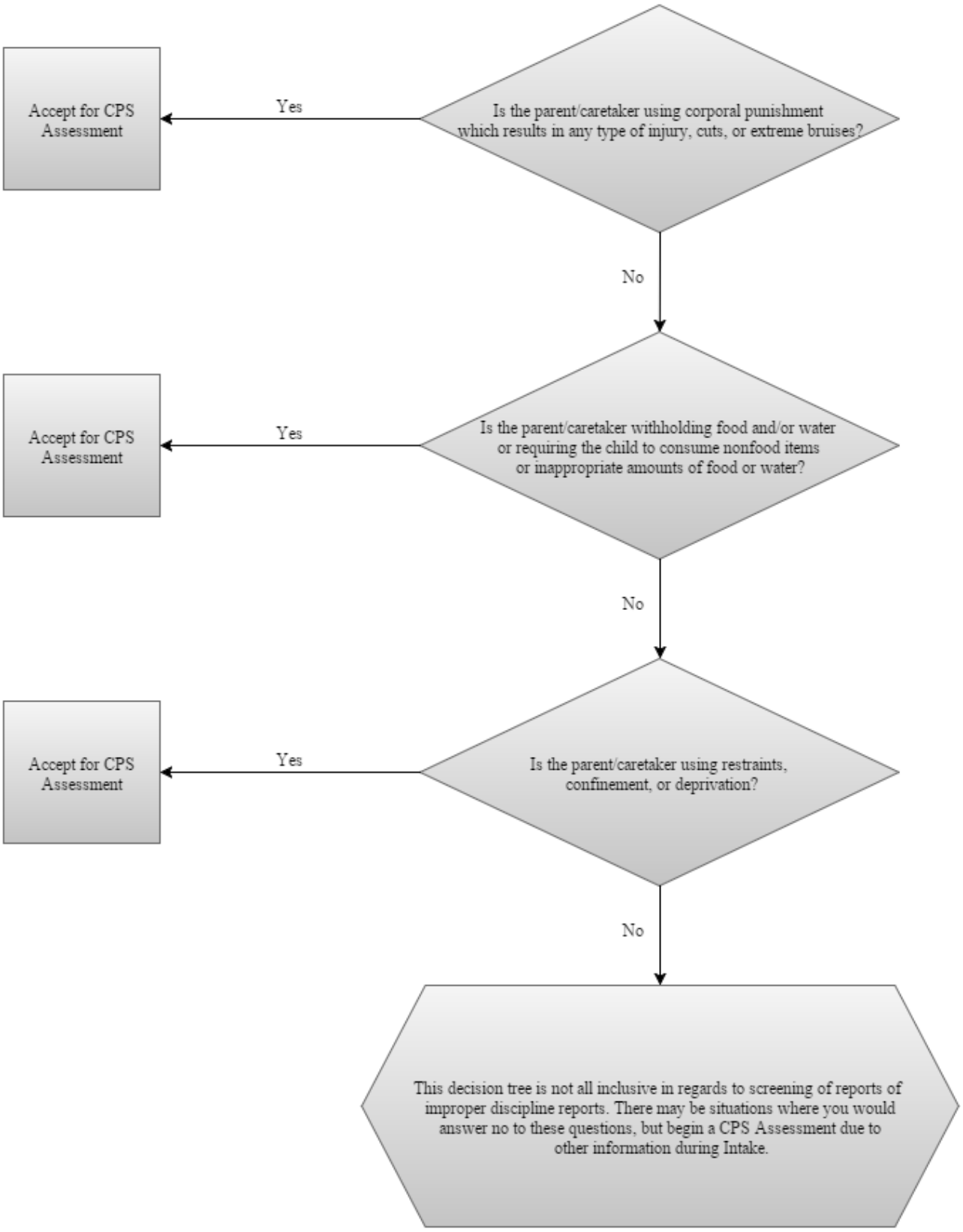
In reports involving children playing in the street, it is important to note the traffic patterns on that street and the age of the child. There are some streets in NC that do not pose a safety risk for children. In a situation where the reporter alleges a young child is playing in a busy street, a CPS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

Reports involving sexual activity between children under age 16 may provide cause to examine the supervision provided by his or her 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



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.

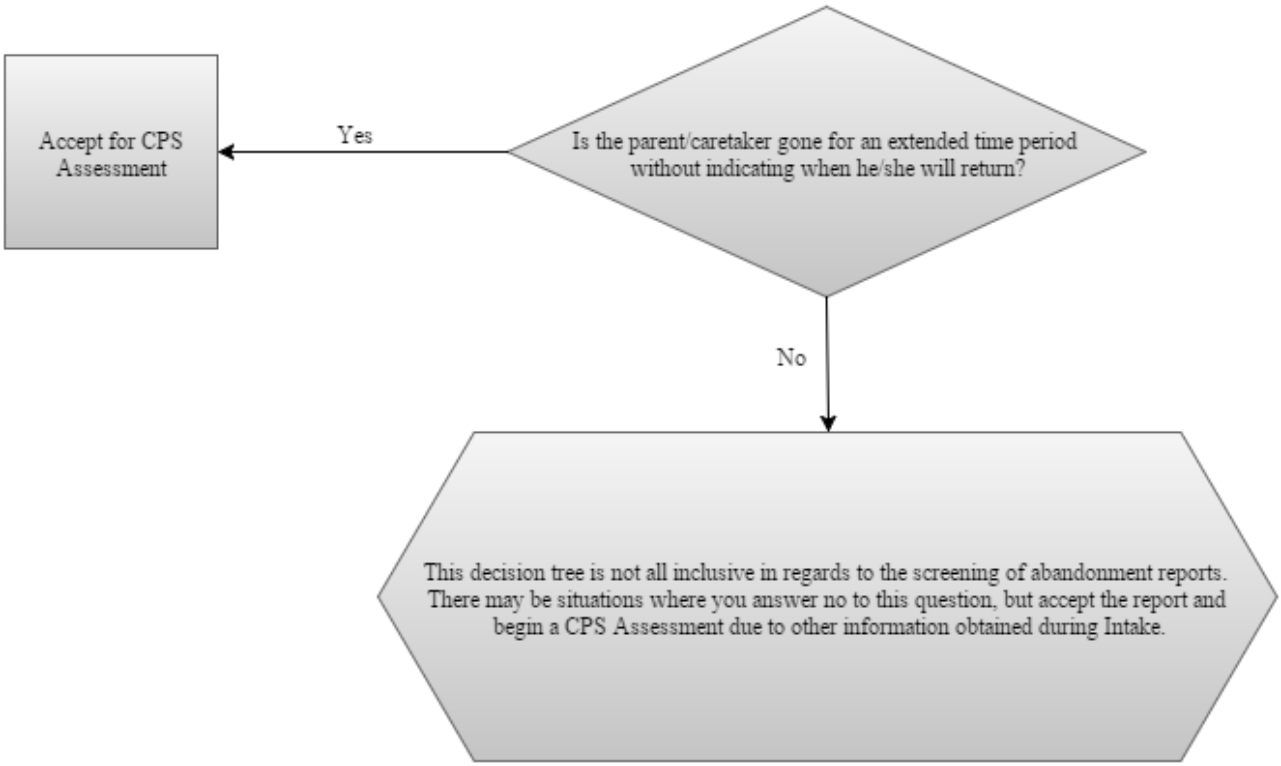
Is the parent/caretaker withholding food and/or water or requiring the child to consume nonfood items or inappropriate amounts of food or water?

A pattern of withholding water or food requires a CPS Assessment. 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.

