

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL	
	Chapter 3: Intake	Effective Date: July 1, 2008
	Section 1: Receiving Calls (Overview)	Version: 2

POLICY

The Indiana Department of Child Services (DCS) will be available to receive reports of child abuse and/or neglect (CA/N) 24 hours per day, seven (7) days per week. DCS will operate a statewide, toll-free child abuse hotline (800-800-5556) as well as [local child abuse hotlines](#).

DCS will receive oral and written (hard copy and electronic) reports and requests.

DCS will record the date, time, and purpose of every hotline call received.

Code References

1. [IC 31-33-5: Duty to Report Child Abuse or Neglect](#)
2. [IC 31-33-7: Receipt of Reports of Suspected Child Abuse or Neglect](#)
3. [IC 31-33-18: Disclosure of Reports; Confidentiality Requirements](#)
4. [IC 20-50-1: Homeless Children and Foster Care Children](#)
5. [IC 31-36-3: Homeless Children](#)

PROCEDURE

The intake worker will complete the following steps for all calls received:

1. Record the date and time of the call;
2. Engage with the caller in a courteous and professional manner;
3. Actively listen to the reporter and take detailed notes;
4. Make an initial determination about the nature of the call to be one of the following, record the purpose of the call, and take appropriate actions:
 - a. **CA/N allegations**
Proceed with creating a [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) (Child Abuse and/or Neglect (CA/N) intake report). See separate policy, [3.2 Creating a Child Abuse and/or Neglect \(CA/N\) Intake Report](#).
 - b. **Service Requests**
Proceed with creating a [Service Request Intake Report \(SF 49548/CW0310SR\)](#). See separate policy, [3.3 Service Request Intake Reports](#).
 - c. **Other calls**
 - 1) **Out of State CA/N allegations:** Reports where the alleged CA/N occurred in another state will be transferred to the appropriate child welfare agency in that state. No further action required unless courtesy interviews are requested by the agency,
 - 2) **Information only** (i.e., requesting the phone number of a local childcare provider): Provide the caller with the requested information. No further action required,

- 3) **Collateral information** for an open assessment or case: Transfer the caller to the Family Case Manager (FCM) who is assigned to the assessment or case,
- 4) **Inquiries** about the status of CA/N report, assessment or case. See procedures in separate policy, [2.6 Sharing of Confidential Information](#),
- 5) **[NEW] Homeless Unaccompanied Minor**: Proceed with completing a CA/N intake report regardless of whether abuse and/or neglect is alleged,
- 6) **Complaints**: Refer the caller to the appropriate person by following the chain of command at the DCS local office, escalating only if previous complaints went unresolved (FCM), Supervisor, DCS Local Office Director, Regional Manager),
- 7) **Resource parenting inquiries**: Refer the caller to the person who handles licensing at the DCS local office or the [Indiana Foster Care and Adoption Association \(IFCAA\)](#), phone: 800-468-4228,
- 8) **Adoptive parenting inquiries**: Refer the caller to the [Indiana Foster Care and Adoption Association \(IFCAA\)](#), phone: 800-468-4228, and
- 9) **Wrong numbers**: No further action required.

PRACTICE GUIDANCE

The Quality of the CA/N Intake Report Impacts Child Safety

Receipt of a call made to the child abuse hotline is the critical first step in the State's process of assuring the alleged victim's safety and due process. The importance of this step cannot be overemphasized. How the call is handled and documented can have a significant impact on the next steps in the process. The quality of the information gathered impacts the ability of DCS to make a decision about whether or not the report will be assigned for assessment. The quality of the information gathered will also impact the ability of DCS to conduct an effective assessment.

Excellent Customer Service is Imperative

Calls placed to the child abuse hotline are often the only contact the community has with DCS. To the community, the intake worker provides the first impression of the level of public service available through DCS. A bad customer service experience may cause a caller to hesitate to make future CA/N reports. Therefore, the intake worker should always communicate with callers in a courteous and helpful manner.

Routing Collateral Information

If FCM assigned to the assessment or case is not available and the caller is unwilling to leave voice mail or the call is of an urgent nature, record the caller's message as a contact or temporary contact in the Indiana Child Welfare Information System (ICWIS) and use an appropriate method to alert the FCM to the message (send an e-mail to the FCM, call the FCM, etc.).

Transferring CA/N Intake Reports to Other States

The following page on the U.S. Department of Health and Human Services web site may be helpful to locate contact information for child welfare agencies in other states:
www.acf.hhs.gov/programs/cb/publications/slo.htm

[NEW] Homeless Unaccompanied Minor

When a child enters a homeless or emergency shelter without the presence or consent of a parent, guardian, or custodian the shelter must notify DCS within 24 hours with the name of the child, the location of the shelter, and if the child alleges that he or she was abused and/or

neglected. DCS must conduct an assessment no later than 48 hours after receiving notification from the emergency shelter or shelter care facility.

[NEW] Children in Homeless Shelter with a Parent, Guardian, or Custodian

When allegations of CA/N are reported for children who are residing in or receiving services from a homeless shelter with their parent, guardian, or custodian; standard intake and assessment procedures should be followed.

FORMS AND TOOLS

1. [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) – Available in ICWIS
2. [Service Request Intake Report \(SF 49548/CW0310SR\)](#) – Available in ICWIS

RELATED INFORMATION

Mandated Reporters

IC 31-33-5-1

Any individual who has reason to believe that a child is a victim of child abuse or neglect has the duty to make a report; therefore, everyone in Indiana is considered a “mandated reporter.”

Professional Reporters

IC 31-33-5-2.3

Professional reporters, as defined by Indiana Law, are members of the staff of a medical or other public or private institution, school, facility, or agency. These reporters are legally obligated to report the alleged CA/N to the person in charge of the organization for which they work and to make a report to DCS (unless they have assurances that a report has already been made to DCS).

Immunity of Persons Making CA/N Reports

IC 31-33-6

A person who makes a CA/N report is immune from any civil or criminal liability that might otherwise be imposed because of such actions.

