

#### GEORGIA DIVISION OF FAMILY AND CHILDREN SERVICES CHILD WELFARE POLICY MANUAL **Chapter:** (3) Intake **Effective** July 2018 **Policy** Date: Receiving Intake Reports Title: Policy **Previous** 3.1 4.1 Number: Policy #:

# **CODES/REFERENCES**

- O.C.G.A. §15-11-2 Definition
- O.C.G.A. §15-11-30 Rights and Duties of Legal Custodian
- O.C.G.A. §15-11-390 Filing Complaint
- O.C.G.A. §16-12-100 Sexual Exploitation of Children; Reporting Violation; Forfeiture; Penalties
- O.C.G.A. §19-7-5 Reporting of Child Abuse
- O.C.G.A. §19-7-6 Reporting Juvenile Drug Use
- O.C.G.A. §49-5-41 Persons and Agencies Permitted to Access Records

Child Abuse and Prevention Treatment Act (CAPTA) Reauthorization Act of 2010 (P.L. 111-320)

Comprehensive Addiction and Recovery Act of 2016 (P.L. 114-198)

### **REQUIREMENTS**

The Division of Family and Children Services (DFCS) shall:

- Receive reports 24 hours a day, seven days a week, of known or suspected instances
  of child abuse and neglect, including reports of physical or mental injury, sexual abuse
  or exploitation or negligent treatment or maltreatment of a child under circumstances
  that indicate that the child's health or welfare is threatened.
  - **NOTE:** In Georgia, this includes child abuse (maltreatment) in the forms of physical injury or death, neglect or exploitation, endangering a child, sexual abuse and sexual exploitation.
- 2. Be available and accessible to the community continuously 24 hours a day, seven days a week via CPS Intake Communications Center (CICC) at 1-855-GACHILD (1-855-422-4453).
- 3. Receive intake reports via telephone, fax, other electronic submission (i.e. email, online form, etc.), mail, and in-person interviews.
  - **NOTE:** Mail, faxes and other electronic submission that meet the three (3) components of a report are considered as having received an intake report. The date and time the intake report is received via telephone, affixed on the fax/fax cover, the mail was received in the agency, or on the email shall be used as the intake report date. If a mail, fax or other electronic submission does not meet the three components of an intake report, immediately contact the reporter to gather more information.
- 4. Refrain from contacting anyone other than the reporter to obtain information during the Intake Assessment. Contacting anyone other than the reporter is viewed as initiating the Investigation or Family Support Services intervention. Every effort must be made to immediately contact the reporter and obtain sufficient information to determine whether there are present danger situations or impending danger safety threats to a child.

**EXCEPTION:** Additional individuals may be contacted other than the reporter to gather

- information to determine the location of the alleged maltreated child or the family.
- 5. Engage the reporter to gather information in conjunction with the areas of family functioning on all intake reports. The CPS Intake Communication Center (CICC) Social Services Case Manager (SSCM) shall gather all available information during the intake report to complete the Intake Assessment.
- 6. Follow a three-stage information collection process; Introduction, Exploration, and Closing<sup>1</sup> when gathering information from the reporter for completion of the Intake Assessment.
- 7. Ensure an allegation maltreatment contain the following three required components:
  - a. An alleged maltreater who is a person reported to have caused or knowingly allowed maltreatment of a child. Maltreater relationships are classified as any of the following:
    - A caregiver: Any person providing a residence for a child or any person legally obligated to provide care or secure adequate care for a child, including his /her parent, guardian, or legal custodian;
    - ii. Other adult that continually or at regular intervals lived in the home;
    - iii. Person(s) responsible for the care of the child;
    - iv. An employee of a public or private residential home, child care institution, day or childcare facility; or
    - v. School personnel.
  - b. A child from birth to under the age of 18 and who is not an emancipated minor.
  - c. Known or suspected allegations of child abuse per Georgia statute (O.C.G.A. §19-7-5) and DFCS policy. For definitions of the categories of child abuse see Forms and Tools: Maltreatment Codes.
- 8. Inform all reporters of the following:
  - a. The ability to make an anonymous report. Even if the reporter is unwilling to divulge his/her name, the CICC SSCM will continue with the intake report;
  - b. The reporter information will be kept confidential. However, the case record may be subpoenaed as a result of court proceedings and the reporter cannot be assured confidentiality will be fully protected;
    - **NOTE:** If asked or compelled in court to name a reporter, the SAAG/DFCS staff will request that the reporter's identity be disclosed in the judge's chambers.
  - c. If court action is initiated to protect a child, it may be necessary for the reporter to appear in court;
  - d. The reporter will be immune from liability when the report is made in good faith; and
  - e. Intake reports that contain an allegation of abuse or neglect will be sent to local law enforcement regardless of the intake disposition.

