3-001  

**OVERVIEW OF THE INTAKE FUNCTION**

In keeping with the philosophy of providing services in the least intrusive manner possible, the Department has established criteria for determining when it is appropriate to intervene with families. Any level of intervention by the Department is intrusive because even minimal intervention invades the privacy of the family. As a result, it must be determined if a family would truly benefit from the level of intervention and services the Department provides, within requirements mandated by law.

Some community contacts and concerns brought to the Department don't indicate a level of risk of abuse and neglect. These contacts are opportunities to benefit families, the community and the agency even if the case isn't accepted for formal involvement of the Department. These people contacting the Department need information, clarification and direction to appropriate services. Staff who receive such contacts will assess the information to see if it's appropriate for Department services. If not, staff will refer the person to community services or provide consultation and education.

To determine the appropriateness of service, the Department has guidelines for deciding whether to accept a referral brought to the attention of the Department.

All youth must be adjudicated as delinquent before being admitted to any juvenile facility operated by DHHS. Proper referral, assessment, and placement will be provided for all youth committed to DHHS or to be placed in the custody of HHS-OJS.


The Department will only work with youth adjudicated as status offenders placed in its custody.
INTAKE OUTCOMES

These outcomes may not all apply to intake situations for all types of cases.

- Uniform and complete information and documentation;
- Families needing other family services from the Department are directed appropriately within the Department's system;
- The role of the Department is clearly identified;
- Reporting party understands the Department's response to the referral;
- Reports meeting acceptance guidelines for child abuse and neglect will be identified and assigned for Initial Assessment or referral to law enforcement;
- Families who do not meet criteria for services from the Department will be referred to other resources;
- Law enforcement reports of child abuse and neglect will be appropriately documented and entered onto the Child Abuse and Neglect Registry established under Neb.Rev.Stat. Section 28-715;
- Consultation and information provided to reporters of suspected child abuse and neglect;
- Appropriate referral, classification, assessment, and placement;
- Complete evaluations of juvenile offenders placed with HHS-OJS for pre-disposition evaluation in a timely manner; and
- Return the evaluation report for juvenile offenders to the court at the end of the evaluation or at the end of 30 days.

STAFF ROLES

PROTECTIVE SERVICE WORKER

The primary role of the Protective Service Worker during intake is to determine the Department's response to a referral into the Department's system.

Secondary roles of the worker during intake are as educator, consultant and referral source. Providing education, consultation or referral information to the reporter may help to preserve a family relationship and prevent later problems within the family system.

COORDINATOR OF PRE-DISPOSITION EVALUATIONS

Each Service Area will designate a person or persons in the Service Area to receive the evaluation referrals from the court and coordinate the evaluations of juvenile offenders placed with HHS-OJS for a pre-disposition evaluation. The designated person or persons will decide whether the juvenile offender will have a residential or non-residential evaluation based on Department established criteria. See Court and Legal for Juvenile Offenders Guidebook for screening criteria for evaluations. The designated person(s) will coordinate the evaluation. Upon receipt of the evaluation, s/he will review the recommendations and the classification of risk and prepare a letter with the recommendations of HHS-OJS for the court. The letter and evaluation will be returned to the court within 30 days. The court will be advised when the evaluation is completed so the disposition hearing may be set. See 390 NAC 3-006.05 Department Response to Families With a Juvenile Offender for policy about the evaluation. (See Court and Legal for Juvenile Offenders Guidebook for information about the evaluation process.)
JUVENILE SERVICES OFFICER

The primary role of the Juvenile Services Officer at Intake is to receive the assigned case from the supervisor and open a case.

YRTC STAFF

The YRTC staff's role at Intake for children committed to the facility is to open a case, request reports from schools, and previous providers and provide information to the assigned worker.

SUPERVISOR ROLE

The role of the supervisor at Intake is to:

- review intakes for appropriate action;
- facilitate ongoing consultation to assist in decision making and to enhance worker skill;
- review court orders committing a child to the custody of HHS and HHS-OJS; and
- assign cases.

ROLE OF TEAMS

Teams will be used to effectively and efficiently provide a means for consultation, technical expertise, support and problem-solving.