[NEW] Homeless Child (as defined by the Department of Education)

IC 20-50-1

"Homeless Child" is defined as a child who lacks a fixed, regular and adequate nighttime residence. It includes:

1. Child who shares another person's housing of due to loss of child's housing or economics; lives in a hotel, motel or campground because of economic hardship; lives in an emergency or transitional shelter; is abandoned in a hospital or other place not intended for general habitation; is awaiting foster care placement;
2. A child whose primary nighttime residence is a public or private place not ordinarily used to accommodate human beings;
3. A child who lives in a car, a park, a public space, an abandoned building, a bus station, a train station, substandard housing, or a similar setting is homeless; and
4. A child of a migratory worker who also fits in categories 1-3 above is homeless.

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL	
	Chapter 3: Child Abuse Hotline	Effective Date: July 1, 2012
	Section 2: Creating a Child Abuse and/or Neglect Intake Report	Version: 2

POLICY **[REVISED]**

The Indiana Department of Child Services (DCS) Child Abuse Hotline (Hotline) will create a [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) using Management Gateway for Indiana's Kids (MaGIK).

[NEW] Note: Intake reports involving a suspected injury to the head or neck of any child under the age of 18 should be considered for a referral to the Pediatric Evaluation and Diagnostic Service (PEDS) Program. This program is available 24 hours a day, seven (7) days a week.

The Hotline will utilize the domestic violence screening questions during each intake report of alleged Child Abuse and/or Neglect (CA/N) to assess for the presence of domestic violence. Screening of all calls allows the intake worker to assess for:

1. Any pattern of domestic violence;
2. The presence and role of the child in domestic violence incidents; and
3. The presence of any factors which suggest a heightened risk of the potential for life threatening injury to the child and non-offending parent.

Note: The early identification of domestic violence is the first step in achieving positive and safe outcomes for adult and child victims.

DCS will hold confidential the identity of persons who report allegations of CA/N unless a court requires the reporter's identity to be disclosed.

The Hotline will accept CA/N allegations from persons who wish to remain anonymous; however, DCS will strongly encourage all reporters to provide contact information so that follow-up can occur if more information is needed.

[NEW] Audio recordings of CA/N reports are confidential and can only be released by a court order. A prosecutor can request the recordings to investigate charges of false reporting.

Code References

1. [IC 31-33-7-4: Written Reports](#)
2. [IC 31-33-18: Disclosure of Reports; Confidentiality Requirements](#)
3. [IC 20-50: Homeless Children and Foster Care Children](#)
4. [IC 34-6-2-34.5: Domestic or Family Violence](#)
5. [IC 5-26.5-1-3: Domestic Violence](#)
6. [IC 35-41-1-6.5: Crime Involving Domestic or Family Violence Defined](#)

PROCEDURE

The Hotline Intake Specialist (IS) will:

1. Gather and document as much information as possible by thoroughly interviewing the reporter about:
 - a) The alleged incident,
 - b) The alleged child victim,
 - c) The alleged perpetrator, and
 - d) The alleged child victim's family, etc.
2. Utilize the domestic violence screening questions for all CA/N reports. See below for screening questions.
 - a. Has anyone else in the family/household been hurt or assaulted?
 - b. Has anyone in the family/household made threats to hurt or kill another family/household member, pet or themselves? If yes, please describe what happened.
 - c. Do you know if the police have ever been called to the home to stop fighting? If yes, how many times? Do you know if anyone was arrested? If yes, who was arrested?
 - d. Most people think of weapons as guns or knives, but other objects can be used to hurt someone (e.g., lamps, ashtrays, lighters, etc.). Do you know if weapons have been used to threaten or harm a family member? If so, what kind of weapons? Are the weapons still present?
 - e. Are the children safe now? Are the parents safe now?

Note: If domestic violence is suspected based on the answers to the screening questions above, see Practice Guidance for additional questions.

3. Review the information gathered and ask any additional questions needed to clarify vague, confusing, or incomplete statements;
4. Advise the reporter that his or her identity will not be disclosed by DCS to the alleged perpetrator unless the court orders the reporter's identity to be disclosed;
5. Follow all confidentiality policies and procedures should the reporter ask if his or her report will be assigned for assessment. See separate policy, [2.6 Sharing Confidential Information](#);
6. **[REVISED]** Create a [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) in MaGIK. Ideally, this will occur during the initial call from the reporter. The [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) must be completed by the end of the shift following the conclusion of the initial call from the reporter. Information received by e-mail, US mail or fax should be triaged and reports meeting legal sufficiency completed within 24 hours;
7. **[REVISED]** Evaluate the report to determine if a PEDS referral is necessary; and
8. Evaluate the report to determine the appropriate DCS response. See separate policy, [3.4 Initial Evaluation of Child Abuse and/or Neglect \(CA/N\) Intake Reports](#).

PRACTICE GUIDANCE

The Quality of the CA/N Intake Report Impacts Child Safety

Receipt of a call made to the child abuse hotline is the critical first step in the State's process of assuring the alleged victim's safety. The importance of this step cannot be overemphasized. How the call is handled and documented can have a significant impact on the next steps in the process. The quality of the information gathered impacts the ability of DCS to make a decision

about whether or not the report will be assigned for assessment. The quality of the information gathered will also impact the ability of DCS to conduct an effective assessment.

Excellent Customer Service is Imperative

Calls placed to the Hotline are often the only contact the community has with DCS. To the community, the IS provides the first impression of the level of public service available through DCS. A bad customer service experience may cause a caller to hesitate to make future CA/N reports. Therefore, the IS should always communicate with callers in a courteous and helpful manner.

