

**CPS PREVENTION  
POLICY & PROCEDURES**

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## I. INTRODUCTION

Code of Alabama 1975 § 38-2-6 (10) mandates that DHR seek out and aid minor children in the state who are in need of its care and protection. Furthermore, Code of Alabama 1975 § 26-14-2 clarifies the legislative intent that protective services shall be made available in an effort to prevent further abuses and neglect, and to safeguard and enforce the general welfare of such children.

Child protective services' primary role is to intervene when suspected child abuse/neglect reports are received; however, there are situations when individuals contact DHR to report what they consider abuse/neglect, but the information they provide:

- does not rise to the level of child abuse/neglect according to statutory and Departmental definitions; or
- is insufficient to determine whether a CA/N report exists.

When these situations occur and the intake information reveals the children may be at risk of maltreatment, the information is considered a **CPS Prevention referral** and an evaluation of the child/family situation is needed. The evaluation process is known as **CPS Prevention assessment**. **Risk of maltreatment** is defined, for purposes of this policy, as “family conditions or circumstances that, if left unchanged, can cause child abuse/neglect.”

The CPS Prevention process is designed to determine whether on-going protective services are needed to prevent child maltreatment. At any time safety threats or abuse/neglect is discovered during the CPS Prevention process, child welfare staff **must** follow *CA/N Assessment Policies And Procedures*.

### A. Children And Cases To Whom The Policy Applies

*CPS Prevention Policy And Procedures* applies to intake information involving:

- Child is defined in this section as either: (a) A person under the age of eighteen (18) years. (b). A person under the age of nineteen (19) who is in need of protective services and does not qualify for adult protective services under Chapter 9 of Title 38.
- A child for the purposes of this section must also appear to be at risk of maltreatment **and** the conditions/circumstances described do not constitute a child abuse or neglect allegation per *CA/N Allegations And Definitions*;
- children in situations that would be considered a CA/N report except for the fact that the alleged perpetrator responsible for abuse/neglect is under age fourteen (14) years, (These type cases are to be initially opened in the name of the family of the identified child who is alleged to be at risk of maltreatment. If after the prevention assessment is completed, individual services are to be provided to the child identified as responsible for abuse

and neglect a separate case is to be opened on FACTS.); and

- children for whom school personnel have reported concerns other than school attendance that indicate there may be a risk of maltreatment.

Failure of a parent, custodian or other primary caregiver to assure school attendance, in and of itself, is insufficient for the information to be considered a CPS Prevention referral. However, when school personnel report other concerns (e.g., parents', custodians', or other primary caregivers' behaviors and/or conditions) that contribute to the children's truancy and indicate a risk of maltreatment, the information is considered a CPS Prevention referral.

Child welfare staff that receives intake information from school personnel must obtain detailed information about interventions that have been taken by the school system to address the children's lack of school attendance. It is critical that trends and patterns in the family situation be considered when determining whether the information indicates a risk of maltreatment and should, therefore, be considered a CPS Prevention referral.

In cases that are currently open to on-going protective services or foster care services, CPS prevention referral information should be assessed as part of the open on-going case. For these cases, no CPS Prevention assessment is entered on FACTS. Documentation is done through the case narrative.

#### B. Confidentiality

Code of Alabama 1975 § 38-2-6 (8) and § 26-14-8 addresses confidentiality of DHR records. Information contained in CPS Prevention referrals and assessments can only be released to a non-law enforcement source when there is a court order authorizing the release under the parameters set by the court order and according to the statutes cited.

**Note:** CPS Prevention referral and assessment information may be shared with district attorneys or law enforcement upon an Alabama subpoena or subpoena duces tecum (a subpoena to produce documents), when authorized by a court order or for use by a multidisciplinary team Code of Alabama 1975, § 38-2-6 (8) and § 26-14-8.

A subpoena or subpoena duces tecum is not required when district attorneys or law enforcement (e.g., members of the multi-disciplinary team) request CPS Prevention referral (intake) information. Child welfare staff shall honor their request for information by completing and submitting the Multi-Disciplinary Child Protection Team Referral Form (DHR-FCS-1519), to the requesting multi-disciplinary team member.

## II. CPS PREVENTION INTAKE

CPS Prevention referrals are generally received by a county Department's CA/N intake staff. Child welfare staff shall clear all DHR service files and review existing service records on all children identified at risk of maltreatment, parents/primary caregivers and persons allegedly

responsible for the risk of maltreatment. To the extent possible, thorough and complete information about the child's and family's circumstances/conditions should be obtained from the person making the referral. Intake staff should consider a search of the Department's other automated systems as appropriate.