Abandonment Screening Tool



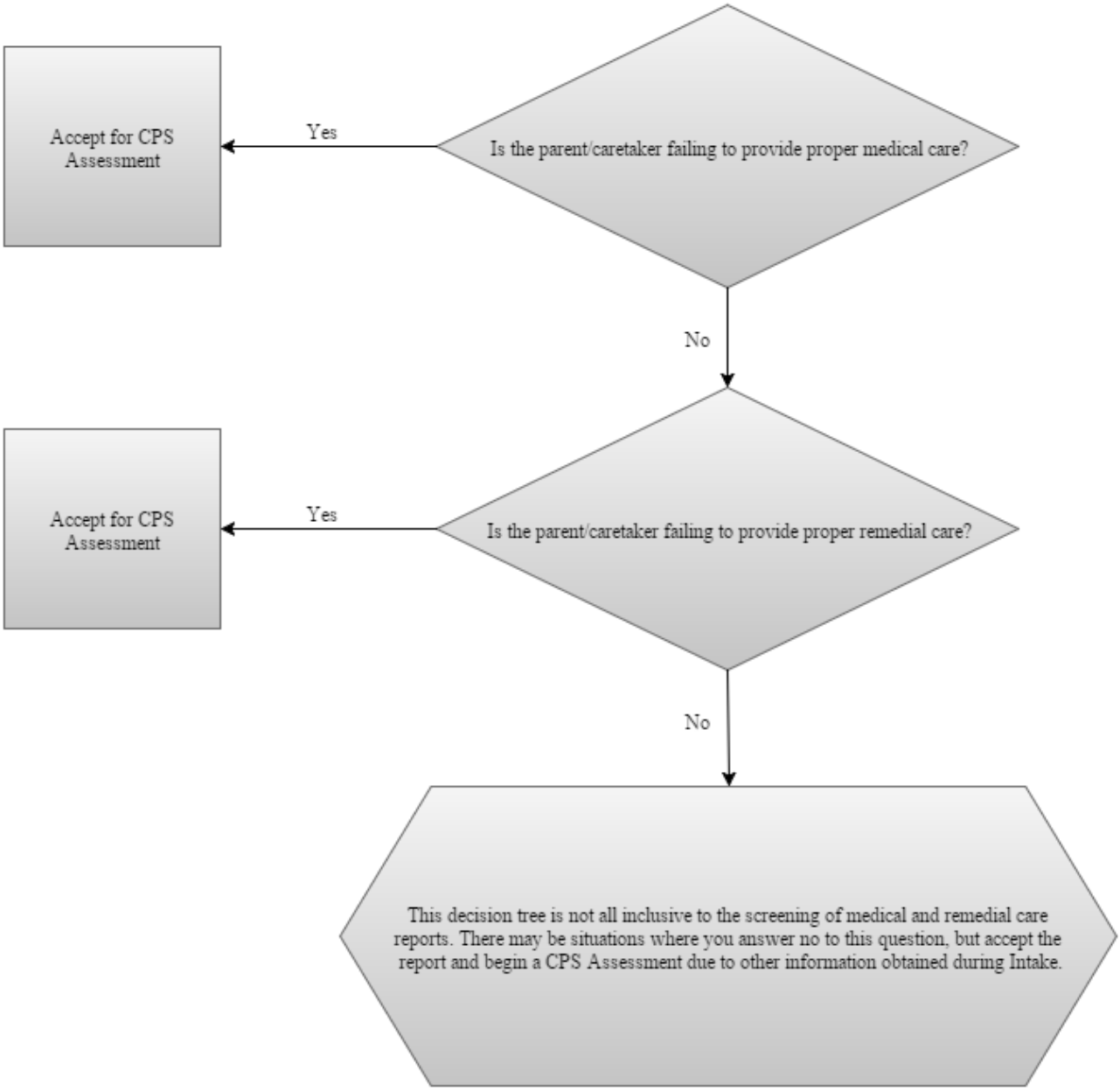
K. Abandonment Screening Tool Directions

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 North Carolina General Statute § 115C-366 (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_115C/GS_115C-366.html), 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 his or her 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 (http://www.ncleg.net/Sessions/2001/Bills/House/PDF/H275v7.pdf) requires CPS reports of abandonment to be initiated immediately. This Act requires that county child welfare agencies 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.

Improper Medical/Remedial Care Screening Tool



L. Improper Medical and Remedial Care Screening Tool Directions

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

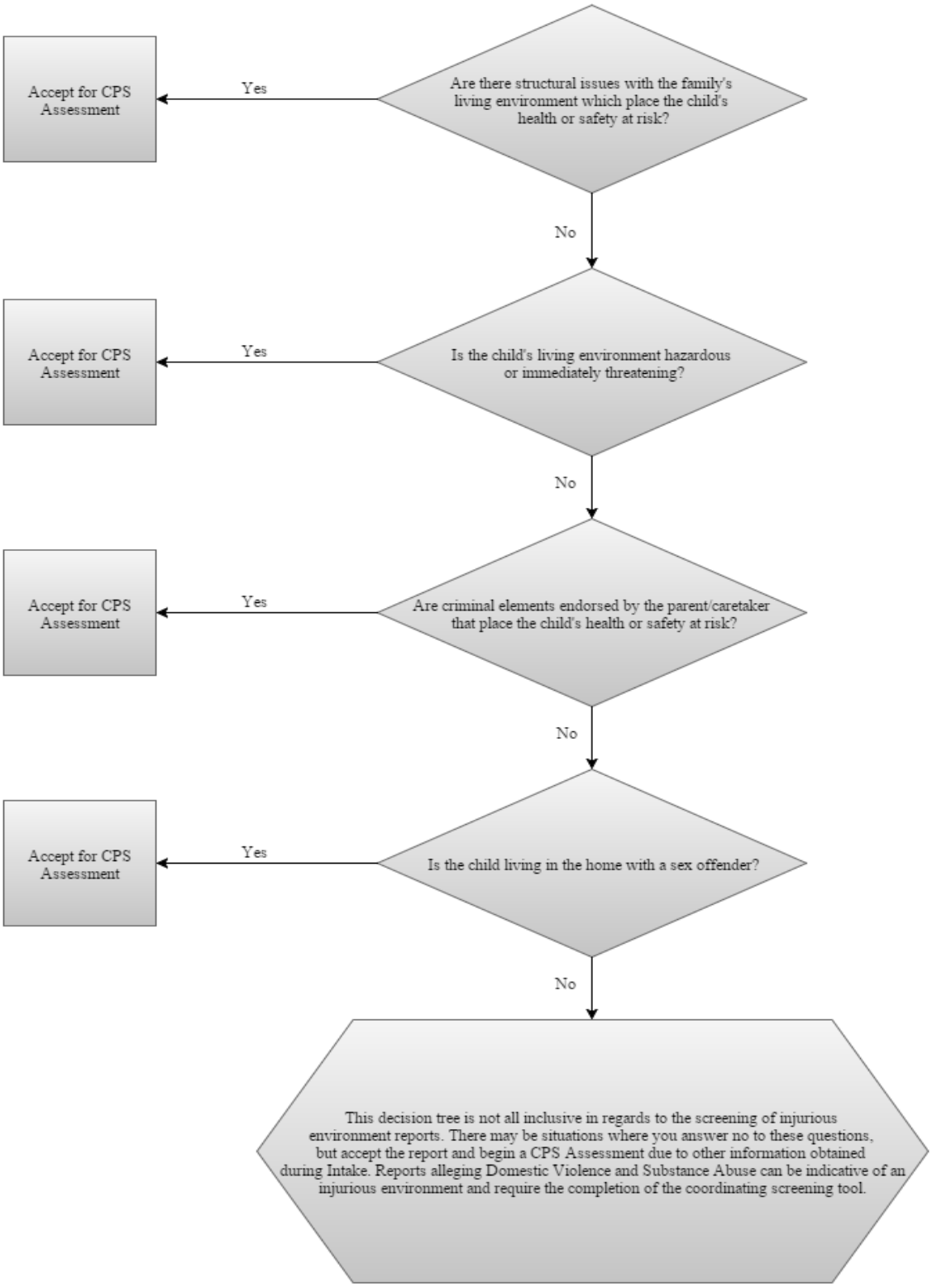
This includes the parent/caretaker's refusal or failure to seek, obtain, and/or maintain those services for necessary medical, dental, or mental health care. This category includes the parent/caretaker not seeking treatment for the child's immediate, chronic, and/or dangerous medical condition or does 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



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.