Domestic Violence Questions:

1. Do you know where the child(ren) were during the incident?
2. Do you know if the child(ren) saw or heard the incident?
3. Did the child(ren) try to stop or intervene in the violence?
4. Was the child(ren) injured during the incident? What was the impact of the incident on the child(ren) and/or adult victim?
5. How long has the fighting been going on? Does the violence seem to be getting more serious?
6. Are any of the family/household members using drugs or alcohol?
7. Has anyone threatened to take the child(ren)? Who was it? What happened?
8. Do you know if the victim has contact with other family or community members?
9. Have any of the family/household members left home to escape the fighting and violence? Where did they go? How long were they gone?
10. How have you seen the violence affect the child(ren) (The purpose of this question is to establish a pattern of violence and/or long term effects on the child(ren))?
11. Do you know who is protecting the child(ren) right now?

Clarifying Confusing or Incomplete Statements

It may be necessary for the IS to ask the reporter to clarify confusing or incomplete statements. Example: The reporter says, "The man molested the little girl." In this example, the intake worker should ask for more information, such as "Please give me the details of what exactly the man did to the little girl." This is necessary because people may have different ideas about what the term "molest" means.

FORMS AND TOOLS

[Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) – Available in MaGIK

RELATED INFORMATION

Domestic Violence

Domestic violence typically involves a pattern of assaultive and coercive behaviors that an individual uses against his or her intimate partner with the intent to degrade, humiliate, or instill fear in him or her. These behaviors typically fall into five (5) general categories:

1. Physical assaults;
2. Sexual assaults;
3. Psychological assaults;
4. Economic coercion; and/or
5. The use of children to control the adult victim.

Domestic violence is a serious issue with potentially fatal implications for all family members. Exposure to domestic violence can have long lasting effects on children. Children who are exposed to domestic violence in their homes are more likely to experience:

1. Childhood behavioral, emotional, and social problems;
2. Cognitive and attitude problems; and
3. Long-term problems such as higher levels of adult depression and trauma and a greater likelihood to be involved in a violent adult relationship than their peers.

In recognition of the negative impact exposure to domestic violence may have on children and the prevalence of child abuse in families experiencing domestic violence, DCS will assure that every CA/N report is screened for the presence of domestic violence.

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL	
	Chapter 3: Intake	Effective Date: November 1, 2005
	Section 3: Service Request Intake Reports	Version: 1

POLICY

The Indiana Department of Child Services (DCS) will coordinate **voluntary** services for those families that experience issues that may compromise the health and well-being of a child, yet do not rise to the level of alleged or suspected Child Abuse and/or Neglect (CA/N). See separate policy, [3.8 Statutory Definition of Child Abuse and/or Neglect \(CA/N\)](#).

DCS will create a [Service Request Intake Report \(SF 49548/CW0310SR\)](#) for all service requests, regardless of whether DCS will or will not be funding the services.

A DCS Family Case Manager (FCM) will monitor the family's voluntary participation in the services if the services are paid for with DCS funds.

Exception: If there is a contract in place with a service provider, DCS will monitor the contract, not the family's participation.

Code References

N/A

PROCEDURE

The intake worker will:

1. **Third Party Requests:** Depending upon the situation, the intake worker will respond to the third party calling with a concern about a family by either:
 - a. Asking the third party to ask the family to contact DCS directly;
 - b. Giving the third party contact information for one or more appropriate service providers and asking the third party to give the information to the family; or
 - c. Taking the information about the family and advising the third party that DCS will review the report and take appropriate action.
2. **All Requests (Third party or self-referrals):**
 - a. Gather and document as much information as possible about the child's condition and the family's issues;
 - b. Gather the family's contact information, if known; and
 - c. Create a [Service Request Intake Report \(SF 49548/CW0310SR\)](#) in the Indiana Child Welfare Information System (ICWIS). The [Service Request Intake Report \(SF 49548/CW0310SR\)](#) must be completed in ICWIS no later than 24 hours after the conclusion of the initial call,

Do one of the following:

- a) Make a referral for services by providing the contact information of a provider. Forward the [Service Request Intake Report \(SF 49548/CW0310SR\)](#) to the intake Supervisor so that it may be approved and closed. No further action is required if DCS funds will not be used to pay for the services, or
 - b) Deliver the [Service Request Intake Report \(SF 49548/CW0310SR\)](#) to the intake Supervisor for review and possible assignment. The report may be delivered electronically or in hard copy.
3. **Self-Referrals Only:** Let the family know how soon someone will be in contact to complete an assessment and make a referral for services, if applicable.

The intake Supervisor will review the information contained on the report and do one of the following:

1. Contact the third party or family and make a referral for services by providing the contact information of a provider. "Approve" the [Service Request Intake Report \(SF 49548/CW0310SR\)](#). No further action is required if DCS funds will not be used to pay for the services;
2. If a self-referral, open a service case and assign to a FCM for further assessment; or
3. Override the intake worker's recommendation of "service request" and assign the report to a FCM for a CA/N assessment if the Supervisor determines the circumstances do rise to the level of alleged or suspected CA/N. Follow procedures in separate policy, [3.5 Supervisory Review of Child Abuse and/or Neglect \(CA/N\) Intake Reports](#).

PRACTICE GUIDANCE

Special Note: Voluntary Services

Based on the premise that government should intervene in families' lives only when it is absolutely necessary, DCS will move away from providing and monitoring (e.g., conducting an assessment, developing a plan, providing follow-up, etc.) voluntary services. DCS Regional Services Councils will develop a statewide network of community providers. Once DCS has a sufficient network in place, DCS will refer families who are not the subjects of substantiated CA/N assessments to community providers to receive voluntary services. DCS will monitor service provider contracts, not individual family participation. This will allow FCMs to focus on assessing and supporting those families who are participating in formal interventions as a result of CA/N substantiations.

Finding Community Resources (Service Providers)

Consider the following sources for information:

1. Printed and online local community resource directories;
2. Indiana 2-1-1 (dial 2-1-1; not available in all counties) or local Information and Referral (I&R) hotlines; and
3. Experienced DCS Supervisors and FCMs.

Examples of Service Requests

Examples include but are not limited to:

1. A mother requests assistance with a Safety Plan; her oldest child is returning home from juvenile detention for molesting a neighborhood child and there are younger children living in the home;
2. Requests for help for children who are a danger to themselves or others;
3. Requests for help for children who are adjudicated as delinquent or status offenders, but for whom DCS is given fiscal and/or supervisory responsibilities (by the courts); and
4. Requests received through the Interstate Compact on the Placement of Children (ICPC).

