001. REPORTS OF ABUSE AND NEGLECT. The process of investigation, screening, and assessment of reports of child abuse and neglect related to trafficking victims are set forth in this chapter.

002. INITIAL ASSESSMENT. Reports to the child abuse and neglect hotline that meet the Department’s definition of child abuse and neglect will be accepted for assessment or investigation as authorized by Neb. Rev. Stat. §§ 28-710 to 28-713. Any report where the child is a reported or suspected victim of sex or labor trafficking will be accepted for assessment or investigation.

002.01 ASSESSMENT OF ABUSE AND NEGLECT. When investigating or assessing a report, the Department will utilize a standardized assessment tool to determine whether the child is a victim of child abuse or neglect or is at risk of future maltreatment. A tool will also be used to determine a family’s need for services.

002.02 IDENTIFICATION OF TRAFFICKING VICTIMS. Based on the information gathered during the initial assessment process, the Department may designate the child as a suspected victim of sex or labor trafficking.

002.02(A) SUSPECTED VICTIMS OF SEX OR LABOR TRAFFICKING. Each minor who is designated by the Department as a suspected victim of trafficking will be assigned for in-person investigation as required by Neb. Rev. Stat. § 28-713. As part of the in-person investigation, the Department will use specialized instruments to:

(i) Screen and assess to identify whether the child is a trafficking victim or at high risk of becoming a trafficking victim; and

(ii) Determine the needs of the child and family to prevent or respond to abuse, neglect, and exploitation.

002.02(B) SERVICES. For each report where the child is designated as a suspected trafficking victim or at high risk of becoming a trafficking victim, the Department will refer and connect the child and family to the appropriate services.

003. CRITERIA FOR OPENING AN ONGOING CASE. When determining whether to open an ongoing case, the following criteria will be considered:

(A) The child’s safety;

(B) The child’s risk of future maltreatment; and

(C) The family’s willingness to voluntarily engage in child welfare services.