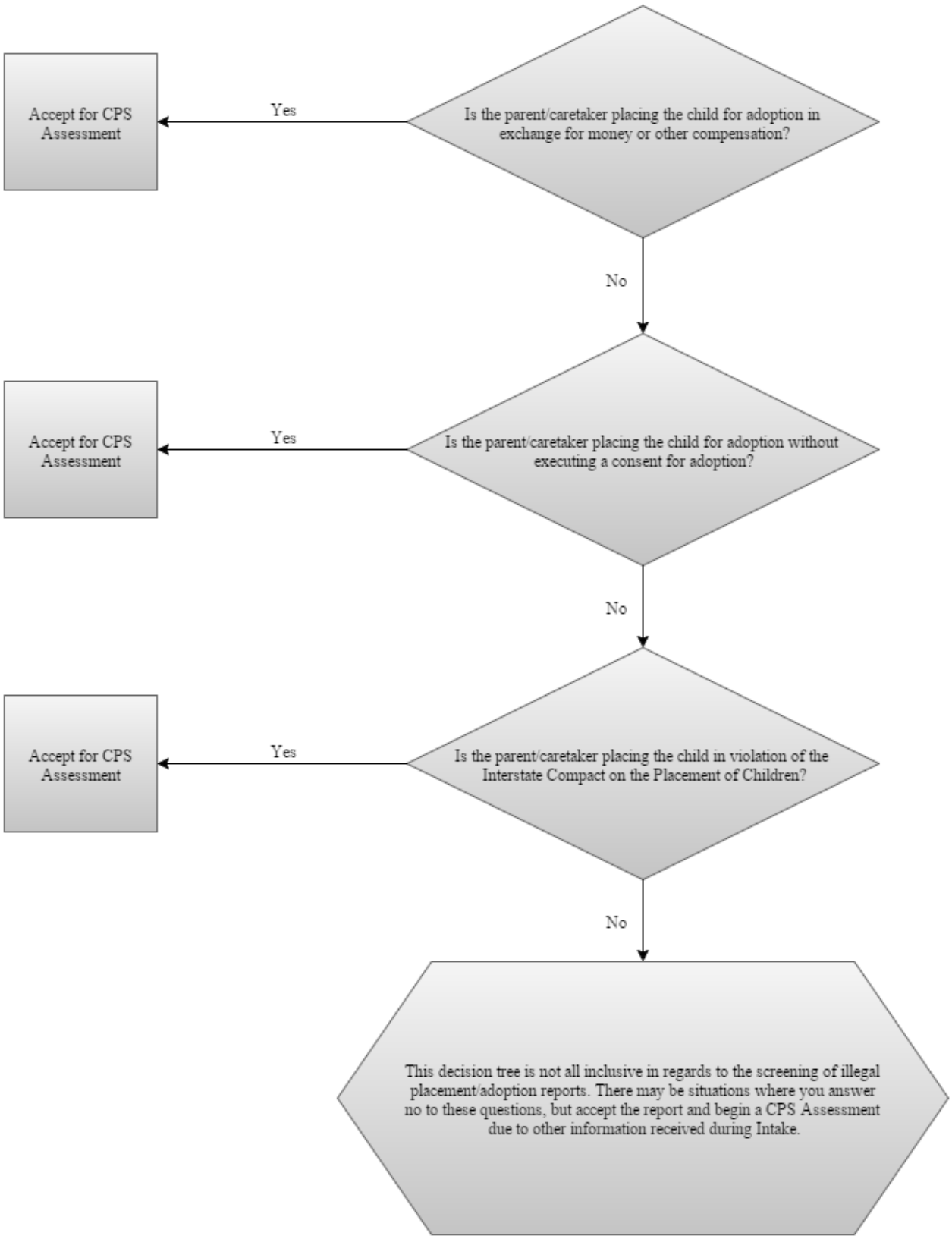
Are criminal elements endorsed by the parent/caretaker that place the child's health or safety at risk?

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 shall be based on current risk. If it is believed the children are at risk, the report shall be accepted for CPS assessment. For reports alleging domestic violence and substance abuse, please consult the **Domestic Violence and Substance Abuse Maltreatment Screening Tools.**

Illegal Placement/Adoption Screening Tool



N. 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.

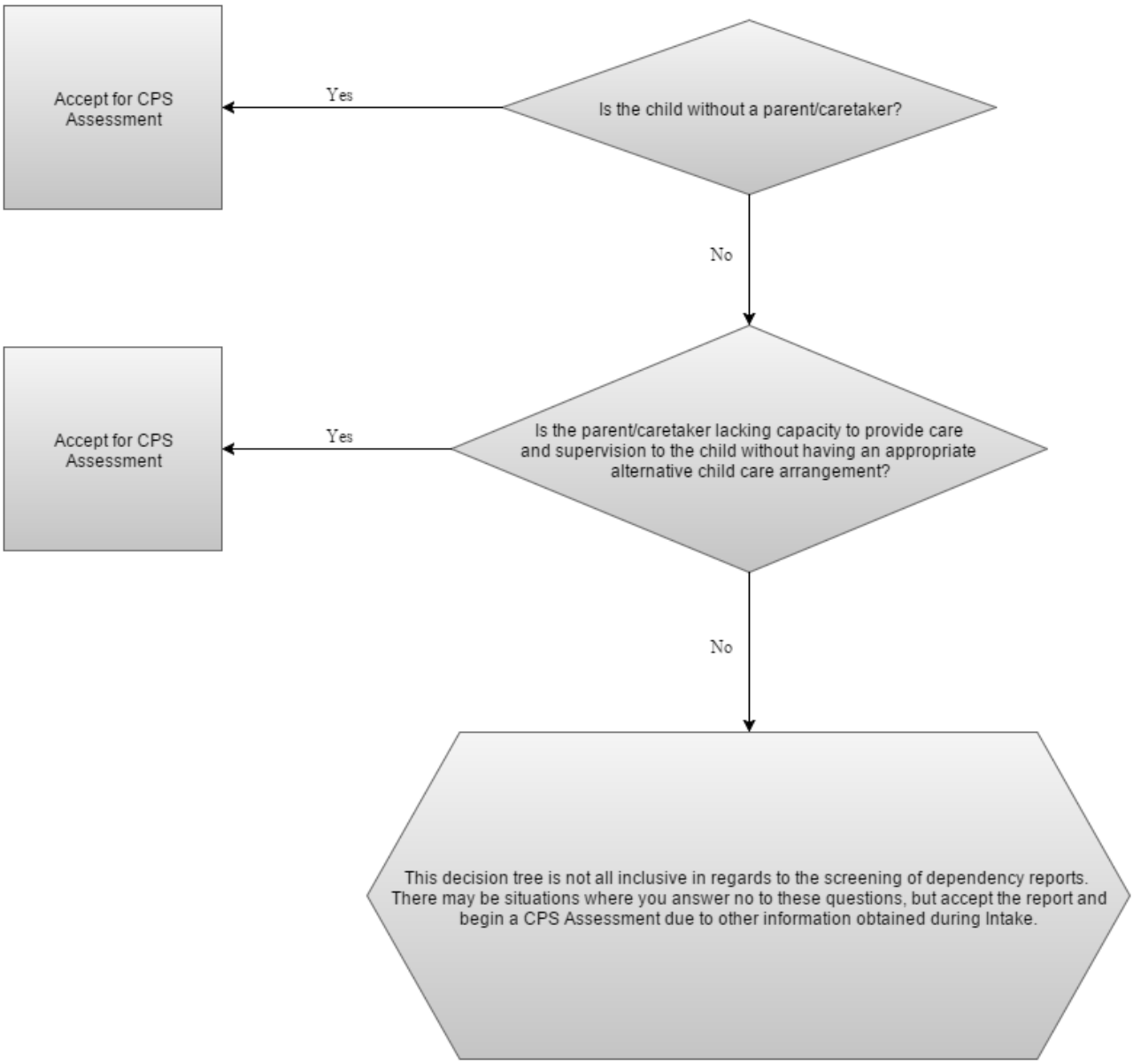
Is the parent/caretaker placing the child for adoption without executing a Consent for Adoption?

A parent/caretaker can not 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?

The Compact 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. The Compact 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



O. Dependency Screening Tool Directions

Is the child without a parent/caretaker?