**NOTE:** Intake reports from reporters that appear to be questionable shall **not** be deemed invalid or screened out solely on the perception of the reporter's truthfulness.

- 9. Inform all mandated reporters:
  - a. Of the ability to obtain the status of an intake report assigned as an investigation, including whether the investigation is completed or ongoing;
  - b. Of the option to request notification of the disposition (substantiated or unsubstantiated) of an intake report assigned as an investigation. If the mandated reporter requests notification of the disposition, DFCS will provide a written notification within five calendar days of the conclusion of the investigation;
  - c. If school personnel, that DFCS shall provide written notification within 24 hours of

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<sup>&</sup>lt;sup>1</sup> ACTION for Child Protection Intake Assessment Instructional Guidelines and Practice Protocol

- the receipt of an intake report to the school personnel who made the report; and
- d. That DFCS shall provide written notification within five calendar days of completing the investigation to the school counselor from the school the child was attending at the time of the reported abuse, advising of the disposition (substantiated or unsubstantiated) of an intake report assigned as an investigation. If a school does not have a school counselor, this disclosure shall be made to the principal.
- 10. Enter all intake reports into Georgia SHINES immediately, but no later than the end of the shift in which the intake report was received, regardless of the intake disposition. NOTE: If an intake assessment is determined to contain a present danger situation the intake report shall be entered immediately but not later than two hours of the receipt of the intake report.
- 11. Immediately, but no later than the end of shift in which the intake report was received, provide notification of all intake assessments that contain any allegation of child abuse or neglect to the appropriate law enforcement agency or district attorney (see policy 3.14 Intake: Sharing Intake Reports with Law Enforcement or District Attorney).

# DFCS County Departments shall:

- 1. Be accessible 24 hours a day to respond to allegations of child abuse and neglect by:
  - a. Keeping current the list of available staff in the On-Call tab in Georgia SHINES;
  - b. Clearly listing numbers for reporting after office hours intake reports to the CPS Intake Communications Center at 1-855-GACHILD (1-855-422-4453);
  - c. Providing the emergency 911 center, local law enforcement and providers of emergency medical services with the telephone number of the County Director and administrative staff responsible for the emergency after-hours response; and
  - d. Assuring that a message is recorded for the principle agency telephone line directing the reporter to call 1-855-GACHILD (1-855-422-4453) to make reports during periods of office closure.
- 2. Have a minimum of two listings in the local telephone directories and when possible, include a listing under emergency telephone numbers. Local phone listings should include:
  - a. A specific listing of "Child Abuse and Neglect Reports" under Department of Family and Children Services, listing the CPS Intake Communications Center contact number 1-855-GACHILD (1-855-422-4453); and
  - b. A separate alphabetical listing in the white pages, which reads "Child Abuse and Neglect Reports" and contains the CPS Intake Communications Center contact number 1-855-GACHILD (1-855-422-4453).

For the purposes of child abuse and neglect reports, the term "child" shall mean an individual who has not yet attained 18 years of age and who is not an emancipated minor.

