

Section 2 Overview

Section 2 focuses on intake, or the point of entry for a family. The information in this section will assist staff in understanding the procedures throughout the entire intake process, from initial contact with the Child Abuse and Neglect Hotline Unit (CANHU), through the process of an investigation or family assessment. Completing a thorough family assessment or investigation will help staff identify the service needs of the family.

Chapter 3 Overview:

This chapter covers information pertaining to child abuse and neglect reports received at the county office, determining the most appropriate response by the Children's Service Worker, and assignment of reports is explained.

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Chapter Memoranda History: (prior to 1/31/07)

[CS03-51](#), [CD05-35](#), [CD05-40](#), [CD05-67](#), [CD05-72](#), [CD06-34](#)

Memoranda History:

CD14-46

3.1 Reports Received at the County Office

Reports of child abuse and neglect received by Child Abuse/Neglect Hotline (CANHU) staff will be screened and assigned to an initial response track, and assigned a response priority level according to Structured Decision Making (SDM) protocol, based on information provided to them by the reporter. The report will then be forwarded to the respective county office.

The county office may occasionally receive hotline reports directly by phone, letters or walk-ins. When this occurs, staff shall interview the reporter and collect enough information to determine if the allegations might be categorized as the following:

- A report of child abuse or neglect;
- A physician/health care provider requesting a "Newborn Crisis Assessment"

Related Subject: Section 2, Chapter 6.2, Newborn Crisis Assessment
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- A non-caretaker referral;
- A Juvenile Report; or
- A possible preventive services referral.

Staff should encourage the reporter to contact CANHU; however, pursuant to [RSMo. 210.115](#), staff must also report the concerns to CANHU.

3.1.1 Procedure for "*Field Reports*"

Field Reports are reports made to the CANHU by Children's Division staff after initial contact with the family or the victim has already been made. Many situations arise which require Division staff to initiate contact with a family or victim prior to a call being made to CANHU. Examples may include, but are not limited to the following:

- Walk-in office visit from non-custodial/non-perpetrating parent asking for help for their abused child;
- Worker observes an injury to the child at the office and must initiate protocol to assure safety;
- Worker discovers a new concern of abuse or neglect during the course of an open investigation or assessment.

When workers are required to make a call to CANHU regarding suspected child abuse/neglect **and** initial contact has been made and safety assured as per policy, the workers will:

1. Contact CANHU and inform them of the need to make a **“Field Report”**;
2. Inform CANHU of the report date/time of the initial contact/notification;
3. CANHU will adhere to protocol to screen and classify the information according to CAN report criteria, response priority and track assignment;
4. Information given to CANHU *will not be accepted automatically as a CA/N report/referral as with “From” reports prior to CA/N automation.*
5. CANHU will use report date/time of the initial contact/notification given by the field staff.

NOTE: The Children’s Division does not have the legal authority to respond to concerns of child abuse or neglect without a hotline report.

NOTE: Mandated reporters are required by law to immediately report all abuse or neglect to the CANHU regardless of whether the alleged perpetrator has care, custody or control.

Chapter Memoranda History: (prior to 01-31-07)

[CS03-51](#), [CD05-35](#), [CD05-40](#), [CD05-67](#), [CD05-72](#), [CD06-34](#)

Memoranda History:

CD15-52

3.2 Review of Report

The Local Office will be responsible for reviewing reports received from the CANHU to assess whether additional information received warrants a track change or duplication of the CA/N report or referral. Children's Service Supervisors, or above level administrators, may change tracks or may override the response priority level as appropriate. However, the decision to change the response priority level must be made within the timeframe of the initial response priority level established by CANHU.

Related Subjects: [Section 2, Chapter 3.4 Track Change](#), [Section 2 Chapter 4.4 Change to Family Assessment](#), and [Section 2.5.4 Change to Investigation Response](#)

3.2.1 Checking Prior Reports, Other Systems, Reporters, and Collaterals

The CA/N report or referral transmitted by CANHU will contain information regarding any prior CA/N reports, as well as information from other systems, (i.e., Income Maintenance, Food Stamps, Child Support Enforcement, etc.). Local Office staff should complete a search for relevant information from prior reports, including a review of FACES and paper records.

