



Tennessee Department of Children's Services
Protocol for Screening, Priority Response, and Assignment of Child Protective Services Cases

Supplemental to DCS Policy: [14.2, Screening, Priority Response and Assignment of Child Protective Services Cases](#)

A. Screening and Assignments

1. Child Abuse Hotline (CAH) staff will utilize the [Structured Decision Making \(SDM\) Child Abuse/Neglect Intake Assessment Tool](#) for screening and assigning of all child abuse and/or neglect reports.
2. New allegation(s) on a Child Protective Services (CPS) case open for 30 (thirty) days or more, or less than 30 (thirty) days when the open CPS case has an approved classification, is screened in as a new CPS case and assigned.
3. When a new report with additional non-severe allegations is received, it is assigned to the current caseworker, provided the current case is less than 30 (thirty) days old and allegations are unclassified.
4. If a new allegation received is a death or preliminary near-death, but not related to the incident that initiated the already open CPS case, a new case is opened, regardless of the timeframe of the already open case.
5. If the Alleged Child Victim (ACV) is hospitalized, a notation will be inserted into the referral that indicates the CPS worker or supervisor will contact the hospital within 24 (twenty-four) hours of the intake, as per the [Protocol for Working with Hospitals](#). The (CAH) will call the county on weekends and holidays to ensure timely notification is provided regarding Drug Exposed Child referrals with a Priority-1 (P1) response.
6. Duplicate reports containing the same information, regardless of the reporter, are screened out and processed. Notification is sent to the assigned CPS worker via email and documented on the intake narrative box in the Electronic Record System.
7. New allegation(s) in a CPS case open for less than 30 (thirty) days, and without an approved classification, is screened out and processed, when the open CPS case is the same track

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assignment as the new allegations. The assigned CPS worker documents the information from the screened-out report and adds the new allegation(s) to the open CPS case in the Electronic Record System. Face-to-face contact with the ACV is completed based on the suggested priority response of the screened-out report, unless waived by the CPS supervisor due to recent contact or other mitigating factors, which must be documented in the Electronic Record System.

- a) Notification of the new allegation(s) and suggested priority response is sent to the appropriate CPS supervisor and assigned CPS worker via email and documented by the CAH on the intake narrative box in the Electronic Record System.
8. If the abuse and/or neglect occurred in Tennessee and the ACV resides outside of Tennessee or will not return within the timeframe to complete a CPS case or offer services to the child, regardless of the alleged perpetrators' access to the ACV, allegations are screened out. The allegations are referred to local law enforcement and the child welfare agency where the child is located.
 9. If a report is screened out, but involves other investigative or licensure agencies (e.g., law enforcement, Department of Human Services daycare, Department of Mental Health/Department of Intellectual and Development Disabilities licensed facilities, DCS licensure) CAH staff notifies the appropriate agency no later than the next business day. The name of the agency notified is documented on the appropriate screens in the Electronic Record System.
 10. When a report is screened-out, but a new request is made by law enforcement or hospital personnel for immediate assistance, the CAH will then email or telephone the responsible county for a CPS worker to contact the referent.
 - a) If the CPS worker obtains information that would require the referral to be screened-in, they must contact the CAH with the information so the original referral can be re-entered into the Electronic Record System with the new information. The referral is then assigned to the responsible county.

B. Case Assignment Based on Jurisdiction

1. Reports with allegations of non-severe child abuse and/or neglect will be assigned to the county in which the child resides.

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- a) Residence of the Child: The location of the primary caretaker. If the family is homeless, there is a joint custody arrangement between the parents, or the primary residence cannot be determined, the residence may be the last known location of the child, the current location at the time the report was made, or a temporary living arrangement (e.g. hotel, or motel).
2. Reports with allegations of severe child abuse and/or neglect will be assigned as follows:
 - a) To a CPS worker in the county where the alleged abuse occurred.
 - b) To a CPS worker in the county where the child resides, if it is not clear where the alleged abuse occurred.
 3. If the report involves abuse and/or neglect that allegedly occurred in another state, including allegations of severe abuse or neglect, and the ACV is physically present in the State of Tennessee at the time the report is received the case is assigned in the county where the child is visiting/residing in Tennessee.
 4. Requests for courtesy response by an out of state agency are processed by the CAH and assigned to the appropriate jurisdiction. CAH staff obtains the child's name, address, and all information relative to the request for courtesy case work activities. Courtesy case responses are documented in the Electronic Record System.
 5. Allegations of child abuse and/or neglect involving non-custodial children under the supervision or care of an individual or individuals functioning in an official employment or volunteer capacity at the time of the incident are assigned to the Special Investigations Unit (SIU). Examples include but are not limited to:
 - a) Licensed day care facilities.
 - b) Licensed childcare agencies.
 - c) Unlicensed daycare facilities that should be licensed (such as a daycare with more than four (4) children unrelated to the daycare provider).
 - d) Schools.
 - e) Religious Organizations.