FORMS AND TOOLS

[Service Request Intake Report \(SF 49548/CW0310SR\)](#) – Available in ICWIS

RELATED INFORMATION

N/A

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL	
	Chapter 3: Child Abuse Hotline	Effective Date: July 1, 2012
	Section 4: Initial Evaluation of Child Abuse and/or Neglect Intake Reports	Version: 5

POLICY **[REVISED]**

The Indiana Department of Child Services (DCS) Child Abuse Hotline (Hotline) will evaluate every [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) it receives and make determinations about:

1. Whether or not the allegations meet the statutory definition of Child Abuse and Neglect (CA/N) and should be assigned for assessment, see separate policy, [3.8 Statutory Definition of Child Abuse and/or Neglect \(CA/N\)](#);
2. Whether or not the report contains enough information to identify or locate the child and initiate an assessment; and
3. How quickly the assessment must be initiated.

[NEW] Note: Intake reports involving a suspected injury to the head or neck of any child under the age of 18 should be considered for a referral to the Pediatric Evaluation and Diagnostic Service (PEDS) Program. This program is available 24 hours a day, seven (7) days a week.

CA/N intake reports that allege that a child witnessed or was present in the home during an incident of domestic violence will be assigned for assessment if appropriate with the focus of the assessment being placed on the safety of the child. The Hotline will also assign for assessment other domestic violence related calls that meet the statutory definition of CA/N. See Practice Guidance for further information and separate policy, [3.8 Statutory Definition of Child Abuse and/or Neglect \(CA/N\)](#).

The Hotline Intake Specialist (IS) will relay the CA/N intake report to the Hotline Intake Supervisor for review following the conclusion of the initial call from the reporter. The Hotline Intake Supervisor will subsequently review the CA/N intake report upon receipt from the IS. See separate policy, [3.5 Supervisory Review of Child Abuse and/or Neglect \(CA/N\) Intake Reports](#).

[REVISED] All CA/N intake reports involving a child who voluntarily enters an emergency shelter or a shelter care facility, without the presence or consent of a parent, guardian, or custodian will be routed to the DCS local office for assessment. DCS must conduct an assessment concerning the child no later than 48 hours after receiving notification from the emergency shelter or shelter care facility.

Code References

1. [IC 31-9-2: Family Law and Juvenile Law, Definitions](#)
2. [IC 31-34-1: Juvenile Law, Child in Need of Services](#)
3. [IC 31-36-3: Homeless Children](#)
4. [IC 34-6-2-34.5: Domestic or Family Violence](#)
5. [IC 35-41-1-6.5: Crime Involving Domestic or Family Violence Defined](#)

PROCEDURE

At the conclusion of the reporter's initial call the IS will:

1. **[REVISED]** Complete the [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) in Management Gateway for Indiana's Kids (MaGIK);
2. Screen thoroughly each individual named in the report in the MaGIK prior to sending to the Hotline Intake Supervisor;
3. Determine if the allegations meet the statutory definition of CA/N. See separate policy, [3.8 Statutory Definition of Child Abuse and/or Neglect \(CA/N\)](#);
4. **[REVISED]** Complete the following if the statutory definition of CA/N has been met:
 - a. Recommend that the report be routed to the DCS local office for assessment,
 - b. Recommend how quickly the assessment must be initiated and determine if response time is to be advanced.
5. Send the [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) to the Hotline Intake Supervisor to route to the DCS local office;

Note: A Hotline Intake Specialist may not bypass supervisory review on any reports.

PRACTICE GUIDANCE

Records Search

The Indiana Child Welfare Information System and the Indiana Client Eligibility System (ICES) databases may reveal pertinent information about the subjects of a CA/N report. The IS should examine all information for "red flags" that would cause a reasonable person to have concerns for the child's safety and well-being or worker safety. Pertinent facts should be briefly summarized in the allegations section of the CA/N intake report, such as dates and dispositions of previous DCS reports, assessments, and cases.

Domestic Violence

The Hotline will route for assessment domestic violence related reports that meet any of the following criteria:

1. A child has witnessed a domestic violence incident and/or was present in the home when a domestic violence incident occurred;
2. The child has been physically injured because of intervening in or being present during a domestic violence incident;
3. There is reason to believe the child is intervening or will intervene in the domestic violence, placing him or her at risk of injury;
4. The child is likely to be injured during the domestic violence incident (e.g., being held during violence, physically restrained from leaving);
5. The alleged domestic violence offender has made threats of homicide or suicide and has access to weapons or firearms;
6. There are serious, recurring domestic violence incidents and/or domestic violence is occurring in combination with other significant risk factors (e.g., substance abuse);
7. The alleged domestic violence offender does not allow the non-offending parent and/or child(ren) access to basic needs impacting their health and safety;
8. The alleged domestic violence offender has killed, kidnapped, substantially harmed, or is making a believable threat to kill, kidnap, or substantially harm anyone in the family, including extended family members and pets;

9. Serious injury to the non-offending parent (including, but not limited to, broken bones, internal bleeding or injury, extensive bruising or lacerations, poisoning, suffocating, strangling, shooting, or severe malnourishment);
10. Violence increasing in either frequency or severity; and
11. Weapons were used or threatened.

The Hotline will also consider the following factors prior to making a decision whether or not to route domestic violence related reports for assessment:

1. Isolated victims with little support;
2. Stalking behaviors (patterns of behaviors that are intimidating to the other party);
3. Interaction with other risk factors including substance abuse or mental illness;
4. Previous reports to DCS or LEA with the same or other child or adult victims;
5. Previous convictions for crimes against persons or serious drug offenses;
6. Violations of restraining orders; and
7. Lack of other community responses or resources.