Related Subjects: [Section 2.4.1.1.2 Reviewing Prior History](#), and [2.5.3.1.3 Reviewing Prior History](#)

3.2.2 Duplicating CA/N Reports and Referrals

Duplicate CA/N reports and referrals contain allegations involving a specific incident on a specific date involving the same participants which have been previously reported in a CA/N report or referral made by a different reporter. These types of calls most commonly arise when a specific incident or concern is observed or made known to multiple mandated or permissive reporters. Duplicate calls may be reported within close proximity to a previously reported concern, or there may be months or years between the receipt of duplicate reports, as disclosures are made to multiple people at different times and in various settings.

Each county shall designate at least one Children's Service Supervisor to duplicate reports/referrals. Only supervisors, or above level administrators, may duplicate reports/referrals in FACES. Supervisors should ensure that reporters of duplicated reports/referrals are contacted and made aware their concern has been received by the Local Office.

CA/N reports or referrals should be duplicated when they meet all of the following criteria:

- The allegations involve the same specific incident or event
- The alleged incident(s) occurred on the same date
- The CA/N report or referral contains the same basic allegations (i.e., at a minimum, the report falls within the same category of abuse or neglect for CA/N reports), and
- The CA/N report or referral includes the same participants (victim(s), parent(s), and alleged perpetrator(s)).

Children's Service Supervisors should give consideration to the classification and track assignment of each report and referral, and may duplicate the following combination of reports by track assignment:

- Reports with the same track assignment (e.g., Investigation to Investigation or Family Assessment to Family Assessment)
- Family Assessments may be duplicated to pre-existing Investigations
- Referrals may be duplicated to pre-existing referrals. However, discretion should be given to the specific nature in each referral to ensure that all concerns presented in each referral has been addressed in the pre-existing referral(s)

Duplications should be processed in FACES as soon as possible after a CA/N report or referral has met the above established criteria.

3.2.3 Already Investigated CA/N Allegations

There may be times when a CA/N Investigation cannot be duplicated to an open or concluded investigation, because it contains new or additional allegations. This may be determined by reviewing the family's prior history maintained by the Division.

As a matter of law, *Petet v. State, Dept. of Social Services, Div. of Family Services*, 32 S.W.3d 818 (Mo.App. WD 2000), the Division may not reopen a previously unsubstantiated CA/N Investigation after the alleged perpetrator has been provided written disposition (e.g., CS-21) for the same incident. Therefore it is imperative to determine if any allegations contained in a CA/N Investigation are under investigation, or have already been investigated in a separate report.

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There may be times when a CA/N Investigation cannot be duplicated to an open or concluded investigation, because it contains new or additional allegations.

There may be times when a family's history is known to the Division, but a previously unsubstantiated CA/N Investigation has been expunged pursuant to [Section 210.152 RSMo](#). When this occurs, it becomes necessary to seek additional sources of information, such as records maintained by other multidisciplinary team members

When allegations within a CA/N Investigation cannot be duplicated to a prior report or reopened pursuant to case law it should be concluded as "already investigated" when they meet all of the following criteria:

- The subsequent report involves the same specific incident or event
- The alleged incident(s) occurred on the same date
- The subsequent report contains the same allegations
- The subsequent report includes the same participants (victims, parents, and alleged perpetrators), and
- The Division maintains the record of notice provided to an alleged perpetrator in conjunction with a previously unsubstantiated CA/N Investigation of the same incident, or in cases of previously expunged CA/N Investigations
- There is a record of the Division's previously unsubstantiated CA/N Investigation maintained by the Juvenile Office, law enforcement, Child Advocacy Center, or other multidisciplinary team member which is made known to the Division.

Supervisors should forward matters which involve previously expunged CA/N Investigations, and any supporting information, to their Circuit Manager, Program Manager or above level administrator. The field administrator should determine if the reported concern has already been investigated by the Division. The record must reflect a conference and approval of the Circuit Manager, Program Manager or above level administrator, when the Division concludes an allegation from an expunged CA/N Investigation as "already investigated."