The Department will participate in the investigative and treatment teams formed in each county or area. The Department will participate to create a cooperative, complementary response to reports of child abuse and neglect and to juvenile and status offenders, law enforcement, and other agencies designated to protect children and the community.


OVERVIEW OF DECISION-MAKING

The Department's response to a referral is determined on all reports of alleged maltreatment and status offense and juvenile delinquent cases received by the Department. Reports are received by:

- Telephone report to local Department offices,
- Mail,
- Law enforcement,
- In-person reporters,
- Court order,
- Mandated child abuse and neglect toll-free number*.

* The purpose of the Statewide Hotline (1-800-652-1999) is to receive telephone calls regarding suspected abuse and neglect of children and adults from across the state. This information is forwarded to local offices within twenty-four hours. In emergencies, Hotline personnel will contact local law enforcement immediately by phone. To the extent possible, callers are referred to community resources that may help resolve their concerns.
The decision about the Department's response to a referral is based on statutory requirements and the assessed risk of harm to the child.

To receive services from HHS, youth who are adjudicated as delinquent under Neb. Rev. Stat. 43-247 1, 2, 4 or 43-286 (3), (4) must be committed directly to the Department of Health and Human Services (OJS).

3-004.01 DECISION MAKER

Child Welfare

The Department's response to a referral is determined by the workers at Intake who screen for child maltreatment. The worker may consult with his/her supervisor as the worker deems necessary. Workers at Intake are:

- Skilled professionals who have significant experience in child welfare;
- Knowledgeable about statutes, rules, policy, and practice;
- Charged with making the decision with the information available;

If the worker isn't available, the report may be taken by staff specially trained in child protective service (paraprofessional or clerical staff) or Hotline staff.

The support staff and Hotline staff must have specialized training in:

- Interviewing;
- Information gathering;
- Crisis intervention and documentation; and
- Providing information and referrals.

The information received by support staff will be reviewed by the worker responsible for Intakes. The worker's decision regarding the Department's response is reviewed by the supervisor for assignment, considering the priority designated by the assessment tool. The supervisor will also provide and facilitate ongoing consultation to assist in decision-making and to enhance worker skill. The supervisor will randomly review those intakes not assigned for initial assessment.

Juvenile Services

The Department's response for youth adjudicated as a status offender or as a delinquent is for the supervisor to review the court order and assign the case. If the court order is not consistent with Department policy or practice, the supervisor will take appropriate action. While other action is being pursued, the court order will be followed.
3-004.02 CONFIDENTIALITY FOR INTAKE FOR CPS CASES

The worker will advise each person reporting maltreatment that the situation is being assessed and that his/her concern is appreciated. Staff won't release other information concerning the case to the reporter. Staff will tell the reporting person that the information contained in the referral is confidential and that his/her name will be released only to the appropriate law enforcement agency, the county attorney (if legal intervention is necessary), or when otherwise required by law. In addition, the reporting person will be advised that if the alleged maltreatment requires court intervention, it may be necessary for the reporting person to testify in court as to his/her knowledge of the alleged incident(s).

Upon request, the local office will send a summary of the findings and actions to the physician or the person in charge of an institution, school, facility, or agency making a legally mandated report. If the assessment is incomplete at the time of the request, the worker will inform the reporting person of the actions taken to date and that the case is still under assessment. The reporting person may be informed if the family is receiving services. The worker will release no other information to the reporting person except as it relates directly to the reporting person's professional relationship with the child or family.

Upon completion of an assessment, the Department must provide the subject of the report with written notice of the determination of the case and whether or not s/he will be entered into the Central Register of child protection cases established under Neb.Rev.Stat. Section 28-718. The procedures and requirements and forms for the notification are in the Intake Guidebook.

Names and other identifying data, dates, and the circumstances of any persons requesting or receiving information will be entered in the case record or, in the case of Child Abuse and Neglect Registry information, in the Registry.

Subjects of a referral have the right to request that Central Register information be amended or expunged. All these requests will be directed to the person responsible for maintaining the Central Register.

3-005 DEFINITIONS

3-005.01 MALTREATMENT DEFINITIONS TO BE CONSIDERED DURING INTAKE

Definition of Child Maltreatment:

Maltreatment occurs when a child age birth through age 17 is physically, emotionally, or sexually harmed.