Other community organizations and voluntary preventive services provide valuable resources in preventing child abuse and neglect. When situations are reported which are not appropriate for child welfare intervention by the Department, child welfare staff shall provide the individuals with referral information on other community resources which may assist in the individual's concern. Child welfare staff should facilitate this referral process as needed.

Information gathered during the intake process is to be documented on FACTS and submitted for supervisory review and approval. |

Supervisors shall review all intake information to determine if:

- there is sufficient, pertinent information to warrant a CPS Prevention assessment;
- the intake information does not rise to the level of a CA/N report and would therefore be treated as a prevention referral;
- the case record contains all supporting documentation (e.g., any information about prior CA/N records; and
- automated system data entry requirements have been accurately completed.

Following this review, supervisors shall approve the intake information indicating they agree with the decisions made. When a CPS Prevention assessment needs to be conducted, the supervisor shall take appropriate steps to forward the referral for assignment. Supervisors are responsible for assigning CPS Prevention referrals to assessment staff in a manner that ensures initial child contact will be made within the response time described in section III. B.

### III. CPS PREVENTION ASSESSMENT

CPS Prevention assessment is the process used by child welfare staff to gather and analyze information in order to make decisions about children who may be at risk of maltreatment (in cases in which the intake information does not meet the Department's definitions of child abuse or neglect). This process is designed to determine whether family conditions and circumstances are presenting risks that are significant enough to warrant on-going services to prevent child maltreatment.

#### A. County Responsible For Conducting The CPS Prevention Assessment

The county in which the children are currently living is responsible for conducting the CPS Prevention assessment. When multiple County Departments need to be involved, the counties shall work in partnership to conduct the assessment. **If counties are unable to reach consensus about specific responsibilities or when an exception is needed as to which county is responsible for conducting the CPS Prevention assessment, a child**

welfare supervisor shall contact the the Office of Child Protective Services for assistance.

B. Timeframes

Child welfare staff shall adhere to the following timeframes for CPS Prevention assessments.

1. Initial Contact With Children Identified As At Risk Of Maltreatment

In-person contact shall be made as quickly as the intake information warrants, but no later than **five (5) calendar days** from the referral's receipt.

2. Completing CPS Prevention Assessments

CPS Prevention assessments shall be completed within sixty (60) days from the date the intake information (i.e., CPS Prevention referral) is received. An assessment is considered complete when it has been documented in the automated computer system and the supervisor has reviewed and approved the assessment.

C. Transfer of Prevention Referrals Involving Multiple County Departments

Child welfare staff in the County Department where the initial intake information is received shall enter that information into FACTS. If the identified children at risk of maltreatment currently live in another county, the county receiving the intake information shall contact the county where the children currently live within sufficient time for child contact timeframes to be met. If a family moves to another county during the time a CPS prevention assessment is underway, the case is to be transferred to the new county of residence for completion. Refer to *Transfer of Case Policy*.

D. Information To Be Collected

The extent of information gathered and those interviewed (beyond the required interviews) will vary depending on the nature of the referral and the information gathered during the initial contacts with the parent/primary caregiver and child(ren). Information to determine the safety and well being of the identified children must be gathered. Some prevention cases may require a more in-depth assessment than others to ensure child safety and well-being. Depending on the individual case, it may be necessary to interview other adults and children in the home, other persons than the parent/primary caregiver that are identified at intake as responsible for the risk of maltreatment, or other persons with first-hand knowledge about the family situation that is creating the risk of maltreatment. Also, the safety and well-being of other children in the home may need a more in-depth assessment. Child Welfare staff and their supervisors are to determine whether these additional interviews are necessary to evaluate child safety and well-being.

E. Required Interviews And Other Information

Child welfare staff shall collect, through interviews, observations, and written materials provided by knowledgeable individuals, information to determine the safety and well-being of the identified child(ren) and whether there is significant risk of maltreatment to warrant on-going protective services. At least one home visit every thirty (30) days shall be made until the CPS Prevention is closed.

**Child welfare staff must remain alert to child safety threats and/or evidence of abuse/neglect at all times during the CPS Prevention assessment process. When either is identified, a CA/N report must be completed and CA/N Assessment policies must be followed.**

1. Required Interviews

In-person interviews shall be conducted with the parent(s) and primary caregivers, and all children identified at intake as at risk of maltreatment.

a. Parents And Primary Caregivers

At initial contact, child welfare staff shall provide parent(s) and primary caregiver(s) with information regarding:

- the nature of the information received at intake; and
- the purpose of CPS Prevention assessments.

Interviews are to focus on obtaining information about the family conditions and circumstances that may be creating a risk of maltreatment.

b. Children Identified As At Risk Of Maltreatment

Interviews shall be conducted with all children who have been identified at intake as at risk of maltreatment.