Chapter Memoranda History: (prior to 01-31-07)

[CS03-51](#), [CD05-35](#), [CD05-40](#), [CD05-67](#), [CD05-72](#), [CD06-34](#)

Memoranda History:

CD14-46

3.3 Response Priority Level Override

County staff may determine that emergency response is *not* necessary in certain circumstances on reports initially screened as an emergency by CANHU. If additional information is available to county staff that clearly indicates the alleged victim(s) is/are immediately safe, the county may change (override) the Response Priority Level of the report. However, this determination may only be made after all safety factors have been considered and supervisory approval has been granted (within initial Priority Level Response timeframes).

Related Subject: Section 2, Chapter 2, Attachment B, Emergency Investigation Criteria

Related Subjects: Section 2, Chapter 9.2, Assessment of Safety; and
Section 2, Chapter 9, Safety Analysis and Risk Assessments

A change of Response Priority from Level 1 to Level 2 or 3 requires documentation (including the date and time of the consultation with the supervisor, and specific details pertaining to the determination) in the narrative section of the Investigation record, and “priority level change” shall be noted on the CPS-1 in the “Description/Action Taken for Level 1” box on page 1.

3.3.1 Entering Override Information in System

After supervisory consultation and approval of the decision to override the original Response Priority Level as established by CANHU, information about the report assignment is to be entered on the Response Priority/Track Assignment Override screen of the Investigation and Assessment Function in FACES.

Chapter Memoranda History: (prior to 01-31-07)

[CS03-51](#), [CD05-35](#), [CD05-40](#), [CD05-67](#), [CD05-72](#), [CD06-34](#)

Memoranda History:

CD15-52

3.4 Track Change

Introduction

This chapter provides guidance for field staff to determine whether or not to change the initial response track assignment. The Children's Division (CD) utilizes protocols based upon Structured Decision Making (SDM) principles pursuant to [Chapter 210 RSMo.](#) and [13 CSR 35-20.010](#) to classify all Child Abuse/Neglect (CA/N) reports received by the Child Abuse/Neglect Hotline Unit (CANHU). As such, there are some reported concerns which must be completed as CA/N Investigations due to the nature of the reported concerns pursuant to state law and/or administrative regulation.

CD protocols provide a mechanism by which CANHU completes the initial track assignment while giving priority to ensuring the safety and well-being of the child(ren) involved in the reported concern. There may be a need for field staff to change the initial track assignment in a small percentage of hotline reports due to obtaining additional information or the family's prior history with CD.

Purpose

The purpose of this policy is to:

- Provide a reference to initial classification of hotline reports based upon the reported safety, risk and injury to the child as outlined in [13 CSR 35-20.010](#) and pursuant to [Chapter 210 RSMo.](#)
- Provide additional parameters related to the initial classification of both Investigations and Family Assessments
- Provide guidance to Local Office staff determining whether or not there is need or ability to change the initial track assignment

Initial Classification

CD utilizes protocols based upon Structured Decision-Making (SDM) principles for classification purposes of all child abuse and neglect reports received by the Child Abuse/Neglect Hotline Unit (CANHU) pursuant to [13 CSR 35-20.010](#). In accordance with the Code, the protocols developed by CD shall:

- Obtain and classify information
- Give priority to ensuring the safety and well-being of children.

Therefore, all child abuse and neglect reports screened in by CANHU shall be initiated within twenty-four (24) hours of receipt and shall be classified based upon the reported safety, risk and injury to the child.

