Appendix C
National Study of Child Protective Services Systems and Reform Efforts
Blank State CPS Policy Review Form

State: ________________________
Date of Review: ________________________
Reviewer: ________________________
Same Manual Reviewed for unsub ____Yes ____No

A. Administrative Structure

1. Is CPS in this State
   ____ 1.1 State Administered
   ____ 1.2 State Supervised/County Administered
   ____ 1.3 Other (please specify)_____________________________________________________________________________________________________

2. Responsibility for major functions (in each cell write “P” if the agency has primary responsibility, “S” if the responsibility is shared. If the responsibility is shared please put an “S” in each cell where that agency or office shares responsibility. If the manual does not specify responsibility put an “X” in the Not Specified column.)

<table>
<thead>
<tr>
<th>Function</th>
<th>State Central Office</th>
<th>Regional District Office</th>
<th>County/Local CPS Office</th>
<th>Other (Please Specify)</th>
<th>Not Specified</th>
<th>Section/page/date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maintain Hotline</td>
<td>2.1.a</td>
<td>2.1.b</td>
<td>2.1.c</td>
<td>2.1.d</td>
<td>2.1.e</td>
<td>2.1.f</td>
</tr>
<tr>
<td>Receive Referrals/reports</td>
<td>2.2.a</td>
<td>2.2.b</td>
<td>2.2.c</td>
<td>2.2.d</td>
<td>2.2.e</td>
<td>2.2.f</td>
</tr>
<tr>
<td>Screen/determine need for response</td>
<td>2.3.a</td>
<td>2.3.b</td>
<td>2.3.c</td>
<td>2.3.d</td>
<td>2.3.e</td>
<td>2.3.f</td>
</tr>
<tr>
<td>Conduct Investigation</td>
<td>2.4.a</td>
<td>2.4.b</td>
<td>2.4.c</td>
<td>2.4.d</td>
<td>2.4.e</td>
<td>2.4.f</td>
</tr>
<tr>
<td>Conduct Safety/Risk Assessments</td>
<td>2.5.a</td>
<td>2.5.b</td>
<td>2.5.c</td>
<td>2.5.d</td>
<td>2.5.e</td>
<td>2.5.f</td>
</tr>
<tr>
<td>Conduct Additional Family Functioning Assessments</td>
<td>2.6.a</td>
<td>2.6.b</td>
<td>2.6.c</td>
<td>2.6.d</td>
<td>2.6.e</td>
<td>2.6.f</td>
</tr>
<tr>
<td>Conducts Other CPS Response (alternative track)</td>
<td>2.7.a</td>
<td>2.7.b</td>
<td>2.7.c</td>
<td>2.7.d</td>
<td>2.7.e</td>
<td>2.7.f</td>
</tr>
<tr>
<td>Assigns cases to response track</td>
<td>2.8.a</td>
<td>2.8.b</td>
<td>2.8.c</td>
<td>2.8.d</td>
<td>2.8.e</td>
<td>2.8.f</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td>2.9.a</td>
<td>2.9.b</td>
<td>2.9.c</td>
<td>2.9.d</td>
<td>2.9.e</td>
<td>2.9.f</td>
</tr>
</tbody>
</table>
B. Screening

1. Reporters (please check all that apply)

<table>
<thead>
<tr>
<th>Mandated</th>
<th>Accepted</th>
<th>Not Specified</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1.1 Social Services Personnel</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.2 Medical Personnel</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.3 Mental Health Personnel</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.4 Education Personnel</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.5 Legal, law enforcement or criminal justice personnel</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.6 Child day care providers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.7 Substitute care providers including foster parents</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.8 Alleged victims</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.9 Parents (birth, adoptive, step)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.10 Other relatives</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.11 Friends and neighbors (includes clergy, youth group, paramours)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.12 Alleged perpetrators</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.13 Anonymous or unknown</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.14 Other (please specify)</td>
</tr>
</tbody>
</table>

2. Definition of non-mandated reporter

3. Criteria for Commencing Investigation (Screening In)

<table>
<thead>
<tr>
<th>Short Description of Criterion (Please copy and attach definitions)</th>
<th>Section/Page/Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1.a</td>
<td>3.1.b</td>
</tr>
<tr>
<td>3.2.a</td>
<td>3.2.b</td>
</tr>
<tr>
<td>3.3.a</td>
<td>3.3.b</td>
</tr>
<tr>
<td>3.4.a</td>
<td>3.4.b</td>
</tr>
<tr>
<td>3.3.a</td>
<td>3.3.b</td>
</tr>
</tbody>
</table>
4. **Exclusions for Commencing Investigation (Screening Out)**