CA/N Reports with No Allegation of Child Abuse and/or Neglect

If the report regarding an unaccompanied homeless child is made by an emergency shelter, a shelter care facility, or a program that provides shelter to homeless individuals, the report must be assigned. Assessment of all CA/N intake reports of this nature must be conducted within 48 hours of receiving notification from the emergency shelter or shelter care facility, even if abuse or neglect is not alleged.

Homeless Unaccompanied Minor

A homeless unaccompanied minor is an individual who is under the age of 18 and is receiving shelter without a parent, guardian, or custodian present.

Emancipated Minors

Shelters are not required to report providing shelter to emancipated minors to DCS. Reports for emancipated minors will not be recommended for assessment.

[REVISED] Safe Haven

A child who is, or appears to be, not more than 30 days of age and whose parent:

1. Has knowingly or intentionally left the child with an emergency medical services provider; and
2. Did not express an intent to return for the child.

FORMS AND TOOLS

[Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW 0310\)](#)

RELATED INFORMATION

Allegations that Occurred in the Past

DCS reserves the right to assess allegations of CA/N, no matter how long ago the alleged incidents occurred. This is despite the statute of limitation relative to CA/N ([IC 35-41-4-2 Periods of Limitation](#)), which sets forth the time limits for the prosecution of CA/N. The offenses listed in the Child in Need of Services (CHINS) definitions are either felonies or misdemeanors and are subject to the statute of limitation, after which time prosecution is barred. A Class B, Class C, or Class D felony cannot be prosecuted unless the prosecution is commenced within five (5) years after the commission of the offense; and the prosecution of a misdemeanor must

be commenced within two (2) years. A prosecution for murder or a Class A felony may be commenced at any time. The time limit for certain sexual offenses is extended, as detailed further in [IC 35-41-4-2](#).

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL	
	Chapter 3: Intake	Effective Date: May 1, 2009
	Section 5: Supervisory Review of Child Abuse and/or Neglect (CA/N) Intake Reports	Version: 4

POLICY

All [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) (Child Abuse and/or Neglect (CA/N) intake reports) will undergo supervisory review and approval before being assigned, transferred, or screened-out.

Exception: Reports that require an assessment to be initiated within one (1) hour of the conclusion of the initial call from the reporter. (**[NEW]** For example, Law Enforcement Agency (LEA) on the scene and reports alleged domestic violence and has requested assistance.) Such CA/N intake reports may be transferred directly to a Family Case Manager (FCM) without prior supervisory approval.

The Supervisor will review the CA/N intake as soon as practical, not to exceed **24 hours**.

An intake Supervisor **may shorten** the time frame in which a CA/N assessment must be initiated, but he or 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 assessment" if the allegations clearly do not meet the statutory definition of CA/N.

For all CA/N assessments that must be initiated within one (1) 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.

Exception: Per [IC 31-36-3](#), DCS must conduct an assessment concerning the child no later than **48 hours** after receiving notification from the emergency shelter or shelter care facility.

The Indiana Department of Child Services (DCS) will transmit copies of CA/N intake reports to Law Enforcement Agencies (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](#)
4. [IC 31-36-3: Homeless Children](#)

PROCEDURE

For all CA/N intake reports the Supervisor will:

1. Carefully review the CA/N 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 CA/N intake report if necessary to determine the appropriate DCS action;

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

3. Agree or disagree with the intake worker's recommendations about whether or not the report should be assigned for assessment, transferred to another DCS local office 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 Child Abuse and/or Neglect \(CA/N\)](#), [3.11 Transferring Intercounty Child Abuse and/or Neglect \(CA/N\) Intake Reports](#), and [3.6 Recommending a Child Abuse and/or Neglect \(CA/N\) Report for Screen-Out](#).

For all CA/N intake reports that will be transferred to another DCS local office, the intake Supervisor will follow procedures contained in the separate policy, [3.11 Transferring Intercounty Child Abuse and/or Neglect \(CA/N\) Intake Reports](#).

For CA/N intake reports that will be assigned for assessment, the intake Supervisor will:

1. Follow any additional procedures for special intakes. See separate policies: [3.10 Institutional Child Abuse and/or Neglect \(CA/N\) Intake Reports](#), [3.11 Transferring Intercounty Child Abuse and/or Neglect \(CA/N\) Intake Reports](#), [2.14 Intentional False Reports](#), and [4.29 Joint Assessments](#);
2. Review the response time assigned by the intake worker and:
 - a. Agree,
 - 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 assessments, open 30 days or less, involving the same alleged perpetrator, alleged victim, and same or similar allegations. See separate policy, [3.12 Linking Child Abuse and/or Neglect \(CA/N\) Reports to Open Assessments](#);
4. Assign the report for assessment after considering the following:
 - a. How quickly the assessment must be initiated,
 - b. 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,
 - c. How well the experience and skill sets of available FCMs match the case,
 - d. Which FCMs, if any, had previous involvement with the family, and
 - e. 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 CA/N intake report to LEA and prosecutors following local protocols unless this step was already completed as part of a joint assessment; and/or
7. Transmit a copy of the CA/N 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 Child Abuse and/or Neglect \(CA/N\) Intake 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 CA/N notify the following people:
 - a) DCS Agency Director,
 - b) Deputy Director of Field Operations,
 - c) Deputy Director of Communications,
 - d) Regional Manager, and
 - e) DCS Local 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 CA/N, regardless of weekends and holidays.

PRACTICE GUIDANCE

Hand-off of CA/N Intake Report to FCM

An in-person hand-off is the best method to use when assigning reports for 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.

[NEW] Initiation Times for CA/N Intake Reports That Involve Domestic Violence

DCS will initiate the [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) within 24 hours if the event occurred in the past 48 hours (regardless of reporting source). Self-reports (one parent, guardian, or custodian calls to report the domestic violence) will be initiated within 24 hours. For incidents that occurred more than 48 hours ago and the child is not believed to be in physical danger, initiation will occur within five (5) days. See separate policy, [3.9 – Initiation Times for Assessments](#).

Note: If the incident occurred more than 48 hours before the time of the intake report and the child(ren) are believed to be in physical danger, the [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) must be initiated within 24 hours.