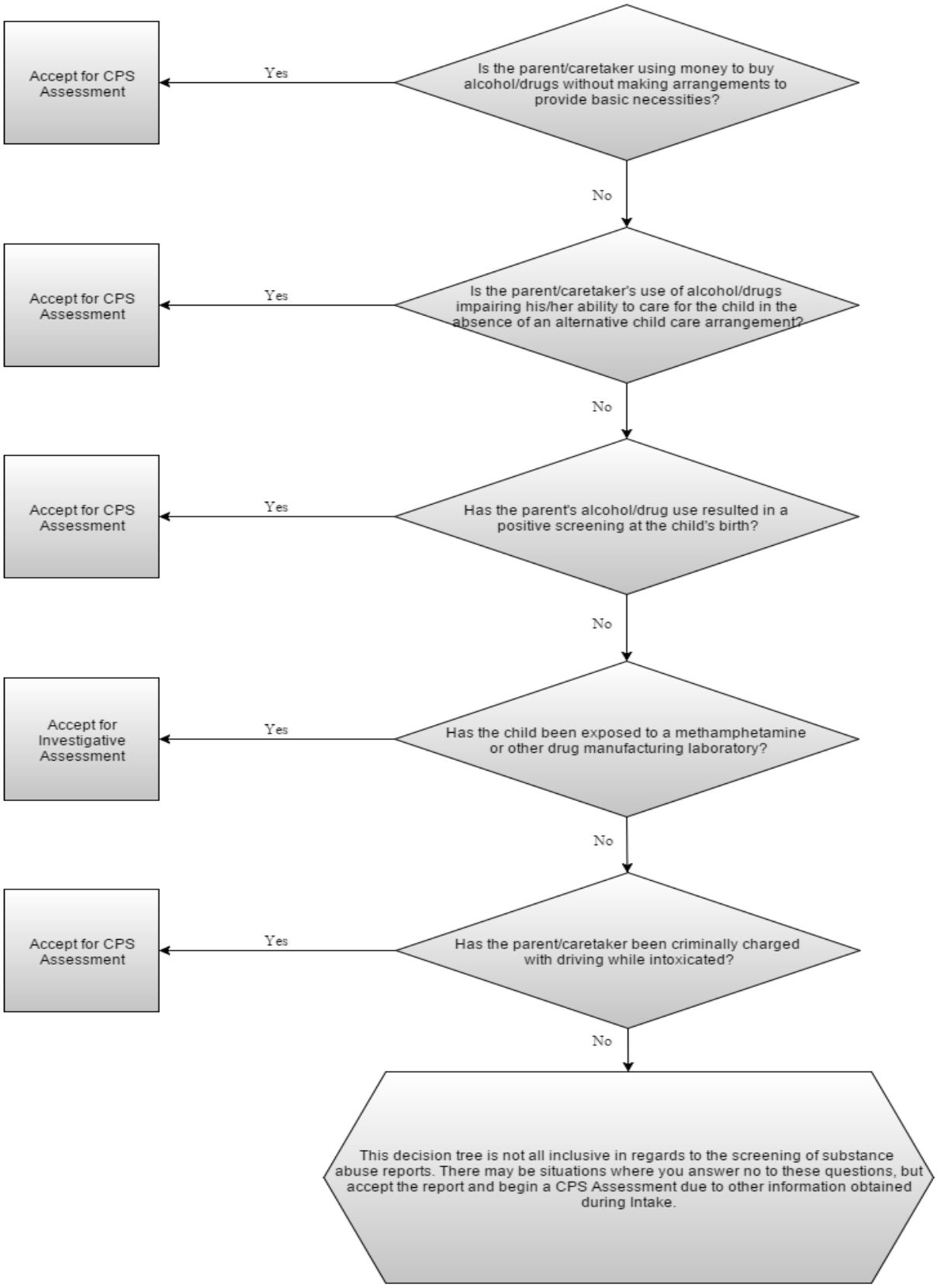
A child can be dependent due to the absence of a parent/caretaker. The parent/caretaker's absence may be due to hospitalization, incarceration, or any situation in which the parent/caretaker is unavailable and there are no alternative arrangements to provide appropriate care. Dependency also refers to 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.

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 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 requires a CPS Assessment.

Substance Abuse Screening Tool



P. 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 abuser's use rises to the level that he or she is willing to place his or her needs to satisfy the addiction above providing proper care to the child, it is problematic and shall 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 his or her 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 his or her 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 shall 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 **shall** 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.

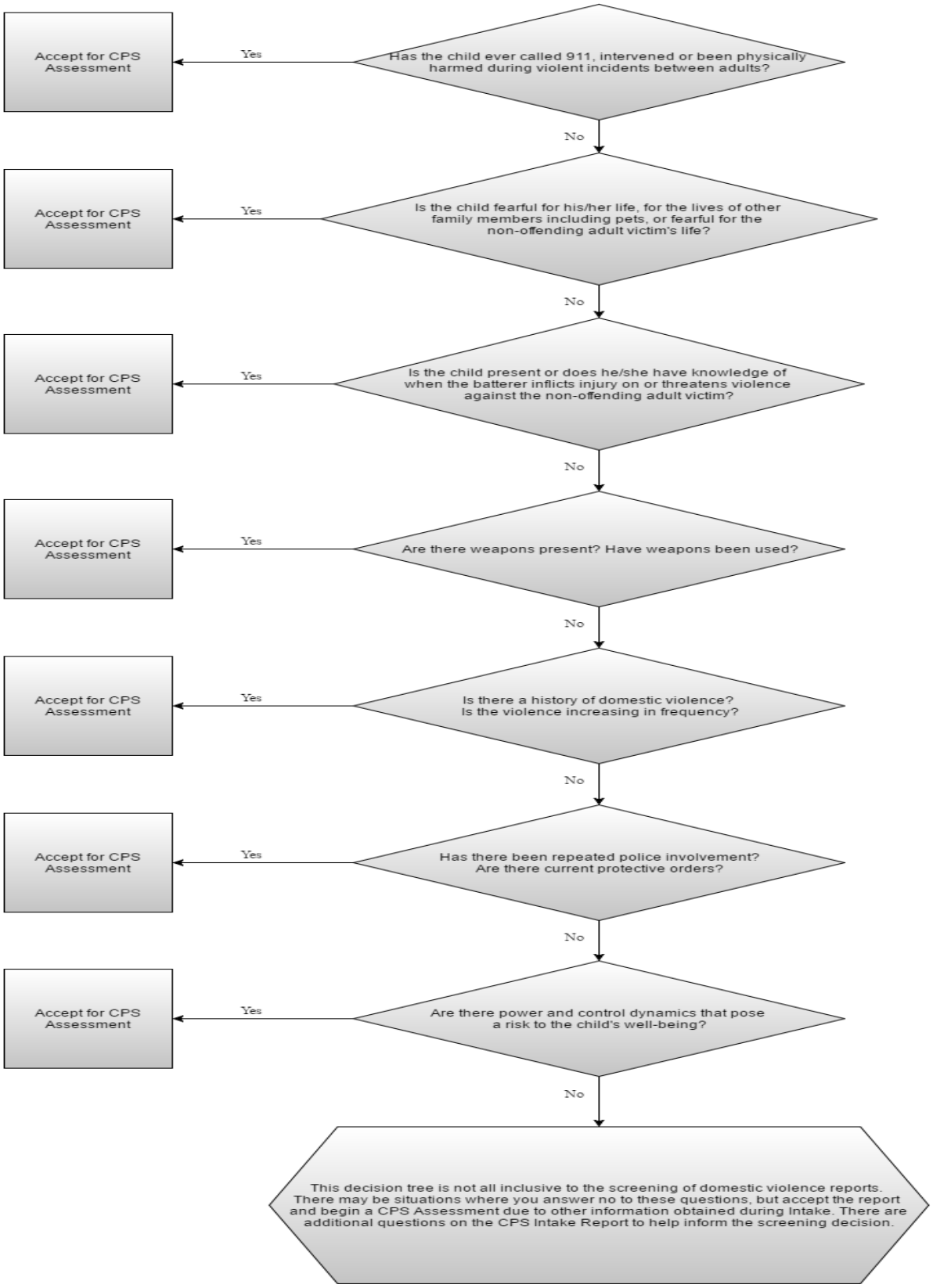
Has the parent's alcohol/drug use resulted in a positive screening at the child's birth?

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 shall 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 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 clandestine laboratory shall be accepted for an Investigative Assessment.

Domestic Violence Screening Tool



Q. 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, the Structured Intake Report requires that every reporter is 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 his or her 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 his or her life or for the lives of any family members is evidence that the violence is having a serious impact on his or her 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 his or her age. This includes not only a situation where a child is present to witness violence, but also shall 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.

VI. ASSIGNMENT OF REPORTS FOR CPS ASSESSMENT

When a report meets the statutory criteria of a valid CPS report, the county child welfare agency shall determine whether to approach the family using either the Family Assessment response or Investigative Assessment response. The Multiple Response System (MRS) allows county child welfare agencies to respond differently to reports of neglect and dependency. Counties are not allowed to respond differently to reports of abuse, abandonment, and other special types of reports.

In all cases, the report must be screened based upon the allegations of the reporter, and if true, meet the statutory criteria of a valid CPS report. Regardless of the assignment to either CPS Assessment response, the agency has a valid CPS report, and is mandated by law to take action to ensure the safety of the child through the provision of protective services.