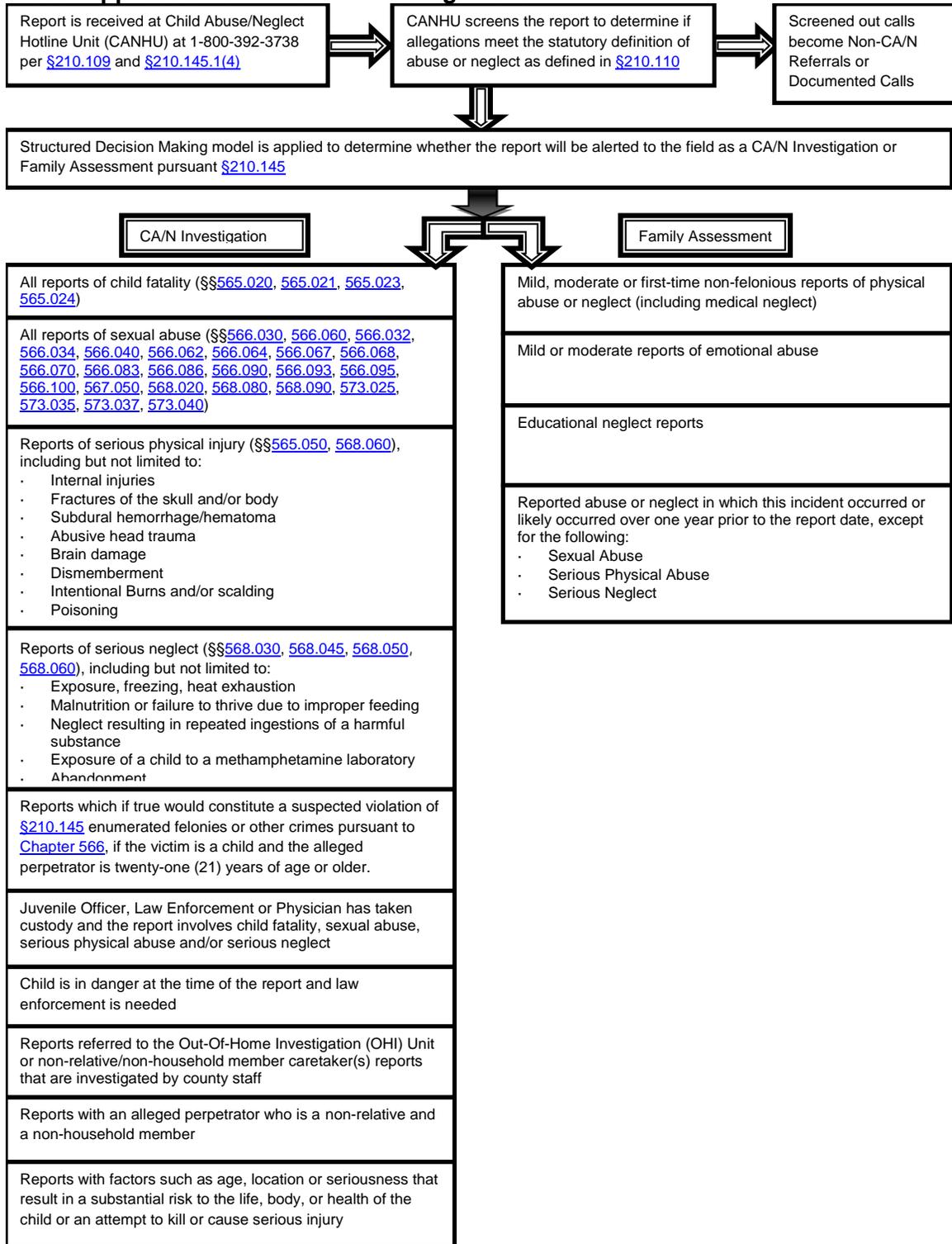
When CANHU receives a hotline call or some form of written correspondence with CA/N allegations, a CANHU Children's Service Worker will review the correspondence or

interview the reporter, through the use of the SDM screening process, to collect sufficient information in order to determine if the allegations require the investigation or family assessment response, and the timeframe in which the alleged victim children should be seen face to face by CD staff or multidisciplinary team member.

An Investigation is a classification of response by CD to a report of child abuse or neglect when there is an identified need to collect physical and verbal evidence to determine if a child has been abused or neglected. The determination to utilize the investigation track to a hotline report is based upon SDM protocols.

A Family Assessment is a classification of response by the Division to provide for a prompt assessment of a child who has been reported to the Division as a victim of abuse or neglect by a person responsible for that child's care, custody or control and of that child's family, including risk of abuse and neglect and, if necessary, the provision of community-based services to reduce the risk and support the family.