### **PROCEDURES**

### **Intake Assessment Process**

The CICC SSCM will:

- 1. **Introduction:** During this stage, set the tone for the remainder of the call by initiating a dialogue with the reporter in a professional and courteous manner.
  - a. Briefly explain the Intake Assessment process;
  - b. Inform the reporter of the ability to make an anonymous report. Even if the reporter is unwilling to divulge his/her name, the Intake Assessment process will continue;

- c. Explain confidentiality to the reporter:
  - i. Information from the reporter will be kept confidential; however, the case record may be subpoenaed as a result of court proceedings and the reporter cannot be assured confidentiality will be fully protected.
    - **NOTE:** If asked or compelled in court to name a reporter, the SAAG/DFCS staff will request that the reporter's identity be disclosed in the judge's chambers.
  - ii. If court action is initiated to protect a child, it may be necessary for the reporter to appear in court.
  - iii. The reporter is immune from liability when the report is made in good faith.
- d. Inform the reporter that a copy of the intake report will be sent to local law enforcement and that it may be necessary to appear in court if court action is initiated to protect a child;
- e. Allow the reporter to begin sharing his/her concerns by being courteous and professional, allowing the reporter to speak without interruption if possible; and
- f. Respond with empathy to the reporter if he/she has emotional reactions to the information being shared and redirect the reporter when necessary to ensure pertinent information is gathered that is relevant to the family's functioning and potential maltreatment/safety issues.
- 2. Exploration: This phase of the Intake Assessment process is critical in determining what present danger situations or impending danger safety threats may be indicated about a family. During the Exploration phase, assist the reporter by moving toward a more focused interview approach in order to fill in any gaps in information gathered during the Introduction stage.
  - a. Obtain the name, address, current location and date of birth of all alleged victim children;
  - b. Obtain the name, address, current location and date of birth of all caregivers and other household members (parents, grandparents, significant other, 3<sup>rd</sup> party caregivers, etc.). The CICC SSCM should attempt to gather the names and demographics on both mother(s) and father(s) regardless of whether or not the child(ren) reside with the parent(s);
  - c. Ask the reporter if the child and/or parent/primary caregiver have, or is believed to have, any American Indian heritage (see policy 1.6 Administration: Indian Child Welfare Act);
  - d. Gather information on the areas of family functioning outlined in policy 19.13 Case Management: Family Functioning Assessment.
- 3. **Closing:** During this final stage of the Intake Assessment, ensure that all essential information has been collected from the reporter.
  - a. At minimum the information gathered must include:
    - i. The reporter's name, telephone number and address, relationship to child(ren) and family.
    - ii. The demographic information of the family (names, ages, relationship of household members, identification of caregiver(s), address.
    - iii. Names of other persons including relatives who may have knowledge of the family.
    - iv. Location of the child(ren).
  - b. Review the information in each area of family functioning for gaps and ask clarifying questions. Identify and note all gaps in information.
    - i. Is there enough information to determine who is included in the family and

- where they are right now?
- ii. Is there enough information about the children and any vulnerabilities?
- iii. Is there enough information to determine how the caregiver and other family/household members function day-to-day?
- iv. Does the information (negative or positive) indicate the family's current situation, condition, or dynamics?
- v. Does the information indicate the presence of child maltreatment?
- vi. Does the information indicate any threats to child safety?

**NOTE:** Examples of information needing clarification would be statements such as a caregiver "seems depressed", "often drinks alcohol", or "seems aggressive." These are vague descriptions that need a behavioral or observable context in order to qualify this information as a present danger or impending danger situation during the decision-making process.

- Allow the reporter another opportunity to consider any remaining information that he
  or she feels is important to share that may not have been revealed during the
  exploratory stage of the interview;
- d. Seek the reporter's opinion regarding what he/she believes needs to happen in terms of intervention:
- e. Obtain any information regarding worker safety;
- f. Inform the reporter of the next steps in the intake process;
- g. If the reporter is a mandated reporter:
  - Ask if he/she would like notification (verbally or in writing) of the findings if the report is assigned as an investigation and document the mandated reporter response in the Additional Comments Section in Georgia SHINES.
  - ii. If the mandated reporter is school personnel:
    - Obtain the name of the child's school, school counselor or principal and document this information in the Additional Comments section in Georgia SHINES.
    - Inform that DFCS will provide a written notice acknowledging receipt of the report of suspected abuse or neglect via the Mandated Reporter Letter (see policy 3.15 Intake: Mandated Reporters).
    - 3. Inform of the ability to obtain the status of an intake report assigned as an investigation, including whether the investigation is completed or ongoing.
    - 4. Explain if the intake report was assigned as an investigation, DFCS will provide written notification within five calendar days of concluding the investigation to the school counselor of the school the child was attending at the time of the reported abuse, advising of the investigation disposition (substantiated or unsubstantiated). If a school does not have a school counselor, this disclosure will be made to the principal.
- h. Thank the reporter for contacting DFCS and end the call.
- 4. Analyze the information gathered during the contact with the reporter:
  - a. Begin to consider and establish CPS jurisdiction for the referral, acceptance for CPS intervention, and assignment based on allegations of maltreatment and the indication of a present or impending danger;
  - b. Determine if the intake report contains the three (3) required components for an allegation of abuse and/or neglect;
  - c. Thoroughly and clearly document the reported information in the narrative section of