The Family Assessment response is appropriate for reports that contain allegations meeting the statutory definitions of neglect, if true according to North Carolina General Statute §7B-101 (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-101.html). 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/she has not 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.

The Family Assessment response is appropriate for reports meeting the statutory definition of dependency, if true according to North Carolina General Statute §7B-101 (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-101.html).

Regardless of the allegations, all reports concerning a child in the custody of a county child welfare agency, a family foster home, or a residential facility shall be assigned to the Investigative Assessment response, and completed according to policy.

Nothing replaces the professional judgement of the Intake social worker and Intake 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.

The Investigative Assessment response is appropriate for reports that contain allegations meeting the statutory definition of abuse, if true according to North Carolina General Statute § 7B-101 (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/

Chapter_7B/GS_7B-101.html), as well as special types of neglect reports. These are 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 G.S. § 14-27.2; rape of a child by an adult offender, as provided in § 14-27.2A; second degree rape, as provided in G.S. § 14-27.3; first-degree sexual offense, as provided in G.S. 14-27.4; sexual offense with a child by an adult offender, as provided in § 14-27.4A; second degree sexual offense, as provided in G.S. § 14-27.5; intercourse and sexual offenses with certain victims; consent no defense, as provided in G.S. 14-27.7; unlawful sale, surrender, or purchase of a minor, as provided in G.S. § 14-43.14; crime against nature, as provided in G.S. 14-177; incest between certain near relatives, as provided in G.S. § 14-178; incest between uncle and niece and nephew and aunt, as provided in G. S. § 14.179; preparation of obscene photographs, slides, or motion pictures, as provided in G.S. § 14-190.5; employing or permitting minor to assist in offense under Article (26), as provided in G.S. § 14-190.6; dissemination of obscene material to minors under the age of 16 years, as provided in G.S. § 14-190.7; dissemination of obscene material to minors under the age of 13 years, as provided in G. S. § 14-190.8; displaying material harmful to minors, as provided in G.S. § 14-190.14; disseminating harmful material to minors; exhibiting harmful performances to minors, as provided in G. S. § 14-190.15; first degree sexual exploitation of a minor, as provided in G.S. § 14-190.16; second degree sexual exploitation of a minor, as provided in G. S. § 14-190.17; promoting prostitution of a minor, as provided in G.S. § 14-190.18; and taking indecent liberties with children, as provided in 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.

The special type of neglect reports appropriate for an Investigative Assessment response include cases in which the allegations include the existence of the following:

- a child fatality when there are surviving children in the family;
- a child in custody of county child welfare agency, family foster homes, or residential facilities;
- a child taken into protective custody by physician or law enforcement, pursuant to G.S. §7B-308 (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-308.html) and §7B-500 (http://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-500.html);
- the medical neglect of disabled infants with life threatening condition, pursuant to Public Law 98-457 (Baby Doe);
- a child hospitalized (admitted to hospital) due to suspected abuse/neglect;
- abandonment;
- the suspected or confirmed presence of a methamphetamine lab where children are exposed;

- a child less than a year who has been shaken or subjected to spanking, hitting or other form of corporal punishment.

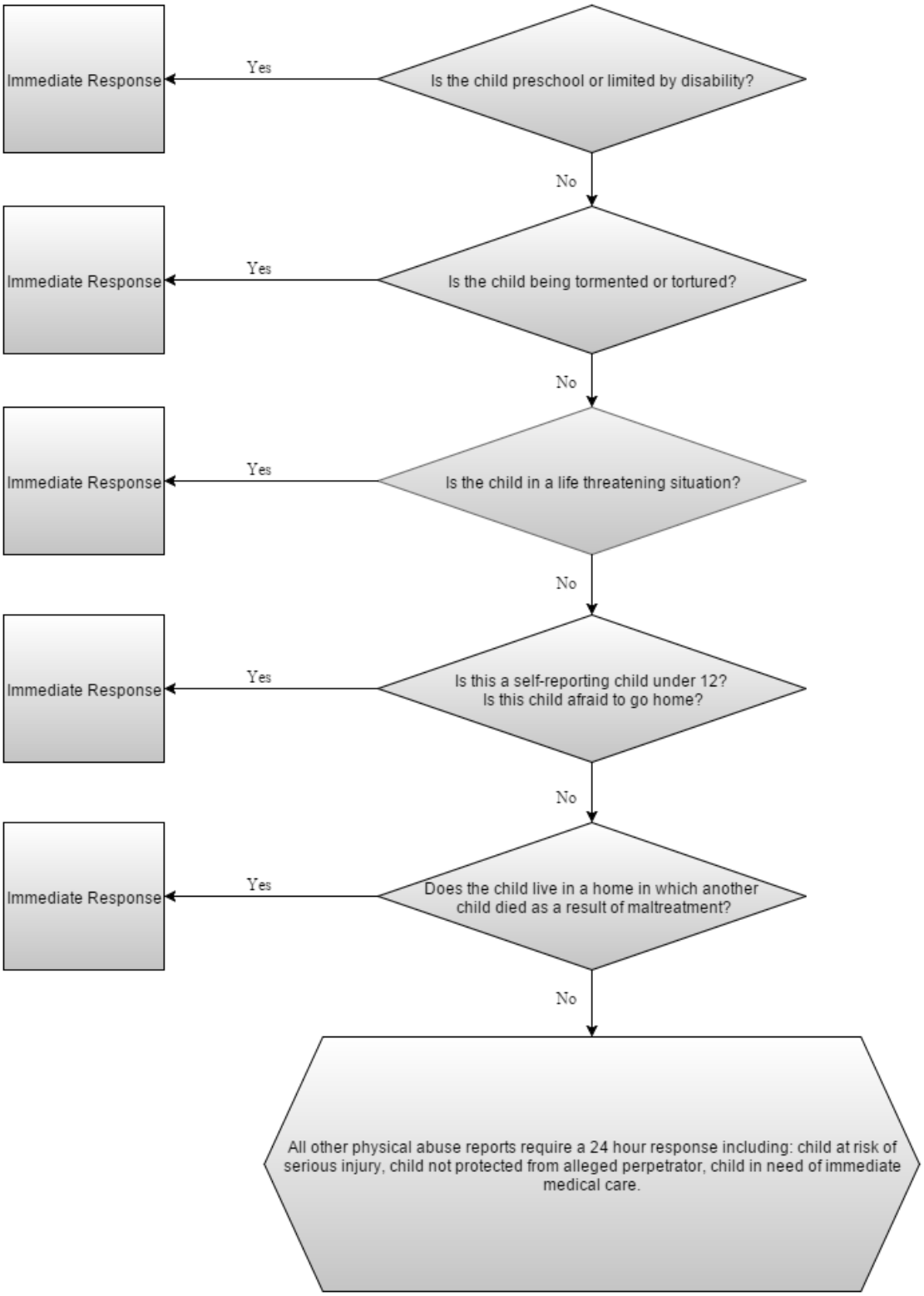
VII. RESPONSE PRIORITY AND PROCEDURES

The purpose of the response priority decision trees is to determine how quickly the CPS Assessment shall be initiated. The decision trees structure this analysis to determine a priority level response.

Which Cases:	The response priority decision trees are to be consulted on every new CPS report that is assigned for CPS Assessment. This includes telephone and all other means of referral, and includes information on new families and families already known to the agency; whether or not a case is currently open to CPS Assessments, CPS In-Home Services, or Child Placement Services.
Who:	Every staff member who has the responsibility of CPS Intake.
Decision:	Response priority decision trees determine how quickly a CPS Assessment shall be initiated.
When:	The Intake social worker consults the corresponding Priority Response Decision Tree in order to determine how quickly contact needs to be made with the family to begin the CPS Assessment.
Appropriate Consultation:	Please refer to the complete definitions. Consult the corresponding Priority Response Decision Tree for each type of maltreatment that was previously determined to require a CPS Assessment. For each tree, begin at the first question box, and proceed by answering the questions yes or no. When the answer to any question is yes, this is the termination point. The termination point indicates whether structured decision-making recommends a response immediately, 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. Begin the decision-making process by consulting the decision tree that corresponds to the maltreatment allegation that is the most egregious.
Response Times:	Immediately, within 24 hours, or within 72 hours

If a decision is made to initiate the report later than immediately, document the rational for delaying the response. The intent of an immediate response time is that the response occurs at once, which is by initiating the CPS Assessment after completing the Intake report. The response should never exceed 24 hours in a report alleging physical or sexual abuse. The response should never exceed 72 hours in report alleging neglect or dependency. The responsibility to ensure safety begins at Intake. If it is believed that delaying the response in fact serves to better protect the child, document the reason clearly.