“Non-verbal” children must be observed, at some point during the assessment process, while they are awake. Best practice and individual case circumstances dictate whether to wake the child or return to observe the child while awake.

Initial contact with these children is based on the concerns of risk of maltreatment expressed at intake, and individual case circumstances will determine the location of the interviews. In isolated cases where children are interviewed and/or observed prior to interviewing the parents/primary caregivers, the parents/primary caregivers **must** be promptly contacted to inform them about the intake information and then interviewed as soon as possible thereafter. Child welfare staff should provide the

parents/primary caregivers with a full explanation about the decision to interview/observe the children prior to their being contacted.

## F. Analysis and Decision Making

CPS Prevention analysis and decision-making involves:

- analyzing the parents' or primary caregivers' protective capacities and determining to what extent they are able and willing to control threats and manage risks; and
- determining if identified risks are significant enough to warrant on-going services in order to prevent maltreatment.

### 1. Child Safety and Parental/Primary Caregivers Protective Capacities

Child welfare staff **must** determine if family conditions and circumstances create child safety threats and therefore constitute abuse/neglect in accordance with *CA/N Allegations And Definitions*. Utilize *Safety Assessment* policies to make this determination. When safety threats are identified and a safety plan is needed, the CPS Prevention assessment process stops and the case must be reclassified as an abuse/neglect report. **At that point CA/N Assessment policies must be followed.**

“Protective capacities” refers to parent/primary caregiver abilities and resources that can and do provide for child safety. They are strengths and capabilities in a family that control or prevent safety threats and manage risks, and include all resources within the family network that may contribute to child protection.

Child welfare staff must analyze protective capacities and make decisions regarding the parents' or primary caregivers' capacities to control safety threats and manage risks. Refer to *Safety Assessment* policies for information related to assessing parental/primary caregiver protective capacities.

### 2. Need For On-going Child Protective Services

On-going services are to be provided when the CPS Prevention assessment reveals a significant risk of maltreatment. “Significant risk of maltreatment” is defined as conditions or circumstances revealed during the CPS Prevention assessment that are likely to cause abuse/neglect if ongoing services are not provided. (Refer to *Risk Assessment Index Chart* in the Appendix for additional information on factors used to determine significant risk of maltreatment). The provision of on-going services is voluntary unless a safety threat exists or services have been court ordered.

When the CPS Prevention assessment reveals the children are safe, no significant risks have been identified, and the parents or primary caregivers have protective capacities sufficient to protect the children, the CPS Prevention case may be closed.

#### G. Documentation

CPS Prevention assessments are documented on FACTS. Documentation must include, at a minimum, the following information. Information collected from individuals interviewed;

- Analysis and decision-making of the family conditions and circumstances that may be creating a risk of maltreatment, and whether the identified risks constitute safety threats ((i.e., present or impending danger threat of serious harm);
- Analysis and decision-making of the parents'/primary caregivers protective capacities and the extent to which they are able and willing to control threats and manage risks; and
- Decision-making regarding whether the identified risks are significant to warrant on-going services in order to prevent maltreatment.

#### H. Review, Approval, And Assignment For On-going Service Delivery

All CPS Prevention assessments are submitted through FACTS for supervisory review and approval.

##### 1. Supervisory Review and Approval

Supervisors shall review all CPS Prevention assessments to determine that child welfare staff has gathered sufficient information in order to determine child safety and well-being and whether there is a need for on-going child protective services.

Supervisory approval indicates the CPS Prevention assessment has been reviewed, the supervisor concurs with the analysis and decision-making, and appropriate steps are being taken to transition the family's case to on-going services if needed.

##### 2. Assignment For On-going Services

All counties are to develop local procedures for ensuring that cases opened for on-going services have an individualized service plan (ISP) developed within *ISP* policy timeframes.

### IV. FACTS DATA ENTRY

CPS Prevention referrals and assessments are documented on FACTS and must be entered on FACTS within five (5) calendar days following the referral's receipt. At any time safety threats (i.e., present or impending danger, threat of serious harm) are revealed during the CPS Prevention process, the referral must be converted into a CA/N report.

Completed CPS Prevention assessments which reveal risks that are significant enough to warrant the provision of on-going child protective services must be entered on FACTS, following completion of the assessment, using case type code “CPSP” (Prevention on-going Services) or “CPSP” (Ongoing Services Less Than 14).

**Note:** For instructions on entering CPS Prevention referrals and completed CPS Prevention assessments into FACTS, refer to Intraweb, FACTS, Roadmaps, Completing Intake and CA/N CPS Prevention Roadmaps.