- the Intake Assessment and apply this information to each of the areas of family functioning in Georgia SHINES using the reporter's words;
- d. Conduct all required case participant screenings, as outlined in policy 19.9 Case Management: Safety Screenings;
- e. Complete a thorough review and analysis of DFCS history and document in Georgia SHINES;
- f. Review the information reported in each area of Family Functioning to evaluate indicators of child maltreatment. Review the definitions of child abuse and select the category of child abuse and the corresponding maltreatment code(s) in Georgia SHINES based on the circumstances of the reported allegations; and
- g. Review the information reported in each area of Family Functioning to determine if there is any indication of present or impending danger (see policy 19.11 Case Management: Safety Assessment). Select the corresponding present or impending danger under each applicable Family Functioning Area. If the Intake Assessment is determined to contain a present danger situation:
  - i. Immediately staff the Intake Assessment with the Social Services Supervisor (SSS) to confirm the existence of a present danger situation.
  - ii. If it is determined that a present danger situation exists, contact the County Department where the child resides by telephone and inform them of the need for an immediate response.

## **Law Enforcement Requests for Immediate Assistance**

If law enforcement contacts the CICC requesting immediate assistance, the CICC will:

- 1. Obtain the reason the officer requires DFCS assistance and his/her contact information.
- 2. Immediately notify the County Department of law enforcement's request.
- 3. Inform the officer that it may be necessary to contact him/her again to follow up on the completion of the Intake Assessment.
- 4. If the officer is unavailable, follow up with the County Department to provide the information needed for the completion and assignment of the Intake Assessment.

# **County Department Receipt of Intake Reports**

- When intake reports are received by telephone, mail, fax or other electronic submission (i.e. email, online form, etc.) the County Department will immediately forward the correspondence to the CPS Intake Communication Center (CICC) at CPSIntake@dhs.ga.gov.
- 2. When a reporter calls the County Department to make a report, forward the reporter call to the CICC line 1-855-GACHILD (1-855-422-4453); however, the County Department may take the Intake Report and relay the information to the CICC.
- 3. When a reporter comes directly to the County Department to make a CPS report:
  - a. Refer the reporting source to the CPS Intake Communication Center (CICC) line 1-855-GACHILD (1-855-422-4453) to take the report while in the County Office; and
  - b. If the reporter prefers to make the Intake Report face-to-face, the County Department will take the report and relay the information to the CICC for entry into Georgia SHINES.

**NOTE:** When the County Department is taking the Intake Report if available, utilize a three-way call with the CICC in order to participate in the information gathering process with the reporter.

## CICC Receipts of Intake Reports by Mail, Fax or Other Electronic Submission

When an intake report is received via mail, fax or other electronic submission (i.e. email, online form, etc.) the CICC SSCM will:

- 1. Analyze the information contained in the correspondence to determine if the correspondence contains the three (3) required components.
- 2. Contact the reporter by telephone to gather additional information.
- 3. If the correspondence does not contain the three (3) required components necessary to constitute an intake report, contact the reporter immediately to gather the necessary components for the intake report.
- 4. Upload a copy of the report received and the email acknowledgement from electronic submission (acknowledgement that the reporter was notified of receipt of the report) to Georgia SHINES External Documentation.