Physical Abuse Response Priority Decision Tree



A. 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 considered high risk and requires an immediate response.

Is the child being tormented or tortured?

Tormenting and torture are considered to be aggravated circumstances and requires an immediate response.

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 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.

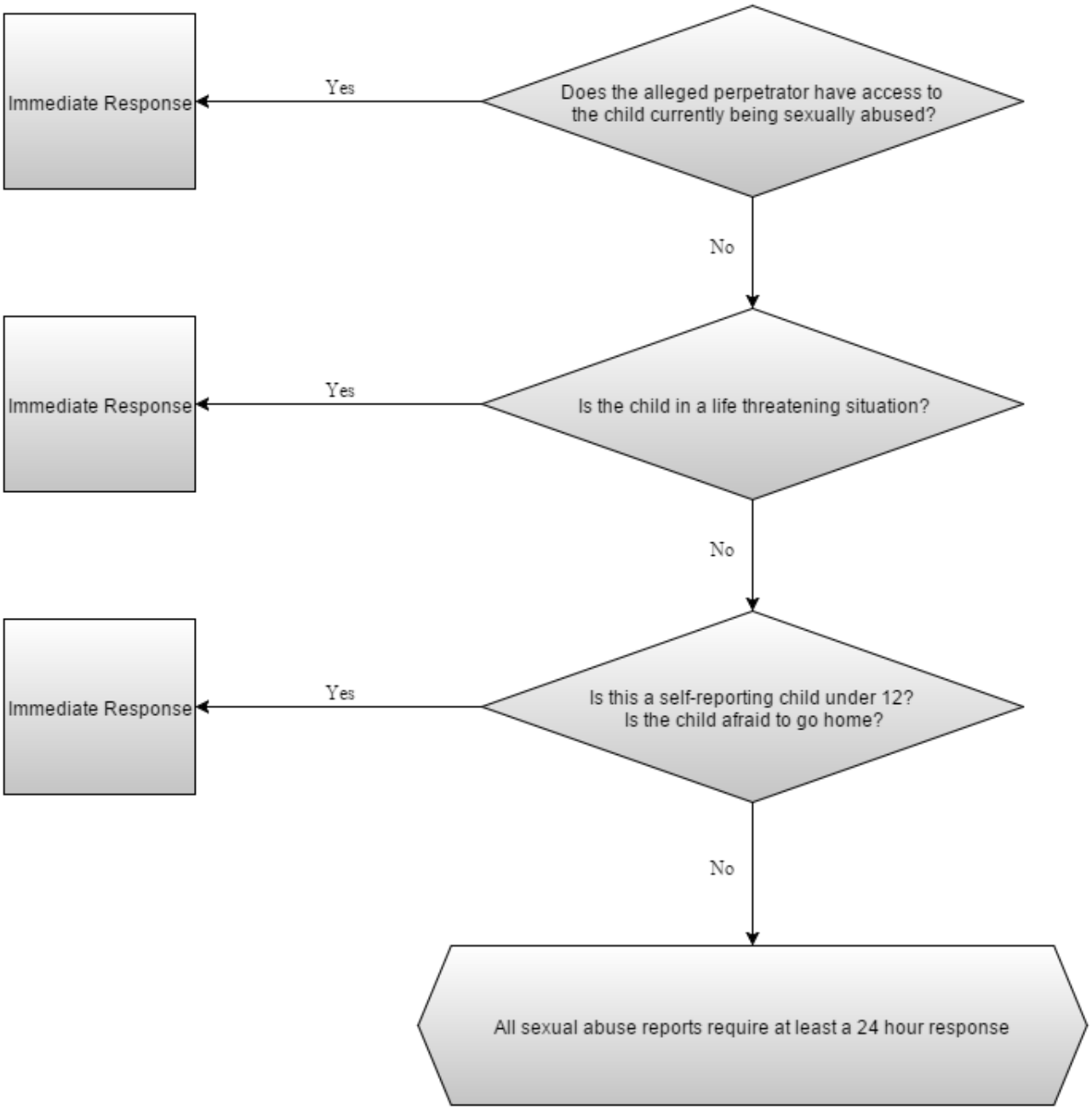
Is this a self-reporting child under 12? Is this child afraid to go home?

A child under the age of 12 who contacts the county child welfare agency directly as a possible abuse victim is particularly concerning and requires an immediate response. Based on credible threats made by a parent/caretaker, a child's behavioral indicators of fear, as well as a history of abusive behavior that is 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 requires an immediate response.

Sexual Abuse Response Priority Decision Tree



B. 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 is required. 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.

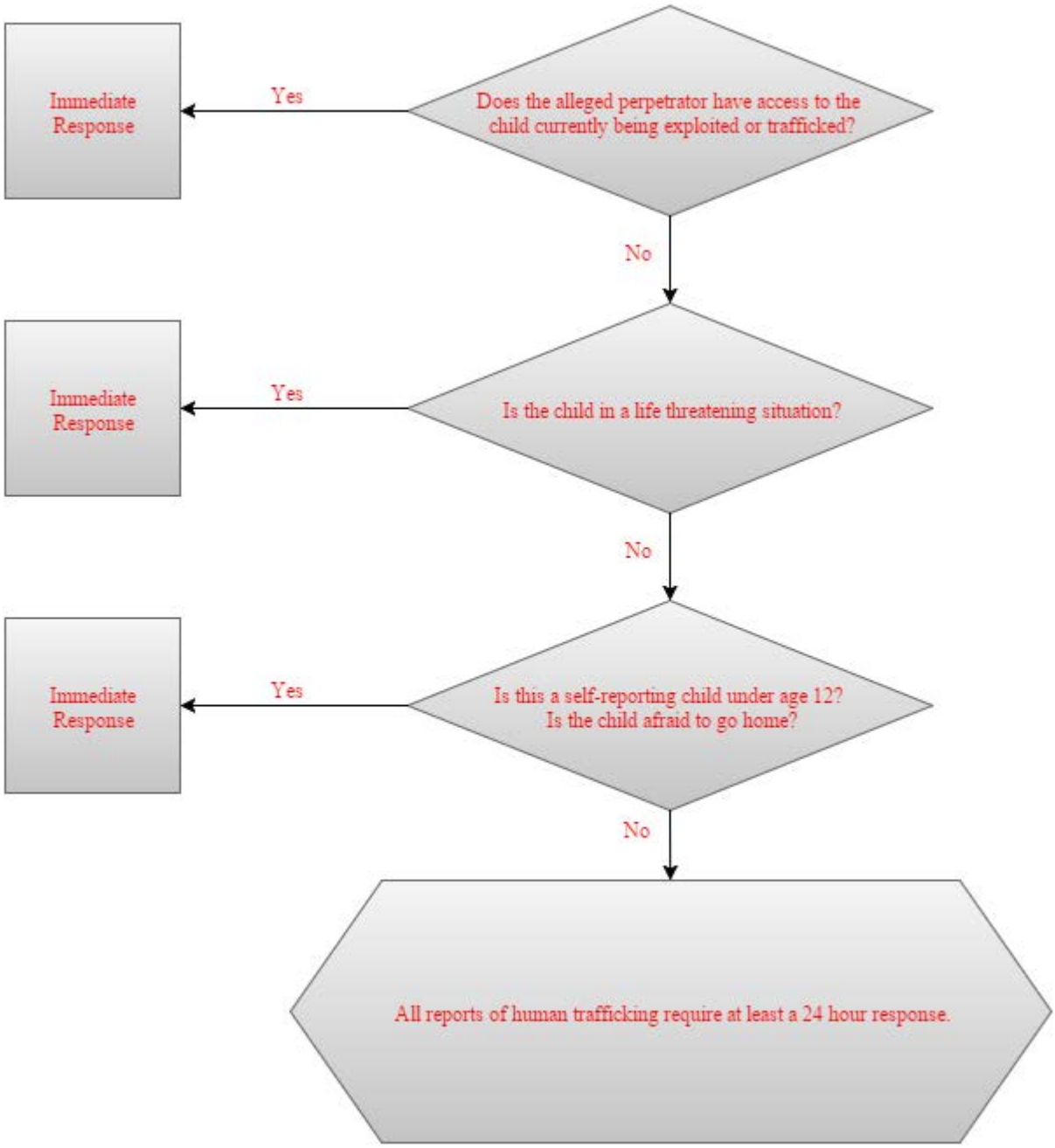
Is the child in a life-threatening situation?