<table>
<thead>
<tr>
<th>Short Description of Criterion (Please copy and attach definitions)</th>
<th>Section/Page/Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1.a</td>
<td>4.1.b</td>
</tr>
<tr>
<td>4.2.a</td>
<td>4.2.b</td>
</tr>
<tr>
<td>4.3.a</td>
<td>4.3.b</td>
</tr>
<tr>
<td>4.4.a</td>
<td>4.4.b</td>
</tr>
<tr>
<td>4.5.a</td>
<td>4.5.b</td>
</tr>
</tbody>
</table>

5. **Is there 24-hour availability for accepting referrals?**
   - Yes
   - No
   - Not Specified
   Section/Page/Date

6. **Is there a required form for documenting all referrals?**
   - Yes
   - No
   - Not Specified
   Section/Page/Date
   (IF YES, PLEASE DESCRIBE FORM HERE)

7. **What are the required timeframes for accepting a referral and forwarding it for investigation?**
   Section/Page/Date
8. **Results of Screening**

- 8.1 Screened out, no further action
- 8.2 Referral made outside CPS to other part of Child Welfare agency
- 8.3 Referral made to another agency
- 8.4 Accepted for investigation
- 8.5 Accepted for other CPS response
- 8.6 Information on the allegation shared with another agency
- 8.7 Other (please specify)

9. **Results of Screening**

Who decides to forward the case for further action?

- 9.1 Worker only
- 9.3 Supervisor only
- 9.5 Worker decides/supervisor approves
- 9.7 Joint worker/supervisor
- 9.9 Not specified
- 9.10 Other

(including special circumstances that cause basic policy to be modified)

10. **Who must be notified when calls are screened in?**
C. Investigation

1. Definitions of maltreatment recognized by state policy (please paraphrase briefly and attach a copy of definitions to this document). If this manual has been reviewed for unsub, skip this section.

<table>
<thead>
<tr>
<th>Item</th>
<th>Topic</th>
<th>Definition</th>
<th>Section/Page/Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1.a</td>
<td>Neglect</td>
<td></td>
<td>1.1.b</td>
</tr>
<tr>
<td>1.2.a</td>
<td>Physical Abuse</td>
<td></td>
<td>1.2.b</td>
</tr>
<tr>
<td>1.3.a</td>
<td>Sexual Abuse</td>
<td></td>
<td>1.3.b</td>
</tr>
<tr>
<td>1.4.a</td>
<td>Emotional Abuse</td>
<td></td>
<td>1.4.b</td>
</tr>
<tr>
<td>1.5.a</td>
<td>Other (Please specify)</td>
<td></td>
<td>1.5.b</td>
</tr>
<tr>
<td>1.6.a</td>
<td>Other (Please specify)</td>
<td></td>
<td>1.6.b</td>
</tr>
<tr>
<td>1.7.a</td>
<td>Other (Please specify)</td>
<td></td>
<td>1.7.b</td>
</tr>
</tbody>
</table>
2. **Disposition Categories** (skip if manual previously reviewed)

<table>
<thead>
<tr>
<th>Disposition Category/Subcategory (please use outline format to designate category/subcategory relationship)</th>
<th>Definition</th>
<th>Legal Standard for Classification</th>
<th>Section/Page/Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1.a</td>
<td>2.1.b</td>
<td>2.1.c</td>
<td>2.1.d</td>
</tr>
<tr>
<td>2.1.1.a</td>
<td>2.1.1.b</td>
<td></td>
<td></td>
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<tr>
<td>2.1.2.a</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
3. **What is the purpose or definition of investigation provided in policy?**

4. **Does this state share joint investigation authority as explicitly defined in policy?**

   If Yes:
   - With what other agency or agencies?
     - 4.1
     - 4.2

   4.3 What is the mechanism governing involvement with agency 1?
   - 4.3.a Statute
   - 4.3.b Protocol
   - 4.3.c Cooperative agreement or Memorandum of Understanding
   - 4.3.d Other (please specify)

   4.4 What is the mechanism governing involvement with agency 2?
   - 4.4.a Statute
   - 4.4.b Protocol
   - 4.4.c Cooperative agreement or Memorandum of Understanding
   - 4.4.d Other (please specify)

5. **Are priority standards for starting an investigation described in policy?**

   If yes, please briefly describe levels
6. **Is there a requirement to investigate**  
   - All children in the family  
   - Only the child(ren) who are the subject(s) of the allegation(s)  
   - Other (please specify)  

7. **Standardized assessments required (is formal instrument used across state)**  