### PRACTICE GUIDANCE

**Caregiver** means any person providing a residence for a child or any person legally obligated to provide or secure adequate care for a child including his/her parent, guardian or legal custodian; other adult that continually or at regular intervals live in the home; a foster parent; an employee of a public or private residential home, childcare institution, day- or childcare facility; school personnel.

- 1. **Primary** caregiver: The person living in the household who assumes the most responsibility for childcare.
- 2. Secondary caregiver: A parent or other person living in, or frequently in, the household who shares with the primary caregiver the routine responsibilities for childcare. A significant other residing in the home may be a secondary caregiver even though this person has limited childcare responsibility and may not have any legal relationship or obligation to do so.

**NOTE:** Any person identified as a caregiver for a child should be entered as a principal in Georgia SHINES and all screenings completed and evaluated for any impact on child safety (see policy 19.9 Case Management: Safety Screenings).

## Person Responsible for the Care of a Child means:

- 1. An adult member of a child's household;
- 2. A person exercising supervision over a child for any part of the 24-hour day; or
- 3. Any adult who based on his or her relationship to the parent, guardian or legal custodian or a member of a child's household has access to such child.

**NOTE:** Anyone designated as a person responsible for the care of a child should be entered as a principal in Georgia SHINES and screened in all systems for any history that could affect child safety (see policy 19.9 Case Management: Safety Screenings).

# Reports Involving Alleged Maltreaters who are not a Caregiver or Person Responsible for the Care of a Child

If the allegations are regarding a maltreater who is not a caregiver or a person responsible for the care of a child, the report should not be automatically screened out without attempts to gather information about a caregiver's knowledge, willingness, and ability to protect the child from the alleged maltreater. When a third party is identified as an alleged maltreater, attempts must be made to gather and analyze information regarding the caregiver's knowledge of the alleged abuse or neglect and the caregiver's level of protection of the child during the alleged

abuse or neglect or afterwards. If it becomes apparent during the Intake Assessment that the child's caregiver was not negligent, nor involved in any form of abuse and the third party maltreater is not a caregiver of the child, then DFCS will screen out these Intake Assessments and refer the case to law enforcement. An exception to this rule is in reports alleging sexual exploitation or sex trafficking. Persons not considered third parties are:

- 1. Foster parents;
- 2. Non-custodial parent living outside of the home;
- 3. School or childcare personnel acting in a caregiver role.

## **Case Name Descriptors**

- 1. Place in the name of the primary caregiver.
- 2. Place in the name of the minor parent when the minor parent is the primary caregiver for their child.
- 3. Place in the name of each primary caregiver or legal custodian when allegations of maltreatment are received regarding multiple families living in the same residence.
- 4. Place in the name of the caregiver from whom the child was removed when allegations of maltreatment are received that occurred prior to a child entering foster care.
- 5. Place in the name of each legal caregiver when it is determined the same alleged maltreater has abused or neglected multiple child victims.

### Intake Interview Skills<sup>2</sup>

The Intake Interview is predominately focused on information gathering and problem identification. The CICC SSCM is assisting the reporter to provide information and at the same time identifying and interpreting possible maltreatment, present danger situations, and impending danger safety threats. In order to gather the most information possible, the CICC SSCM must be able to use critical thinking skills to formulate logical questions based on the information the reporter is communicating. There are seven types of interviewing skills that can be used during an interview that will assist the CICC SSCM in gathering relevant information related to child maltreatment and the indication of present danger situations or impending danger safety threats. (See Intake Introduction Script)

- 1. Open-Ended Questions: These questions allow the reporter to expand on a previous question or topic, and do not lend themselves to a "yes" or "no" answer. Example: "What happened?"
- 2. Closed-Ended Questions: These questions are used to ask for specific information and can generally be answered with "yes" or "no."
  - **Example:** "Have you seen the child with bruises before?"
- 3. Reflective Listening: This technique essentially involves making a guess as to what the reporter means or is trying to communicate. The first step in reflective listening is to think reflectively. You do not necessarily know what people mean, so you have to reflect on what they must mean and make a reasonable guess. Reflective listening statements can be as simple as repeating a word or two in order to keep the reporter talking. It can be helpful to reflect how the reporter seems to be feeling as he or she speaks.
  - **Example:** "So what you are saying is you are angry", or "You are frustrated because..."
- 4. **Suppressing and Refocusing:** This technique is used to stop non-productive content or feeling in an interview and to redirect the reporter to more appropriate topics. This technique should be used very selectively and only when the interviewer is certain