ABUSE:

- Physical: Information indicates the existence of an injury that is unexplained; not consistent with the explanation given or is non-accidental. The information may also only indicate a substantial risk of bodily injury.
- Emotional: Information indicates psychopathological or disturbed behavior in a child which is documented by a psychiatrist, psychologist or licensed mental health practitioner to be the result of continual scapegoating, rejection or exposure to violence by the child’s parent/caretaker.
- Sexual: Information indicates any sexually oriented act, practice, contact, or interaction in which the child is or has been used for the sexual stimulation of a parent, the child, or other person.

NEGLECT:

- Emotional: Information indicates that the child is suffering or has suffered severe negative emotional effects due to a parent’s failure to provide opportunities for normal experience that produce feelings of being loved, wanted, secure and worthy. Lack of such opportunities may impair the child’s ability to form healthy relationships with others.
- Physical: Information indicates the failure of the parent to provide basic needs or a safe and sanitary living environment for the child.

*Parent includes guardian, custodian and caretaker throughout this material.

- Medical Neglect of Handicapped Infant: The withholding of medically indicated treatment (including appropriate nutrition, hydration, and medication) from disabled infants with life-threatening conditions. Exceptions include those situations in which:
  
  (1) The infant is chronically and irreversibly comatose;
  (2) The provision of this treatment would merely prolong dying or not be effective in ameliorating or correcting all the infant's life-threatening conditions; or
  (3) The provision of this treatment and the treatment itself under these conditions would be inhumane.
3-005.02 DEFINITION OF FAMILY WITH DEPENDENT CHILD

A family has a dependent child if no child maltreatment has been identified AND information indicates that the parent is or will be unable to care for the child through no fault of the parent due to:

A. Parent incapacity or absence: parent has an acute or persistent mental or physical condition which prevents her/him from parenting the child adequately, or parent is dying or is dead, is incarcerated, hospitalized or otherwise unavoidably unable to provide care.

B. Child has extraordinary mental health, emotional or physical needs which the parent doesn't have the ability or capacity to meet.

3-005.03 DEFINITION OF FAMILY WITH A STATUS OFFENDER

A family has a child with status offender behaviors if no maltreatment has been identified AND the child's behaviors violate a law that pertains only to juveniles, such as truancy or running away from home. Status offender behaviors are those that are problematic for youth and their families, but that if engaged in by someone over the age of 18 wouldn't violate the law. Status offense is a legal determination and requires a court finding for service delivery by the Department.


3-005.04 DEFINITION OF FAMILY WITH A JUVENILE OFFENDER

A family has a child who is juvenile offender if:

- The child has been adjudicated as a juvenile offender, AND
- Maltreatment has not been identified.

3-005.05 DEFINITION OF A FAMILY WITH A CHILD WITH DUAL ADJUDICATIONS

A family has a child with dual adjudications if the court has adjudicated a child in more than one category under the statute. Dual adjudications may be a combination of any of the following: child abuse/neglect, status offense, dependency, or delinquency.

3-005.06 VOLUNTARY RELINQUISHMENT REQUESTS

Information must indicate one of the following:

A. Child in question is a state ward;

B. The family is receiving services from child welfare services or child protective services; or

C. Child is so severely disabled that an adoptive placement would require a medical subsidy, and the family has been denied services by private agencies.
3-006 INTAKE ACTIVITIES

3-006.01 OVERALL INTAKE ACTIVITIES FOR CHILD WELFARE CASES

The worker will need to gather, compile and document information necessary to determine appropriate Department response. The following tasks apply to any report to the Department:

- Elicit information from reporting party; or in the case of a law enforcement report, review the written report.
- Check the information systems for any prior CPS records and other relevant information (for example, ADC, Food Stamps, Child Support, Juvenile services).
- If more information is needed, contact others having knowledge of the family situation.
- Check appropriate law enforcement records if this is indicated.
- Determine whether problem indicates: suspected CAN, dependent child, assistance with uncontrolled child, request for voluntary relinquishment.

Consultation may be used during any of these tasks.

3-006.02 DEPARTMENT RESPONSE ON REPORTS OF SUSPECTED CHILD ABUSE AND NEGLECT

Allegations which meet the definition of child abuse and neglect will be assigned for assessment. When a reporting party's concerns don't meet the definition of child maltreatment, but other agencies or Department programs exist to deal with the concern, the report will be referred to the appropriate agency or program.