   7.1 Is safety assessment required during investigation?  
      - Yes  
      - No  

   7.2 At what other points is safety assessment required?  
      - 7.2.a Before investigation on all reported cases  
      - 7.2.b Before investigation on only reports that are screened in  
      - 7.2.c After disposition (only substantiated reports)  
      - 7.2.d After disposition (including unsubstantiated reports)  
      - 7.2.e Other (please specify)  

   7.3 Is risk assessment required during investigation?  
      - Yes  
      - No  

   7.4 At what other points is risk assessment required?  
      - 7.4.a Before investigation on all reported cases  
      - 7.4.b Before investigation on only reports that are screened in  
      - 7.4.c After disposition (only substantiated reports)  
      - 7.4.d After disposition (including unsubstantiated reports)  
      - 7.4.e Other (please specify)  

7.5 Other standardized assessment(s) required (please describe what is required and at what points in the case)  

8. **Requirements for specialized assessments** (by multi-disciplinary teams, clinicians, child advocacy centers, etc.).  
   Please describe including for which cases and by whom.  

9. **Contact requirements.** (please describe requirements for contact with child, family, collaterals)  
   

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10. **What is the timeframe required to complete the investigation and reach disposition?**
   Section/Page/Date __________________________ (skip if manual previously reviewed)

11. **Results of Investigation**

   - 11.1 Referral to services unit (substantiated cases only)
   - 11.2 Referral to services unit (substantiated or unsubstantiated cases)
   - 11.3 Case closure (no further action)
   - 11.4 Services provided as voluntary case
   - 11.5 Referral to other CPS response track
   - 11.6 Other (please specify)

12. **Who makes the disposition decision?**

   - 12.1 Worker only
   - 12.2 Which cases?
   - 12.3 Supervisor only
   - 12.4 Which cases?
   - 12.5 Worker decides/supervisor approves
   - 12.6 Which cases?
   - 12.7 Joint worker/supervisor
   - 12.8 Which cases?
   - 12.9 Not specified
   - 12.10 Other (including special circumstances that cause basic policy to be modified)

13. **After disposition, which of the following must be notified of investigation findings?**

   (check all that apply)
   - 13.1 Law enforcement
   - 13.2 The family
   - 13.3 The perpetrator
   - 13.4 The reporter
   - 13.5 Central Registry (The perpetrator’s name must be placed on the Central Registry)
   - 13.6 Other (please specify)

14. **Does the state have a Central Registry?**

   - Yes
   - No

15. **What are the criteria for placement on the Central Registry?**
16. **What is Central Registry information used for?**

- 16.a background checks for school or child care employees
- 16.b internal administrative purposes
- 16.c criminal background checks by law enforcement
- 16.d other (please specify)

17. **What are the criteria for expungement?**

18.a **Does a person placed whose name is on the Central Registry have the right to appeal?**

- Yes
- No

18.b **To whom is the appeal made?**

18.c **What other provisions are made for due process?**

19. **During investigation are investigative workers required to provide short-term services if needed?**

- Yes
- No

20. **Is the investigative worker required to do any service planning for on-going services?**

- Yes
- No

21. **What is the purpose (if stated) for providing the services?**
D. Other CPS Response

1. Does this state have a dual track/multiple response system explicitly defined in policy?  
   Yes  No

   If Yes:
   2. Implementation
      2.1 Statewide
      2.2 Local option
      2.3 Other (please specify)

   3. Please define the tracks (specific terminology and definitions used)

   4. Purpose of other CPS response (include desired outcome and impetus for reform i.e. Legislation)

   5. Cases/allegations that can be referred to other CPS response

   6. Role of other agencies (include which services provided, for which cases and why)

   7. Requirements for standardized assessments or monitoring instruments
8. **Requirements for specialized assessments** (by multi-disciplinary teams, clinicians, child advocacy centers, etc.).

Please describe, including for which cases and by whom.

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9. **Contact requirements** (please describe requirements for contact with child, family, collaterals)

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10. **Results of Investigation**

   - 10.1 Completed response, referred for voluntary services
   - 10.2 Completed response, petitioned the court to order mandatory services
   - 10.3 Completed with no further action
   - 10.4 Did not complete other CPS response, returned to investigation unit
   - 10.5 Closed without being completed
   - 10.6 Other (please specify)

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11. **Decision Making**

   Who decides result of other CPS response?

   - 11.1 Worker only
   - 11.2 Which cases?
   - 11.3 Supervisor only
   - 11.4 Which cases?
   - 11.5 Worker decides/supervisor approves
   - 11.6 Which cases?
   - 11.7 Joint worker/supervisor
   - 11.8 Which cases?
   - 11.9 Not specified
   - 11.10 Other

   (including special circumstances that cause basic policy to be modified)

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**Comments** (e.g. clarity of manual, etc.):

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