<sup>&</sup>lt;sup>2</sup> ACTION for Child Protection Intake Assessment Collection

that the content is not relevant to the report. To use this technique, acknowledge what the reporter has said and then say, for example, "I would like to talk with you now about what you actually saw happen to Susan. Tell me when you observed this." This skill is also helpful when a reporter is off topic, rambling, or repeating the same content. It is applied by redirecting the conversation to the topic that the interviewer wants to gather information on while acknowledging what the reporter has said.

**Example:** "I recall you saying that Mr. Simpson...Now I would like you to tell me about the older child in the home. What was his name...oh David... Tell me about him."

- 5. **Probing:** This skill is essential to collecting sufficient information and is applied by starting with open-ended questions. As the reporter provides information, the CICC SSCM will continue to move toward more detail with more closed ended questions, such as when, how often, when was the last time, etc.
  - **Example:** "Tell me about what happened. Tell me what you know about the family. What about Mom? Tell me about Dad. Does he seem to get angry often? How often have you noticed these angry outbursts? When was the first time? When did you most recently notice him being angry with the little boy?"
- 6. Affirming: Affirming is done in the form of selective statements of appreciation and understanding. This technique helps to demonstrate empathy. Affirming can send the message that the CICC SSCM recognizes that the reporter has a perspective and understands what the reporter's perspective is. Affirming is also used to send a message that the CICC SSCM acknowledges a reporter's right to feel a certain way. Example: "I understand that it must be frustrating for you when you feel like you are not being heard."
- 7. Summarizing: This skill can be used to change topics with a reporter or to wrap up the call during the closing phase. The CICC SSCM will connect and draw conclusions regarding material and information that was discussed and reinforces what was said during the call. This technique will enable the CICC SSCM to prepare the reporter to move along to another topic or to close out the call. The CICC SSCM should offer an overall summary at the end of the call, including any step(s) the reporter agreed to take (i.e., contact collaterals, advise the family of a service, etc.).

**Example:** "So, Ms. X, you have called today to express concern about Jimmy not receiving enough food due to Mom having insufficient income. Jimmy is in generally good health. We agreed that you would take Mom to Little Sisters Food Center to show her how to access food there. You also offered to take her there whenever she may need to go."

## **Intake Reports Across County Lines**

When allegations of abuse or neglect are reported regarding a child in County A and it is determined the child is a resident of County B, County A must notify County B of the intake report and both counties will coordinate case management activities including identifying which County will have the responsibility to make the face-to-face contact with the child to ensure child safety. When an immediate response is deemed necessary, County A will be responsible for making face-to-face contact with the child in order to assess safety. Some examples are:

- 1. Intake report received from law enforcement in County A, requesting an immediate response to a home or the allegations indicate an immediate response is needed. The address given for the children indicate they are residents of County B and are visiting in County A. County A should provide the immediate response.
- 2. Intake report received from law enforcement in County A indicates the children are being

taken into protective custody and need to be placed into foster care in County A. The legal residence of the children is County B. County A should complete the immediate case management activities that are required, including the assessment for child safety. Both counties should coordinate all other activities. County B should make every effort to attend the preliminary protective hearing in County A. A transfer of court jurisdiction should occur to County B.

- When allegations of abuse or neglect are reported regarding a child whose primary caretaker is in jail/prison, the intake report will be assigned to the County Department of the primary caregiver's legal residence prior to their incarceration, regardless of the location of the child(ren).
- 4. When allegations of abuse or neglect are reported regarding a child in a hospital in County A and it is determined that the primary caretaker resides in County B, the intake report shall be assigned to County B where the primary caregiver resides.