FORMS AND TOOLS

[Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) – Available in ICWIS

RELATED INFORMATION

N/A

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL	
	Chapter 3: Intake	Effective Date: May 1, 2009
	Section 6: Recommending a Child Abuse and/or Neglect (CA/N) Report for Screen-Out	Version: 3

POLICY

The Indiana Department of Child Services (DCS) will not assign for assessment a [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) (Child Abuse and/or Neglect (CA/N) intake reports) that **do not**:

1. Meet the statutory definition of Child Abuse and/or Neglect (CA/N); and/or
2. Contain sufficient information to either identify or locate the child and/or family and initiate an assessment.

CA/N intake reports that are not assigned for assessment are referred to as “screen-outs”.

CA/N intake reports that involve a homeless unaccompanied minor receiving shelter from an emergency shelter, shelter care facility, or program that provides shelter to homeless individuals without the presence or consent of a parent, guardian, or custodian, may **not** be “screened-out”.

Code References

[IC 31-36-3: Homeless Children](#)

PROCEDURE

The intake worker will:

1. Recommend an CA/N intake report for screen-out if:
 - a. The statutory definition of CA/N **has not** been met, and/or
 - b. There is not enough information in the CA/N intake report to either identify or locate the child and/or family to initiate an assessment.

[NEW] Note: DCS will consider potential current and future risk to the child(ren) prior to recommending a CA/N intake report that involves domestic violence for screen-out.

2. Document the specific reason for the screen-out in the notes section of the CA/N intake report (i.e., “The allegations don’t meet the statutory definition of CA/N because the person who allegedly beat the child was not the child’s parent, guardian or custodian”);
3. Recommend the report be referred to law enforcement if the allegations are of a criminal nature;
4. Forward the CA/N intake report and records search information to a Supervisor for review and approval of the recommendation to screen it out. This may be done electronically or in hard copy;

5. The intake worker will either make direct contact with the Supervisor to confirm receipt or will assure receipt through a standardized delivery process such as a high-priority inbox, an incoming CA/N intake report log, etc.

See related policy, [3.7 Review of Screened-out Child Abuse and/or Neglect \(CA/N\) Intake Reports](#).

PRACTICE GUIDANCE

N/A

FORMS AND TOOLS

N/A

RELATED INFORMATION

N/A

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL	
	Chapter 3: Intake	Effective Date: November 1, 2005
	Section 7: Review of Screened-Out Child Abuse and/or Neglect (CA/N) Intake Reports	Version: 1

POLICY

The Indiana Department of Child Services (DCS) will conduct a structured review of all [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) (Child Abuse and/or Neglect (CA/N) intake reports) that are recommended by a Supervisor for screen-out.

A local Screen-Out Committee will exist for **each county** to review all CA/N intake reports that a DCS Local Office Director recommends for screen-out. The Screen-Out Committee will act as an advisory committee and will make recommendations about screen-outs.

The Screen-Out Committee members will consist of the following four (4) people:

1. DCS Local Office Director;
2. DCS Family Case Manager (FCM) Supervisor or FCM;
3. Member of a local Child Protection Team¹; and
4. DCS Local Office Attorney.

Code References

N/A

PROCEDURE

After a Supervisor approves a CA/N intake report for screen-out, the following will occur:

1. The **DCS Local Office Director** or his or her designee² will complete the following within 24 hours of the conclusion of the initial call from the reporter:
 - a. Review the CA/N intake report and records search information,
 - b. Agree with or overrule the Supervisor's recommendation, and
 - c. Contact a Supervisor to communicate his or her decision.
2. The **Supervisor** will document the DCS Local Office Director's decision in the notes section of the CA/N intake report in the Indiana Child Welfare Information System (ICWIS) and either:
 - a. Assign the report for assessment if the DCS Local Office Director overruled the screen-out. See separate policy, [3.5 Supervisory Review of Child Abuse and/or Neglect \(CA/N\) Intake Reports](#), or
 - b. Leave the report open in ICWIS so the DCS Local Office Director can enter his or her final decision at a later date. Assure that a hard copy of the report and search information is properly filed for the Screen-Out Committee review.

¹ This representative may not be a DCS employee.

² In this case, the director's designee cannot be the supervisor who recommended the report for screen-out.

3. The local **Screen-Out Committee** will review all CA/N intake reports that a DCS Local Office Director has recommended for screen-out within seven (7) days of the initial call made by the reporter.
 - a. The members of the local Screen-Out Committee may meet in person or conduct the review via teleconference or e-mail,
 - b. Information from the records search will also be reviewed, and
 - c. The committee's discussion about each report will be documented, along with any recommendations. A hard copy of the documentation will be attached to a copy of the intake report and filed.
4. The **DCS Local Office Director** will consider the committee's recommendations before making a final decision and communicating the decision to a Supervisor. Any decisions to disallow a screen-out must be communicated to a Supervisor no later than two (2) hours after the committee adjourns;
5. The **Supervisor** will document the date and final decision, with rationale, in the notes section of the CA/N intake report in ICWIS;
6. The **Supervisor** will either:
 - a. Assign the intake report for assessment. This must be done within two (2) hours of receiving the DCS Local Office Director's decision to disallow the screen-out, or
 - b. "Approve" the screen-out decision in ICWIS, thus closing the report. Consider referring the family for services. See separate policy, [3.3 Service Request Intake Reports](#).
7. A **Supervisor** will give feedback to the intake worker who recommended the report for screen-out if the final decision was to disallow the screen-out.

Note: This is a teaching moment, not a disciplinary action.

PRACTICE GUIDANCE

N/A

FORMS AND TOOLS

N/A

RELATED INFORMATION

N/A

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL	
	Chapter 3: Intake	Effective Date: February 1, 2008
	Section 8: Statutory Definition of Child Abuse and/or Neglect (CA/N)	Version: 2

POLICY

The Indiana Department of Child Services (DCS) will use the following criteria when evaluating a [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) (Child Abuse and/or Neglect (CA/N) intake report) to determine if the allegations meet the statutory definition for CA/N:

1. The alleged victim is under the age of 18;
2. The alleged perpetrator's relationship to the alleged victim is that of parent, guardian or custodian (See "Relationship" below); and

Exception: For allegations involving sexual offenses, the perpetrator can have **any** or **no** relationship to the child.