Visual Application of Initial Track Assignment



Determining Whether or Not to Change the Initial Response Track Assignment

While any report may be investigated, some must be pursuant to [§210.145 RSMo.](#) Other reports may require discretionary decisions to be made by the Local Office in order to determine the most appropriate response track when a report does not clearly meet the requirements for a CA/N Investigation. Staff should seek supervisory guidance in order to determine whether or not hotline reports of this nature should be completed as CA/N Investigations or Family Assessments.

The following must be completed as CA/N Investigations:

- All reports which involve child fatality resulting from initially alleged or subsequently suspected child abuse/neglect
- All reports which involve any allegations of child sexual abuse, regardless to alleged or subsequently suspected severity or type
- All reports which involve allegations of serious physical injury resulting from alleged abuse, including but not limited to:
 - Intentional burns and scalding
 - Skull fractures
 - Internal Injuries caused by a blow
 - Broken skin caused by an instrument
 - Likelihood of permanent scarring
 - An injury which requires stitches
 - Broken bones
 - Temporary or permanent damage to hearing or sight
 - Abusive Head Trauma
 - Physical confinement which impairs circulation or breathing
 - Cigarette burns
 - Intentional submersion in water
 - Defensive injuries
 - Spiral fractures, dislocations
 - Subdural hemorrhages/hematomas
- All reports which involve allegations of serious neglect resulting from parental/caretaker omission including but not limited to:
 - A child left without appropriate supervision and in a dangerous environment
 - Lack of food/nurturance resulting a failure to thrive
 - Abandonment of a child under the age of eight years-old
 - Lack of medical care which results in a life threatening condition
 - Lack of care which results in hospitalization of a child
 - Serious injury due to the inactions of the parent/caretaker

- Reports which if true would constitute a suspected violation of [§210.145](#) enumerated felonies or other crimes pursuant to [Chapter 566](#), when the alleged perpetrator is twenty-one (21) years of age or older.
- All reports in which a Law Enforcement Officer, Physician or Juvenile Officer has taken custody of a child in conjunction with a report which also alleges child fatality, sexual abuse, serious physical injury or serious neglect
- All reports which allege a child in danger at the time of the report and Law Enforcement is needed
- All reports which involve a non-familial, non-relative or non-household member as an alleged perpetrator

Reports which may result in a response track change on the basis of discretionary decisions should be guided by additional information either obtained by or known to the Local Office. This may include, but not be limited to:

- Reporter contact which provides more detail regarding the alleged severity or type of perpetrated child abuse/neglect
- Law enforcement contact which provides additional information or prior concerns specific to the family
- A review of the family's prior history with the Division
- Contacts with multidisciplinary team members or other collaborative partners within the community who may have additional information specific to the severity of alleged child abuse/neglect or prior family history
- At least one of the following indicating a clear and present concern:
 - Violent activities on the part of household members
 - Two or more prior reports received for similar CA/N behavior
 - Substance abuse and/or mental illness resulting in bizarre behavior
 - Children under the age of five and/or unable to protect themselves
 - The report indicates an intent of harm by the parent/caretaker
 - High likelihood of child(ren) needing placement

3.4.1 Entering Track Change in System

FACES must be updated by a Children's Service Supervisor, or above level administrator, when the Local Office determines a need to change the initial response track assignment.

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Effective Date: September 12, 2013
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When track changes are made, staff should:

- Clearly document the reason(s) which support the determination to change track assignment
- Ensure all involved parties are served the appropriate written notice (e.g., CS-24 or CS-24A) specific to most current track assignment
- Ensure priority is given to the safety and well-being of the child(ren)
- Minimize disruptions and/or service delivery interruptions

Chapter Memoranda History: (prior to 01-31-07)

[CS03-51](#), [CD05-35](#), [CD05-40](#), [CD05-67](#), [CD05-72](#), [CD06-34](#)

Memoranda History:
CD13-86

3.5 Assigning Reports for Investigation or Family Assessment

Assignment of reports to staff for investigations and family assessments shall be made based on local protocol. **Reports must be assigned in such a way that will ensure all investigations and family assessments are initiated within 24 hours of receipt of the report from the Hotline (or 72 hours in reports of educational neglect), and immediately in emergencies.**