**NOTE:** When it is determined that an intake report made to County A should have been made to County B, reassign the Intake Assessment in Georgia SHINES to County B immediately. County A should notify County B by telephone when this circumstance exists. Use of email may be appropriate; however, it is the responsibility of County A to ensure that County B is aware of the Intake Assessment assignment. The reassignment of the Intake Assessment in Georgia SHINES does not change the original response time assigned to ensure child safety.

### **Intake Reports Across State Lines**

When allegations of abuse or neglect are reported regarding a child currently in the state of Georgia, regardless of the child's state of residence or where the maltreatment has occurred, if the Intake Assessment contains the three required components, it is screened in to assess the child's safety. When allegations of abuse or neglect are reported regarding a child currently not in the state of Georgia, but is expected to return, and the maltreatment occurred in Georgia, if the Intake Assessment contains the three required components, it is screened in to assess the child's safety. DFCS can coordinate with the child welfare system of the other state to assess the allegations and further determine safety.

### **Intake Reports Opened in Error**

If a user accidentally opens an intake report in Georgia SHINES by clicking the "red phone" icon, but has not saved and submitted the intake report, then the intake may be marked as "opened in error" by completing the following steps:

- 1. After clicking the "Red Phone" icon in error, select the "Non-Incident Request" type drop down box on the Intake Information page.
- 2. Select "Opened in Error" from the drop-down list.
- Click the "Save and Close" button.

The CICC SSCM will be able to complete the "opened in error" actions as long as the intake has not yet been saved and submitted to the SSS and as long as there are no allegations, disposition, or safety threats entered in the Intake Assessment.

If the SSS receives an Intake Assessment that has been saved and submitted to them in error, then the SSS may also mark the Intake Assessment as "Opened in Error" by editing the information in the disposition drop-down box on the Intake Actions page by completing the following steps:

- 1. Upon receipt of the Intake Assessment for approval on the SSS task list, click on the hyperlink of the task to take you to the Intake Actions page.
- 2. Scroll down to the response time section of the Intake Actions page.
- 3. Click the disposition drop-down box.
- 4. Select "opened in error" from the drop-down list.
- 5. Click the "Save" button and the Intake Actions page re-displays.
- 6. Click the Approval Status button and complete the approval process.

**NOTE:** If allegations of maltreatment or a present danger situation or impending danger safety threat were selected by the CICC SSCM during the Intake Assessment process, this will require the SSS to return to the applicable section of the Intake Assessment to unselect this information and document in the Supervisor Justification section the reason the information was edited prior to approving the intake report for closure.

# Reports of Juvenile Drug Use

Persons that have reasonable cause to believe that a child is habitually using, in an unlawful manner, any controlled substance or marijuana, as defined by Georgia law is encouraged to report such information to the child's caregiver and to DFCS. If the person exercising loco parentis control over the child is a member of any school, social agency or similar facility, the person in charge shall make the report. DFCS shall receive the information as an intake report then subsequently "Screen Out" and "Refer to Juvenile Court" if there are no allegations that accompany the report of juvenile drug use that are indicative of abuse or neglect by the caregiver.

# Rights and Duties of Legal Custodian

A legal custodian is a person who has been given legal custody of a child by order of a court; or may be classified as a public or private agency, or other private organization licensed or otherwise authorized by law to receive and provide care for a child. The legal custodian has the right to physical custody of a child, the right to determine the nature of the care and treatment of such child, including ordinary medical care and the right and duty to provide for the care, protection, training and education and the physical, mental and moral welfare of such child, subject to the conditions and limitations of the order and to the remaining rights and duties of such child's parent or guardian.

### **Categories of Child Abuse**

- 1. Endangering a Child
- 2. Neglect or Exploitation
- 3. Physical Injury/Physical Abuse
- 4. Sexual Abuse
- 5. Sexual Exploitation

For additional guidance and the definitions of the categories of child abuse see Forms and Tools: Maltreatment Codes.

### FORMS AND TOOLS

Areas of Family Functioning Tool Entering Intakes - Georgia SHINES Job Aide Intake Introduction Script Lack of Supervision Reference Guide **Maltreatment Codes** 

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