3. The allegations would cause a reasonable person to believe that CA/N has occurred (See "Allegations" below).

Relationship

Parent: The child's biological or adoptive mother or father.

Guardian: A person appointed by a court to have the care and custody of a child and/or the child's estate.

[REVISED] Custodian: Any person with whom a child resides **or** any of the following:

1. A license applicant or licensee of:
 - a. A foster home or residential child care facility that is required to be licensed or is licensed
 - b. A child care center that is required to be licensed or is licensed
 - c. A child care home that is required to be licensed or is licensed; or
2. A person who is responsible for care, supervision, or welfare of children while providing services as an owner, director, manager, supervisor, employee, or volunteer at:
 - a. A home, center, or facility described in one (1) above
 - b. A child care ministry that is exempt from licensing requirements and is registered or required to be registered
 - c. A home, center, or facility that serves migrant children
 - d. A school; or
3. A child caregiver; or
4. An individual who has direct contact, on a regular and continuing basis, with a child for whom care and supervision is provided at a house, center, or facility described above.

See Related Information for a definition of child caregiver.

Allegations

Indiana Law includes the following Child in Need of Services (CHINS) definitions as the basis for child CA/N.

Note: There are additional CHINS statutes in Indiana Code that are not included in the definition of CA/N.

This list is intended to be used by an intake worker/Supervisor as a parameter to determine whether a reporter's allegations would seem to indicate that CA/N has occurred:

- CHINS 1: The child's physical or mental condition is seriously impaired or seriously endangered as a result of the parent, guardian, or custodian being unable, refusing, or neglecting to supply the child with necessary food, clothing, shelter, medical care, education, or supervision.
- CHINS 2: The child's physical or mental condition is seriously impaired or seriously endangered due to an injury as a result of the parent, guardian, or custodian's act or omission, or there is evidence that illegal manufacture of a drug or controlled substance is occurring on property where a child resides.
- CHINS 3: The child is a victim of certain sex offenses or is living in a household with a victim of certain sex offenses.
- CHINS 4: The child's parent, guardian, or custodian allows the child to participate in an obscene performance.
- CHINS 5: The child's parent, guardian, or custodian allows the child to commit a prohibited sex offense (See Tool [Sexual Offenses CA/N Matrix](#)).

Code References

1. [IC 31-9-2-14: Child abuse or neglect](#)
2. [IC 31-9-2-31: Custodian](#)
3. [IC 31-34-1: \(Sections 1-15\) Circumstances under which a child is a Child in Need of Services](#)
4. [IC 35-42-4: \(Sections 1-4, 7, 9\) Rape; criminal deviant conduct; child molesting; child exploitation and pornography; child seduction; sexual misconduct with a minor](#)
5. [IC 35-45-4: \(Sections 1 and 2\) Public indecency and prostitution](#)
6. [IC 35-46-1-3: Incest](#)

PROCEDURE

See separate policy, [3.4 - Initial Evaluation of CA/N Intake Reports](#) for procedure.

PRACTICE GUIDANCE

Statutory Definition of CA/N

The ultimate determination about whether or not allegations meet the statutory definition of CA/N requires a careful, balanced assessment of both objective and subjective data with the paramount consideration being the child alleged to be a victim. The child has the right to due process of an assessment if the allegations meet the statutory definition. When in doubt, assign for assessment.

Emotional Abuse

Emotional abuse can be a repeated pattern of caregiver behavior or an extreme incident that conveys to a child that he or she is worthless, flawed, unloved, unwanted, endangered, or only of value in meeting another's needs. (American Professional Society on the Abuse of Children, 1995)¹. The emotionally abusive act(s) can be grouped into the categories of spurning, terrorizing, exploiting/corrupting, isolating, and denying emotional responsiveness.

DCS defines an **emotionally abused child** as one whose health or welfare is harmed or threatened with harm, when his or her parent, guardian, or custodian inflicts or allows to be inflicted an emotional injury, or creates or allows to be created a risk of emotional injury upon the child.

DCS defines an **emotional injury** as an injury to the mental or psychological capacity or emotional stability of a child as evidenced by a substantial impairment in the child's ability to function within a normal range of performance and behavior with due regard to his or her age, development, culture, and environment as testified to by a Qualified Mental Health Professional (QMHP).

FORMS AND TOOLS

[Tool: Sexual Offenses CA/N Matrix](#)

RELATED INFORMATION

[NEW] Child Caregiver

[IC 31-9-2-16.4](#) defines a child caregiver as a person who provides, or is responsible for providing, care and supervision of a child (other than a child of whom the person is a parent, stepparent, grandparent, aunt, uncle, sibling, legal guardian, or custodian with whom the person resides) at a residential property that is not the child's place of residence, if the person:

1. Is not required to be licensed as the operator of:
 - a. A child care home under IC 12-17.2-5, or
 - b. A foster family home under [IC 31-27-4](#), and
2. Provides care and supervision of a child while unattended by the child's:
 - a. Parent,

¹ American Professional Society on the Abuse of Children. *Guidelines for Psychosocial Evaluation of Suspected Psychological Maltreatment in Children and Adolescents*. Chicago, IL: American Professional Society on the Abuse of Children;1995

- b. Guardian, or
 - c. Or custodian with whom the child resides, and
3. Receives more than two thousand dollars (\$2,000) in annual compensation for providing care and supervision of a child or children.

All of these requirements must be met in order for DCS to assess a child caregiver.

[NEW] Child Care Home

DCS assesses all child care homes whether licensed, unlicensed, or operating illegally without a license. See separate policy, [4.30 Institutional Assessments](#).

