Community Partners for Child Safety
Question and Answers

1) What is the purpose of CPCS?

Indiana's State Government has taken a giant step in the direction of supporting prevention efforts by being first in the nation to establish a statewide secondary prevention initiative to prevent child abuse and neglect. This initiative is Community Partners for Child Safety (CPCS).

The purpose of CPCS is to develop a continuum of child abuse prevention services that are delivered in every region in the state. One locally identified provider in each of the 18 regions serving 92 counties develops partnerships, service mechanisms, governance and oversees service development in their region. This continuum builds community supports for families identified through self-referral or community agency referrals. As a result of the delivery of these prevention services the need for referral to Child Protective Services (CPS) should not be necessary.

This partnership prevention model was introduced to state government by Neighborhood Alliance for Child Safety (NACS), a metropolitan county initiative in 1999. The state adopted this model for strengthening families by launching the Community Partners for Child Safety program in July of 2006.

The target population includes children 0-18 and their families for whom a CPS investigation has not been substantiated, families that are referred by a community partner, or families who self refer. Community partner agencies facilitate family recognition of needs and solutions. With timely, effective, and appropriate prevention support services, family functioning is improved and child abuse and neglect are reduced.

2) What are the roles and responsibilities of the Advisory Committee?

The purpose of the Community Partners for Child Safety (CPCS) Advisory Committee is to provide recommendations to the Indiana Department of Child Services (DCS) for the development and implementation of the CPCS program. In addition, the committee will sustain and enhance the public/private partnerships which support the Community Partners for Child Safety initiative.

The Advisory Committee consists of each CPCS agency's CEO representing their respective region of the state.

The Advisory Committee Chair, nominated by the CPCS grantees at the Administrative level, presides over Advisory Committee meetings.

The committee chair will:

- Schedule meetings for the Advisory Committee and develop meeting agendas.
- Assure tasks associated with the meetings are completed.
- Record minutes and distribute to the committee.

The Advisory Committee will meet via teleconference at least six times a year.

3) What is the target population?

Reference: 2009-2011 Service Standard, Sec. III, A. 1-3

1) Children for whom a CPS investigation has not been substantiated.

Substantiated = open case in ICWIS, abuse or neglected found indicated

Unsubstantiated case= was an investigation and not enough evidence to open a case.

Cases that were recently closed, should be closed for at least 6 months to ensure that cases are closed in ICWIS.

CPCS representatives may participate in CFTM's, can not serve if case is substantiated.

2) Families that have been referred by a community partner or who self refer.

3) Families not participating in Healthy Families.

4) What is the referral process?

A referral to CPCS must include the following steps:

- The FCM explains to the family that there is a service available that might benefit the family (CPCS).

- The FCM explains that participation in CPCS is voluntary.

- The FCM tells the family the name of the service provider and/or completes a referral form to the service provider. The FCM tries to assist the family in this by making the referral to the CPCS agency while the family member is present. As an alternative, the FCM may

want to contact the CPCS agency by a phone call or a faxed referral form.

- If the family does not want the FCM to ask the CPCS agency to contact the family, the FCM asks the family to sign a document indicating that they did not want a referral to the CPCS agency.

- DCS/FCM is **not** entitled to a **report** back from the CPCS agency regarding the family's participation in CPCS. (Once again, if DCS has authority to do follow-up, it is no longer prevention, but intervention. If intervention follow-up is needed, DCS should initiate an "Informal Adjustment".)

- Best practice is that DCS/FCM may ask the CPCS agency, "Did the client family engage in services when services were offered?" The CPCS agency representative **may** answer **"yes" or "no"**, but may **not** give any further information. DCS /FCM should NOT ask for a report regarding the services and may not "reopen" a case after receiving the answer.

5) What are the staff qualifications?

Reference: Community Partners for Child Safety Contract, Sec. 13, A-G

A. Background Checks

Checks will be conducted in the same manner as required for licensed residential child caring institutions. Contractor will obtain sex offender and violent offender checks and the State recommends that Contractor also obtain a local law enforcement check for the employees and volunteers described above.

i. Parent Volunteers

Parent volunteers that will have <u>adult to adult interaction</u> shall receive a limited criminal history check.

ii. Volunteers with <u>direct contact with children</u> must abide by the check required for licensed residential child caring institutions.

<u>Release of Information</u>

Reference: Community Partners for Child Safety Contract, Section