If the alleged sexual abuse presents a threat to the child's life, an immediate response is required.

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 requires an immediate response. Based on credible threats made by a parent/caretaker, a child's behavioral indicators of fear also suggest a potentially dangerous situation and require an immediate response.

Human Trafficking Response Priority Decision Tree



C. 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 is required. 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 is required.

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 requires an immediate response. Based on credible threats made by a parent/caretaker, a child's behavioral indicators of fear also suggest a potentially dangerous situation and require an immediate response.

Neglect Response Priority Decision Tree

D. 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. Examples of 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 his or her 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 requires an immediate response.

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 requires an immediate response. Based on credible threats made by a parent/caretaker, a child's behavioral indicators of fear also suggest a potentially dangerous situation and require an immediate response.

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 that include allegations that a child resides in the home where another child has been abused or has died as a result of abuse or neglect requires an immediate response. It is relevant to the screening of neglect reports to determine if the child is living in a home where another child has died as a result of abuse or neglect, regardless of whether the abuse or neglect was known and substantiated.

Is the child in immediate need of medical care?

CPS reports that include allegations that the child needs immediate, but not necessarily lifesaving medical care requires an immediate response. 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.

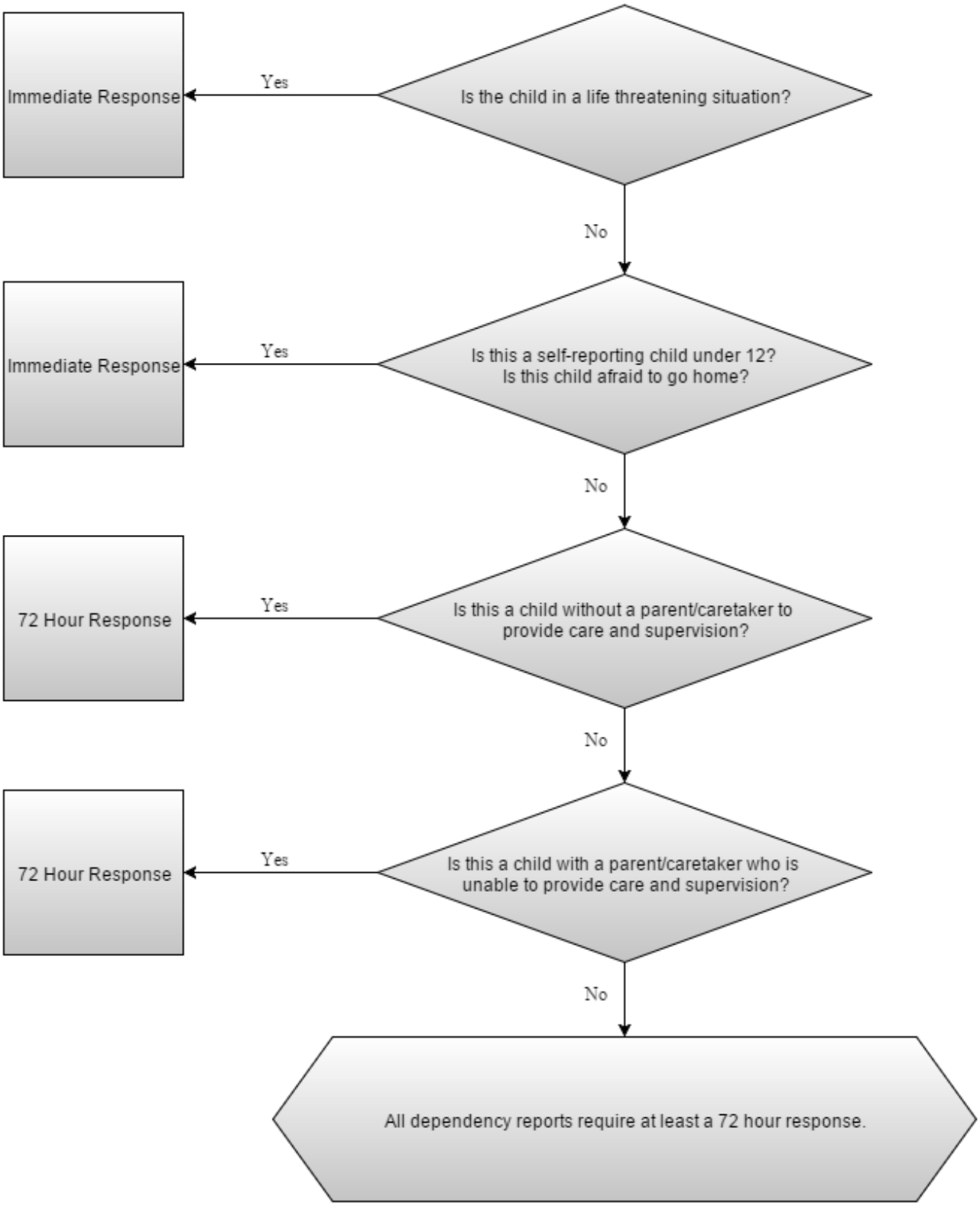
Is the child at risk of serious injury?

Based on the parent's ability to provide appropriate supervision and care, CPS reports that include 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 require~~s~~ a response with 24 hours; all other improper discipline reports require a response within 72 hours. If the bruises reported are not currently visible, a response within 72 hours is required.

Dependency Response Priority Decision Tree



E. 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 is required.

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 requires an immediate response.

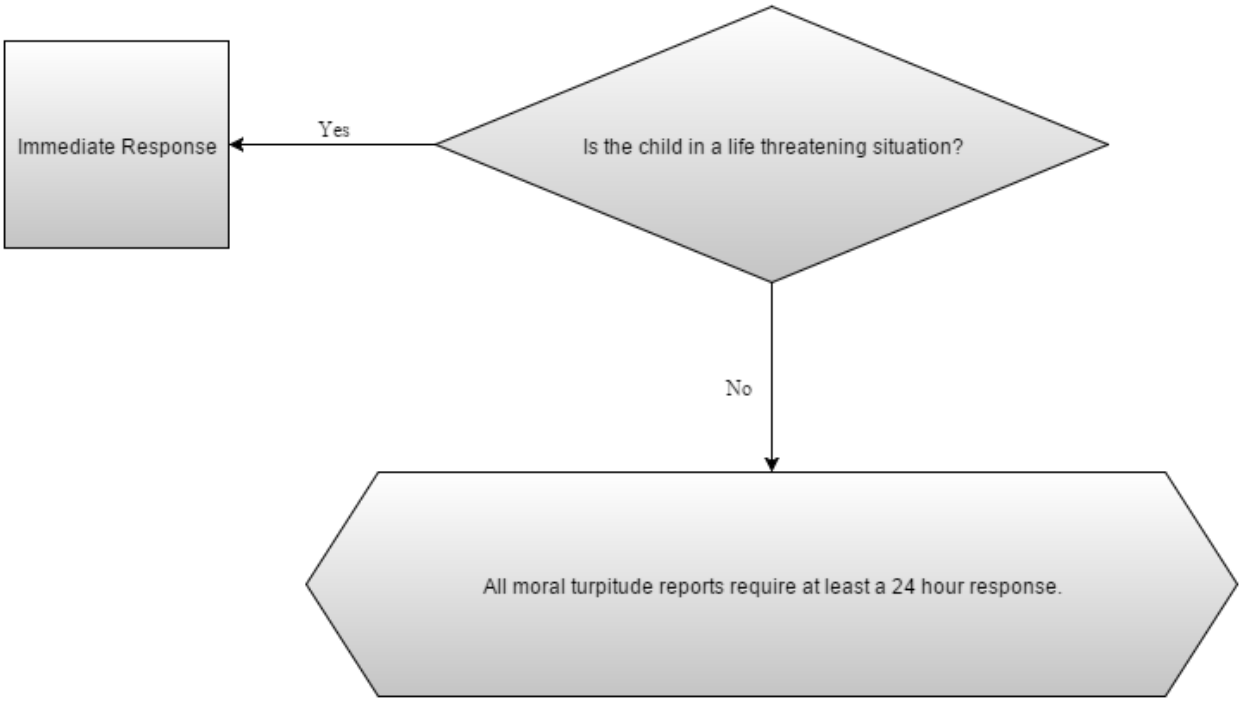
Is this a child without a parent/caretaker to provide care and supervision?