A child care home is defined as a residential structure in which at least six (6) children (not including the children for whom the provider is a parent, stepparent, guardian, custodian, or other relative or any child who is at least 14 years of age and does not require child care) at any time receive child care from a provider:

- 1. While unattended by a parent, legal guardian, or custodian;
- 2. For regular compensation; and
- 3. For more than four (4) hours but less than 24 hours in each of 10 consecutive days per year, excluding intervening Saturdays, Sundays, and holidays.

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL	
	Chapter 3: Intake	Effective Date: May 1, 2009
	Section 9: Initiation Times for Assessments	Version: 3

POLICY

The Indiana Department of Child Services (DCS) will initiate every Child Abuse and/or Neglect (CA/N) assessment within the appropriate timeframe as determined by Indiana Law.

An assessment will be considered “initiated” when:

1. The Family Case Manager (FCM) makes **face-to-face contact** with the alleged child victim and notifies, in-person or via phone, the parent, guardian, or custodian; and
2. The FCM has assessed, and is able to reasonably assure, the safety of the child.

Assessments will be initiated within the following timeframes:

1. Within **one (1) hour** if the allegations would cause a reasonable person to believe that the child is in imminent danger of serious bodily harm; or
2. Within **24 hours** if the allegations involve abuse but the conditions in item one (1) above do not apply; or
3. Within **five (5) days** if the allegations involve neglect and none of the conditions in items one (1) or two (2) above apply.

[NEW] For reports involving alleged domestic violence, DCS will initiate the assessment:

1. If a Law Enforcement Agency (LEA) is on the scene and has requested assistance, DCS will respond within **one (1) hour** to the scene;
2. Any reports where a parent, guardian, custodian, or child(ren) calls to report alleged domestic violence will be initiated within **24 hours**;
3. If the alleged domestic violence occurred in the past **48 hours** (regardless of the reporting source), DCS will initiate the assessment within **24 hours**; or
4. If the alleged domestic violence occurred more than **48 hours** ago and the child(ren) are not believed to be in physical danger, DCS will initiate the assessment within **five (5) days**.

For reports concerning children who voluntarily enter an emergency shelter or a shelter care facility without the presence or consent of a parent, guardian, or custodian, DCS must conduct an assessment within **48 hours** of receiving the report. DCS must notify the parent, guardian, or custodian of the child within **72 hours** of the child entering the shelter or a shelter care facility.

Response times are measured from the conclusion of the initial call from the reporter. This means for **one (1) hour** assessments, the FCM must make face-to-face contact with the child, notify the parents, and assure the safety of the child within **one (1) hour** of the conclusion of the initial call from the reporter.

Assessments will be initiated regardless of the time of day (or night), and regardless of weekends or holidays, in order to meet the appropriate timeframes.

DCS will request assistance from LEA when circumstances exist that prevent DCS from being able to initiate **one (1) hour** assessments in a timely fashion.

Code References

1. [IC 31-33-8-1: Investigations by local child protection service; time of initiation](#)
2. [IC 31-33-8-6: Investigatory duties of local child protection service; purpose](#)
3. [IC 31-36-3-3: Homeless Children](#)

PROCEDURE

The intake worker or Supervisor will:

1. Consider all known information about the CA/N allegations;
2. Make a determination about the appropriate initiation timeframe; and
3. Compare the selected timeframe to the one assigned by the Indiana Child Welfare Information System (ICWIS) and make any - appropriate overrides.

PRACTICE GUIDANCE

N/A

FORMS AND TOOLS

N/A

RELATED INFORMATION

N/A

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL	
	Chapter 3: Intake	Effective Date: February 1, 2008
	Section 10: Institutional Child Abuse and/or Neglect (CA/N) Intake Reports	Version: 2

POLICY

The Indiana Department of Child Services (DCS) will receive reports of institutional Child Abuse and/or Neglect (CA/N).

The DCS local office in the county where the alleged CA/N occurred will coordinate the intake process.

Code References

N/A

PROCEDURE

The intake worker will:

1. Gather as much information as possible to create a thorough [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114/CW0310\)](#) (Child Abuse and/or Neglect (CA/N) intake report). See separate policy, [3.2 Creating a Child Abuse and/or Neglect \(CA/N\) Intake Report](#);
2. Select "Institutional CA/N" in the Indiana Child Welfare Information System (ICWIS);
3. Create separate institutional CA/N intake reports in ICWIS, if multiple alleged victims are identified;
4. Document the name and location of the institution where the alleged CA/N took place; and
5. Follow procedures outlined in separate policy, [3.4 Initial Evaluation of Child Abuse and/or Neglect \(CA/N\) Intake Reports](#).

[NEW] Unlicensed Registered Child Care Ministries

The intake worker will:

1. Gather as much information as possible to create a thorough CA/N intake report. See separate policy, [3.2 Creating a Child Abuse and/or Neglect \(CA/N\) Intake Report](#);
2. Utilize www.childcarefinder.in.gov to determine if the institution that is the subject of the report is an unlicensed registered child care ministry;
3. Select the 'Institution' icon in ICWIS, if the agency is an active ministry;
4. Create the resource for the intake with the 'Resource Type' entered as 'Registered Child Care Ministry' and proceed with the intake, if the agency does not exist in ICWIS and is verified from www.childcarefinder.in.gov;
5. Follow procedures outlined in separate policy, [3.4 Initial Evaluation of Child Abuse and/or Neglect \(CA/N\) Intake Reports](#); and
6. If the allegations are reported by a Law Enforcement Agency (LEA), confirm if LEA plans to conduct an investigation of the reported allegations involving the unlicensed

registered child care ministry. See separate policies, [3.9 Initiation Times for Assessments](#) and [4.29 Joint Assessments](#).

PRACTICE GUIDANCE

Examples of institutions include but are not limited to:

1. Resource family homes;
2. Residential child-caring institutions'
3. Juvenile correctional facilities;
4. Unlicensed registered child care ministries;
5. Group homes;
6. Pediatric nursing homes; and
7. Detention centers

FORMS AND TOOLS

N/A

RELATED INFORMATION

N/A