

Chapter 1 – INVESTIGATIONS INVOLVING MULTIPLE COUNTIES

- Purpose 1-1
- Concurrent Intake Assignment 1-2
- Concurrent Assignment Procedures 1-3
- Investigation Transfer Procedures 1-4
- OTI Procedures 1-5
- Supervisor 1-6
- Documentation 1-7

Chapter 2 – NO JURISDICTION, DUPLICATE AND FALSE REPORT CLOSURES

- Permitted Exceptions to Completing an Investigation 2-1
- Procedures 2-2
- Supervisor 2-3
- Documentation 2-4

Chapter 3 – INVESTIGATION RESPONSE TIMES

- Definition 3-1
- Determining Response Time 3-2
- Supervisory Approval to Change Response Time 3-3
- Documentation 3-4

Chapter 4 – INVESTIGATION TYPES AND USE OF THE FAMILY FUNCTIONING ASSESSMENT (FFA)

- Types of Investigations 4-1
- Definitions 4-2
- Purpose of the Family Functioning Assessment 4-3
- Required Use of the Family Functioning Assessment 4-4
- Conditions Generating a Separate In-Home Investigation 4-5
- Relationship of Maltreating Caregiver to Child 4-6
- Supervisor 4-7
- Streamline FFA Documentation for In-Home Investigations 4-8

Chapter 5 – ASSIGNING THE INVESTIGATION

- Intake Assignment 5-1
- Factors to Consider in Intake Assignment 5-2

Chapter 6 – PRE-COMMENCEMENT ACTIVITIES

- Purpose 6-1
- Required Consultations 6-2
- Pre-Commencement Review Activities 6-3
- Required Reporter Contact 6-4
- Pre-Commencement Planning and Teaming 6-5
- Field Kits 6-6
- Supervisor 6-7
- Documentation 6-8

Chapter 7 – CONSULTATION AND TEAMWORK WITH EXTERNAL PARTNERS

- Purpose 7-1
- Use of Professional Assessments during FFAs 7-2
- Multidisciplinary Staffing 7-3
- Supervisor 7-4
- Documentation 7-5

Chapter 8 – COORDINATION WITH LAW ENFORCEMENT

Purpose 8-1

Procedures 8-2

Supervisor 8-3

Documentations..... 8-4

Chapter 9 – COORDINATION WITH CHILD PROTECTION TEAM (CPT)

Purpose 9-1

Mandatory Referral Criteria 9-2

Mandatory Referral Process 9-3

Conflict Resolution Over CPT Findings for Recommendations 9-4

General Consultation Requirements 9-5

Medical Neglect Consultation Requirements 9-6

Child Fatality Consultation Requirements 9-7

Reports from Hospital Emergency Rooms..... 9-8

Reconciling Differing Medical Opinions 9-9

Supervisor 9-10

Documentation 9-11

Chapter 10 – DOMESTIC VIOLENCE (DV) CONSULTATIONS

Purpose 10-1

Procedures 10-2

Supervisor 10-3

Documentation 10-4

Chapter 11 – SUBSTANCE ABUSE CONSULTATIONS

Purpose 11-1

Procedures 11-2

Supervisor 11-3

Documentation 11-4

Chapter 12 – MENTAL HEALTH CONSULTATIONS

Purpose 12-1

Procedures 12-2

Supervisor 12-3

Documentation 12-4

Chapter 13 – ASSESSING PRESENT DANGER

Purpose 13-1

Present Danger Threats 13-2

Present Danger Assessment..... 13-3

“Initial” Supervisor Consultation 13-4

Documentation 13-5

Chapter 14 – INITIAL CONTACTS AND INTERVIEWS

Purpose 14-1

Procedures 14-2

Chapter 15 – INTERVIEWING CHILDREN

Purpose 15-1

Procedures 15-2

Supervisor 15-3

Documentation 15-4

Chapter 16 – INTERVIEWING THE NON-MALTREATING CAREGIVER AND HOUSEHOLD MEMBERS

Purpose 16-1
 Procedures 16-2
 Supervisor 16-3
 Documentation 16-4

Chapter 17 – INTERVIEWING THE ALLEGED MALTREATING CAREGIVER

Purpose 17-1
 Procedures 17-2
 Supervisor 17-3
 Documentation 17-4

Chapter 18 – INTERVIEWING COLLATERAL CONTACTS

Purpose 18-1
 Procedures 18-2
 Supervisor 18-3
 Documentation 18-4

Chapter 19 – OBSERVING FAMILY INTERACTIONS

Purpose 19-1
 Parent-Child Interactions 19-2
 Adult Interactions 19-3
 Supervisor 19-4
 Documentation 19-5

Chapter 20 – SAFETY DETERMINATION

Purpose 20-1
 Caregiver Protective Capacity 20-2
 Safety Determination – Safe or Unsafe 20-3
 Supervisor 20-4
 Documentation 20-5

Chapter 21 – ASSESSING AND RESPONDING TO RISK

Purpose 21-1
 Scope of Use 21-2
 Identification of Primary and Secondary Caregivers 21-3
 Risk Assessment Scoring 21-4
 Investigative Response to High and Very High-Risk Scores 21-5
 Supervisor 21-6
 Documentation 21-7

Chapter 22 – DETERMINATION OF FINDINGS

Purpose 22-1
 Procedures 22-2
 Supervisor 22-3
 Documentation 22-4

Chapter	23	–	“PATENTLY	UNFOUNDED”	REPORTS	
	Purpose					23-1
	Criteria for Compelling Evidence					23-2
	Procedures					23-3
	Exclusions on the Use of Patently Unfounded Closure					23-4
	Supervisor					23-5
	Documentation					23-6
Chapter	24	–	FALSE	REPORTS		
	Purpose					24-1
	Criteria for Determining a False Report					24-2
	Procedures					24-3
	Supervisor					24-4
	Documentation					24-5
Chapter	25	–	CLOSURE	OF	THE	INVESTIGATION
	Purpose					25-1
	Procedures					25-2
	“Duplicate” Case Closures					25-3
	“Unable to Locate” Closures					25-4
	“No Jurisdiction” Closures					25-5
	Patently Unfounded Closures					25-6
	Closing with No Services					25-7
	Closing with Services					25-8
	Closing Open to Ongoing Case Management					25-9
Chapter	26	–	SUPERVISOR	CONSULTATIONS		
	Purpose					26-1
	Pre-Commencement Consultations					26-2
	“Initial” Consultations					26-3
	“Follow-up” Consultations					26-4
	“Closure” Consultations					26-5
Chapter	27	–	2 ND	TIER	CONSULTATIONS	
	Purpose					27-1
	Procedures					27-2
	Required Actions and Timeframes					27-3
Chapter	28	–	INVESTIGATIVE	RESPONSE	TO	INSTITUTIONAL
	Purpose					28-1
	Legal Authority					28-2
	Training					28-3
	Notifications					28-4
	Responding to Reports of Abuse, Neglect, or Abandonment by a Foster Parent – CPI Responsibilities					28-5
	Attachment 1: Child Protective Investigations Involving Foster Parents – Information Sheet					