The response time to CPS reports containing allegations that the child is without a parent/caretaker shall be based upon the absence or unwillingness 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 shall be based upon the parent/caretaker's capacity (or lack thereof) to meet the child's needs.

Moral Turpitude Response Priority Decision Tree

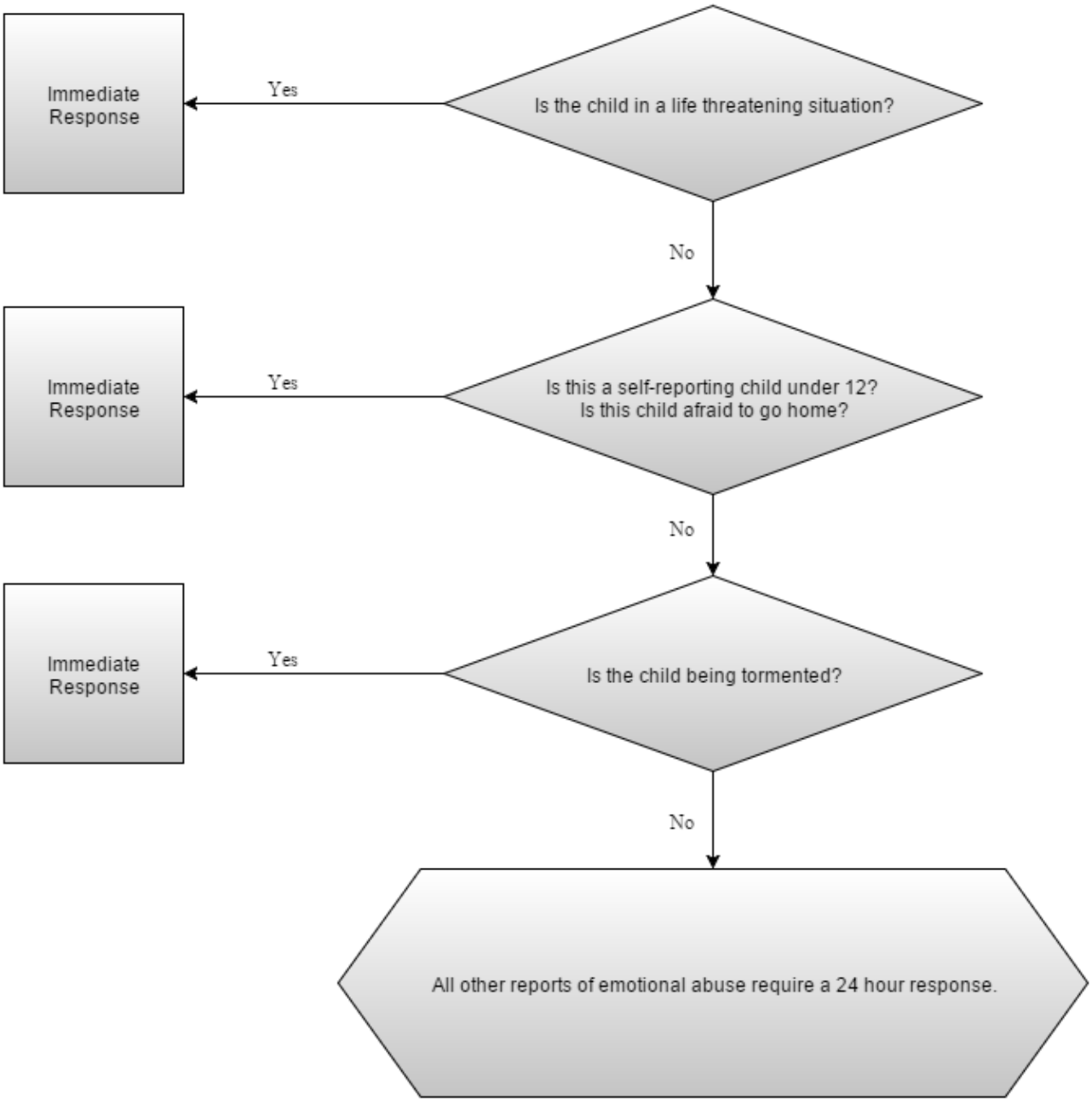


F. MORAL TURPITUDE RESPONSE PRIORITY DECISION TREE DEFINITIONS

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 is required.

Emotional Abuse Priority Response Decision Tree



G. 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 is required. An example of a life threatening allegation under these circumstances 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 requires an immediate response. Based on credible threats made by a parent/caretaker, a child's behavioral indicators of fear, as well as a history of abusive behavior that is 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 is required.

VII. ASSESSING AGENCY HISTORY

A valid CPS report does not hinge on the establishment of a pattern of abuse/neglect/dependency. Reports alleging single incidents of abuse, neglect, and/or dependency can, and many times do, meet the definitions of abuse, neglect, and/or dependency; thereby invoking the statutory authority to begin a CPS Assessment. The use of Structured Intake gives the county child welfare agency the opportunity to complete a comprehensive, strengths-based interview that leads to clear screening decision-making the majority of the time. A combination of statutory authority, consistent policy, and professional social work judgement forms a strong base for the delivery of child protective services. It would be impossible and counterproductive to remove professional social work judgement from the day to day work in child protective services.

There are some reports that do not clearly meet legal definitions of abuse, neglect 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 agency history in the screening decision. If a review of agency history reveals a pattern of substantiations or findings of services needed or a particularly egregious substantiation that correlates with the current allegations, it is acceptable to accept the report and initiate a CPS Assessment. At any time a report is concerning, but does not clearly meet the legal definitions of abuse, neglect, or dependency, it is acceptable to review the agency's history in order to make a more well-informed screening decision. **It is not acceptable to check the Central Registry/Responsible Individual List or contact another community agency or another county child welfare agency in order to make a screening decision.**

Sample Five Day Letter to the Reporter

[Date]

[Reporter]
[Street Address]
[City, State, Zip Code]

Re: Family

Dear [Reporter's Name],

Thank you for your report of suspected child abuse, neglect, and/or dependency regarding the above-named family that you made on _____, 20__ .

- ☐ The report was not accepted for Investigate Assessment of for Family Assessment because_____. If you disagreed with the Department's decision not to conduct either an Investigative Assessment or a Family Assessment, you may contact the Director of _____ County Department of Social Services at ( ) - to request an additional agency review of this decision.

- ☐ The allegations in the report meet the statutory definition of abuse under N.C.G.S. §7B-101 (of as a result of special nature of the neglect allegations) and the report was accepted and assigned as an Investigative Assessment.

- ☐ The allegations in the report meet the statutory definitions of neglect or dependency under N.C.G.S. §7B-101 and the report was accepted and assigned as a Family Assessment.

- ☐ The allegations in the report have been referred to law enforcement.

Under North Carolina law (N.C.G.S. §7B-302) when the department of social services receives a report that meets the legal definition of child abuse, neglect, and/or dependency, the department of social services must make a prompt and thorough assessment. This assessment is completed in order to ascertain the facts of the case, the extent of the abuse, neglect, or dependency, and the risk of harm to the juvenile, in order to determine whether protective services should be provided or the complaint should be filed as a petition.

The Department of Social Services will make every reasonable attempt to complete the Investigative Assessment within 30 days and the Family Assessment within 45 days. At the end of assessment, you will receive a letter from the Department of Social Services that will inform you of the findings.

Sincerely,

Social Worker

Supervisor

Cc: file

Sample Notification to the District Attorney
(within 48 hours, subsequent to oral notification)

TO: _____, District Attorney
_____
_____
_____

FROM: _____, Director
_____ County Department of Social Services

As per our telephone conversation on __(date)__, our agency has received information/found evidence that the child(ren) named in this report have been abused as defined by N.C.G.S. §7B-101 or physically harmed in violation of criminal statute by a person other than the juvenile's parent, guardian, custodian, or caretaker.

REPORT OF FINDINGS:

Identifying Information:

1. Name(s) and ages of victim child(ren):_____
_____
_____

2. Name(s) and address(es) of parent/guardian/custodian/caretaker:_____
_____
_____

3. Name and address of alleged perpetrator:_____
_____
_____

4. Relationship of alleged perpetrator to alleged victim(s): _____

5. Summary of report of abuse:
_____
_____
_____
_____

6. Actions taken by the Department of Social Services
Investigation initiated on: _____ by _____ (social worker)
Findings indicative of abuse or other criminal act:
_____
_____
_____
For further information, please contact ___(social worker)___ at __( )__ telephone

Cc: (law enforcement agency)