Related Subject: Section 2, Chapter 4, Attachment C, Courtesy Requests
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3.5.1 Things to Consider When Assigning Reports

When Reports are Assigned, the Following should be Considered:

- Type of report (i.e., should educational neglect reports be assigned to one staff person who has an on-going working relationship with the school district?);
- Geographic considerations (i.e., based on school districts). This may assist in developing a good working relationship with school personnel and may also aid in conserving mileage;
- Whether particular staff has skills in certain areas;
- Staff's familiarity with local resources;
- Caseload size; and
- After-hours assignment.

3.5.2 Transfer of Reports between Counties

Report is Assigned to Non-Residence County:

The Child Abuse and Neglect Hotline (CANHU) often assigns reports to the county in which the child will be located within the next twenty-four (24) hours, even when that is not the child's residence county. This is done to help ensure the child is located within the response priority timeframes. Examples of these situations include: child(ren) on a weekend visit with a non-custodial parent, child is hospitalized *and* an emergency response is indicated, or child is placed in a residential facility.

Often, it is more appropriate for the residence county to complete the report than the non-residence county, requiring a transfer of report assignment. Examples of such situations include, but are not limited to:

- Child is an LS-1 child in County A, but placed in County B. A hotline is received in County B, but the allegations are on the parents of the child who reside in County A.
- Child is hospitalized in County A due to physical abuse injuries. The family resides and the incident occurred in County B.

Family Moves to a New Residence County:

If a family moves from a county during an Investigation/Family Assessment, the decision to transfer the report to the new residence county should be handled on a case-by-case basis. Things that should be considered prior to requesting or accepting report transfer include, but are not limited to:

- How much of the report is left to complete? If the prior residence county has completed the bulk of the report, it may be more appropriate for that county to conclude the report. If safety has not yet been assured, or if only minimal contacts have been made, it may be more appropriate for the new residence county to conclude the report.
- Are the needs of the family such that they are best addressed by in-depth assessment and linkage to resources in the new residence county?

Report is Assigned to an Incorrect County:

There are times when a report is assigned to a county incorrectly. If this occurred due to an error by CANHU staff, CANHU can re-assign the report to the correct county. CANHU should be notified of the error within a reasonable time frame so that the correct county can make timely initial contact.

There may be times that, once the report is initiated, the worker determines the family does not reside in the county. Staff in the county the report was initially assigned to should contact staff in the correct residence county to request report transfer. Examples of these types of situations include, but are not limited to:

- The parent and child(ren) left the household address as a result of the incident and are now staying with relatives in another county.
- The child was hospitalized in County A, but was discharged and returned to County B before the worker was able to make initial contact.

Out-of-Home Investigations (OHI)

The Out-of-Home Investigation (OHI) Unit will follow the same transfer procedures as above. If, upon initial investigation, the report should be transferred from the county to OHI, or from OHI to the county, staff should confirm with staff in the other county/unit before requesting CANHU to transfer. If, during the middle of the investigation, staff become aware that the report should have been assigned differently, the person already investigating should complete the investigation. This will assure more complete and timely investigations.

Accepting Transfer:

The safety of the child(ren) and the needs of the family should always be given first priority when deciding to accept transfer. Prior to accepting transfer, the receiving county may wish to first complete a courtesy request to ensure the report is appropriate for transfer. It is never appropriate to refuse transfer solely based on the sending county's failure or inability to make initial contact timeframes. Staff should use their supervisory chain of command when they encounter difficulties in transferring reports.

CA/N Reports on Open Family-Centered Services (FCS) Cases

Child Abuse/Neglect (CA/N) reports received on an open FCS case will be screened as either an Investigation or a Family Assessment, as appropriate. The Children's Service Worker assigned to the FCS case or another Children's Service Worker can conduct the Investigation/Family Assessment.

Chapter Memoranda History: (prior to 01-31-07)

[CS03-51](#), [CD05-35](#), [CD05-40](#), [CD05-67](#), [CD05-72](#), [CD06-34](#)

Memoranda History: