

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL	
	Chapter 3: Intake	Effective Date: March 1, 2008
	Section 5: Supervisory Review of CA/N Intake Reports	Version: 2

POLICY

All child abuse/neglect (CA/N) intake reports will undergo supervisory review and approval before being assigned, transferred or screened-out.

Exception: Reports that require an investigation (assessment) to be initiated within one hour of the conclusion of the initial call from the reporter. Such intake reports may be transferred directly to a Family Case Manager (FCM) without prior supervisory approval.

The Supervisor will review the Intake as soon as practical, not to exceed **24 hours**.

An intake supervisor **may shorten** the time frame in which a CA/N investigation (assessment) must be initiated, but he/she **may not lengthen** the time frame.

An intake supervisor may override an intake worker’s recommendation to “screen-out” a report.

An intake supervisor may only override an intake worker’s recommendation to “assign for investigation/assessment” if the allegations clearly do not meet the statutory definition of CA/N.

For all CA/N investigations (assessments) that must be initiated within one-hour or 24 hours, the supervisor will make direct contact (in-person or via phone) and have a dialog with the FCM when assigning the report.

The Indiana Department of Child Services (DCS) will transmit copies of CA/N intake reports to law enforcement authorities (LEA), prosecutors, and in the case of fatalities, coroners.

Code References

1. [IC 31-33-8-1 Investigations by Local Child Protection Service: Time of Investigation](#)
2. [IC 31-33-7-5 Written Reports; Copies Made Available](#)
3. [IC 31-33-8-2 Investigations by law enforcement agencies](#)

PROCEDURE

For all CA/N intake reports the supervisor will:

1. Carefully review the intake report and any information gained from the Indiana Child Welfare Information System (ICWIS) and Indiana Client Eligibility System (ICES) records search.

2. Contact only the reporter to expand upon or clarify information in the intake report if necessary to determine the appropriate DCS action.

Note: No other contacts will be made prior to the decision to assign for investigation (assessment).

3. Agree or disagree with the intake worker's recommendations about whether or not the report should be assigned for investigation (assessment), transferred to another county or state, or screened-out. The supervisor will apply the facts reasonably available to DCS and use the criteria contained in the following policies to make this determination: [3.8 Statutory Definition of CA/N](#), [3.11 Transferring Intercounty CA/N Reports](#) and [3.6 Recommending CA/N Reports for Screen-Out](#).

For all CA/N intake reports that will be transferred to another county, the intake supervisor will follow procedures contained in the separate policy, [3.11 Transferring Intercounty CA/N Reports](#)

For CA/N intake reports that will be assigned for investigation (assessment), the intake supervisor will:

1. Follow any additional procedures for special intakes. See separate policies: [3.10 Institutional CA/N Intake Reports](#), [3.11 Transferring Intercounty CA/N Reports](#), [Intentional False Reporting](#), and [4.29 Joint Investigations](#).
2. Review the response time assigned by the intake worker and:
 - a. Agree; or
 - b. Find that the response time should be **shortened** and use the override function in ICWIS to make the change; or
 - c. Find that the response time should be **lengthened**, but leave the response time unchanged, and discuss your findings with the intake worker as a "teaching moment."
3. If appropriate, link the CA/N report to any investigations (assessments), open 30 days or less, involving the same alleged perpetrator, alleged victim and same/similar allegations. See separate policy, [3.12 Linking CA/N Reports to Open Investigation \(Assessments\)](#).
4. Assign the report for investigation (assessment) after considering the following:
 - d. How quickly the investigation (assessment) must be initiated; and
 - e. Any relationships that exist between the FCMs and the alleged victim, family members, alleged perpetrator and/or reporter that may cause a conflict of interest; and
 - f. How well the experience and skill sets of available FCMs match the case; and
 - g. Which FCMs, if any, had previous involvement with the family; and
 - h. Case loads, work loads and schedules.
5. Deliver the report and the records search information to the assigned FCM. Ideally, this will be done in-person. If circumstances do not permit an in-person handoff, make contact with the FCM via phone. In either case, review key information about the report with the FCM. Call attention to any factors that impact child and/or FCM safety.
6. Transmit a copy of the intake report to LEA and prosecutors following local protocols unless this step was already completed as part of a joint investigation.
7. Transmit a copy of the intake report to the coroner if the report involves a child fatality.

Note: For those reports that will be screened-out the intake supervisor will follow all procedures outlined in the separate policy, [3.7 Review of Screened-Out CA/N Reports](#).

For CA/N intake reports that involve the following, the intake supervisor will:

1. **Child Fatalities (Death):** Immediately upon learning that a child fatality occurred that is alleged to have been caused by abuse/neglect, notify the following people:
 - a) DCS Director,
 - b) Deputy Director of Field Operations,
 - c) Communications Director,
 - d) Regional Manager, and
 - e) Local DCS Office Director.

If immediate notification is not practical, notification must be given in the same day, regardless of weekends and holidays. Notification should be made via phone or e-mail.

2. **Near Fatalities:** Notify persons listed in Item one (1) above within 24 hours of learning of a near fatality allegedly caused by abuse/neglect , regardless of weekends and holidays.

PRACTICE GUIDANCE

Hand-off of Intake Report to FCM

An in-person hand-off is the best method to use when assigning reports for investigation (assessment). This method assures two things:

1. It gives the supervisor certainty that the report has been received; and
2. It allows a dialog to take place that will ensure the FCM understands key information contained in the report.

FORMS AND TOOLS

CA/N Intake Report (310) – Available in ICWIS

RELATED INFORMATION

N/A