When law enforcement has investigated a report of suspected child abuse or neglect and has made a report of their findings to the Department, the Department will record the finding onto the Child Abuse and Neglect Registry. The Department won't initiate another assessment unless the law enforcement investigation indicates the child is at continued risk of abuse or neglect or the information on the circumstances of the family is incomplete.

All Department assessments on suspected child abuse and neglect will be coordinated with the appropriate law enforcement agency.

3-006.03 DEPARTMENT RESPONSE TO FAMILIES WITH DEPENDENT CHILDREN

To promote family self-sufficiency and continuity for children, consideration will always first be given to helping families use parent, family and community resources. Only when family resources and community resources are inappropriate or unavailable to meet the family need will Child Protective Services intervention be considered.
3-006.04  DEPARTMENT RESPONSE TO STATUS OFFENSE

The Department provides services to status offenders only when a court has determined a child is a status offender and has ordered the Department's involvement. If a referral is made to the Department concerning a child with problematic behavior, where no status offense adjudication exists and there is no indication of child abuse/neglect, the Department's response will always be to refer the family to services in the community to support the parents in dealing with the child's behavior.

3-006.05  DEPARTMENT RESPONSE TO FAMILIES WITH A JUVENILE OFFENDER

The Department provides services to juvenile offenders only when a court has determined that a child has been adjudicated as such and committed to the care and custody of HHS-OJS at disposition.

When a court has placed a juvenile offender with HHS-OJS for evaluation, the designated person in the Service Area will arrange for and coordinate the evaluation of the juvenile. The evaluation may be residential or non-residential. HHS-OJS is responsible for payment of the evaluation. The juvenile will be returned to the court upon the completion of the evaluation or at the end of 30 days, whichever comes first. When HHS-OJS finds that an extension of the 30 day period is necessary to complete the evaluation, HHS-OJS will ask the court to order an extension. This extension will not exceed an additional 30 days.


3-006.06  DEPARTMENT RESPONSE TO FAMILIES WITH A DUAL ADJUDICATED CHILD

The Department will address both adjudications with the appropriate services. The Department will work in partnership with other state agencies and the community to meet the needs identified.

3-006.07  DEPARTMENT RESPONSE ON VOLUNTARY RELINQUISHMENT OF PARENTAL RIGHTS

The Department will provide adoptive support services to families seeking to relinquish parental rights only after the family has contacted and been turned down for adoption services by private social service agencies; or when the child is a ward of the Department and the family is currently receiving protective services and adoption is the plan established for the child.

The Department won't accept a request for relinquishment of a teenager unless the child and family have been receiving services through the Department and there is a plan for adoption.

3-007  INTAKE IN INTERSTATE COMPACT FOR THE PLACEMENT OF CHILDREN (ICPC)

The Interstate Compact Administrator for Nebraska, located in Central Office conducts the intake on all ICPC cases. Therefore, all requests are referred to the ICPC Administrator. When cases are received from the ICPC Administrator for Nebraska, they will be sent to a supervisor for assignment.
3-007.01 INTAKE IN INTERSTATE COMPACT ON JUVENILES (ICJ)

The Interstate Compact on Juveniles, located in Central Office, conducts the intake on all ICJ cases. Therefore, all requests are referred to the ICJ Administrator. When cases are received by the ICJ Administrator for Nebraska, they will be sent to a supervisor for assignment.

The Interstate Compact for Juveniles provides supervision to youth adjudicated as delinquents. The compact administrator, in Central Office, serves the intake function for these cases. All requests for placements of juveniles in or out of Nebraska will go through the compact administrator. When cases are received from the ICJ administrator for Nebraska, they will be sent to the designated person in the Service Management area for assignment.

3-008 RECORD KEEPING

Records will be maintained at Intake for the following reasons:

- To support decision-making,
- To maintain an ongoing assessment of child and family needs from both the community and State perspective,
- To determine and develop trends,
- To identify service needs and make decisions regarding staff allocation that meet those service needs,
- To enhance quality, and
- To comply with the law.

To achieve the above, periodic requests for specific information will be made of staff. These requests will occur intermittently for a limited time.