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- f) Youth Groups.
- 6. SIU investigates allegations of child abuse and/or neglect of biological, foster, or adoptive children residing in a foster home. Reports to SIU are handled as outlined in DCS policy [14.10, Special Investigations Unit](#).
- 7. SIU investigates allegations of abuse and/or neglect of children where the DCS employee is named as the alleged perpetrator, or the alleged perpetrator resides in a home of the DCS employee. At the discretion of the SIU Director a SIU investigator and Legal Counsel may be used from another region to conduct the investigation.
- 8. Regional CPS is responsible for investigating allegations when the alleged abuse and/or neglect was committed by an alleged perpetrator who was not functioning in their official or volunteer capacity. Examples include:
 - a) When a teacher/daycare employee abuses their biological child.
 - b) The custodial child is on a home visit when the alleged abuse and/or neglect occurred, and the alleged perpetrator is not in an official capacity.
 - c) The custodial child is in a trial home placement when the alleged abuse and/or neglect occurred, and the alleged perpetrator is not in an official capacity.
 - d) The custodial child is on runaway.
 - e) The abuse/neglect occurred prior to the child entering custody.

Exception: The Special Investigations Unit (SIU) investigates all child death and near-death allegations involving custodial children.

C. Assignment for Allegations of Sexual Abuse Involving Children Only

- 1. Assigned allegations of sexual abuse involving two or more children who are 12 (twelve) years old or under and are from different families are separated by family with each child listed as an ACV and the alleged perpetrator listed as unknown in companion referrals.
 - a) Children 12 (twelve) years old or under who are alleged to have used force, threat or coercion during the incident, or attempted to prevent communication of the incident may be identified as an alleged perpetrator.

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- b) A child who is 13 (thirteen) or older and has a developmental or intellectual disability should not be initially identified as an alleged perpetrator until further information is collected regarding their disability.
 - c) The CAH includes any information that suggests a child as an aggressor in the reported allegation.
2. During the course of an investigation, a child may be identified as an alleged perpetrator based on the information collected.

D. Assignment of Companion Referrals

- 1. When a referral that meets criteria for assignment has more than one ACV and those ACVs have different mothers or custodial caretakers (if mother is deceased), a companion referral is to be created to separate the ACVs and their families.
- 2. Companion referrals are screened individually and can have different tracks, priority responses, and jurisdiction.
- 3. SIU referrals will not be split into companion intakes. All ACVs will remain together on the same assigned intake.
 - a) **Exception:** Custodial Child Deaths and Preliminary Near-Deaths.
 - ◆ Each custodial ACV must have their own separate Child Death or Preliminary Near-Death intake, unless ACVs are a sibling group.
- 4. Referrals that do not meet criteria for assignment remain as one intake.

E. Priority Response and Reconsideration Requests

- 1. The responding CPS worker records the response time in the Electronic Record System using local time regardless of the Time Zone, Central Time or Eastern Time, to which the report is assigned.
- 2. Priority-1 (P1) reports allege that children may be in imminent danger.

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3. Priority-2 (P2) reports allege injuries or risk of injuries that are not imminent, life threatening, or do not require immediate medical care.
4. The assigned track and priority response timeframe assignments may be reconsidered for alternate assignments, as per DCS policy [14.3, Child Protective Services Intake Analyst](#).
 - a) If a reconsideration request is denied, CPS and SIU staff are required to make face-to-face contact with the ACV in the timeframe initially assigned to the report.
 - b) After-hours P1 reconsideration requests to the CAH are sent via email to the Hotline Supervisory Email group.

Forms: None

Collateral Documents:

[14.3, Child Protective Services Intake Analyst
Structured Decision Making \(SDM\) Child Abuse/Neglect Intake Assessment Tool
Protocol for Working with Hospitals](#)
[14.10, Special Investigations Unit](#)

Glossary:

Multiple Reports:

New allegations received by the CAH on open CPS cases.

Structured Decision Making (SDM):

The SDM Intake Assessment Tool guides CAH staff on making a determination of whether a report meets DCS policy for a child abuse/neglect investigation, assessment or resource linkage, and the timeframe in which to respond to those reports that are assigned as an investigation or assessment. Decisions are made immediately upon receipt of all available information pertaining to a report, but no later than within 24 (twenty-four) hours of receipt of a report, unless the CAH Director or Team Coordinator decides that more time is needed to gather information.

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