

	GEORGIA DIVISION OF FAMILY AND CHILDREN SERVICES CHILD WELFARE POLICY MANUAL			
	Chapter:	(5) Investigations	Effective Date:	July 2018
	Policy Title:	Conducting an Investigation		
	Policy Number:	5.1	Previous Policy #:	N/A

CODES/REFERENCES

O.C.G.A. § 19-7-5 Reporting of Child Abuse and Neglect
 O.C.G.A. § 15-11-22 Agreement to Mediate; Procedures
 O.C.G.A. § 15-11-29 Protective Orders
 O.C.G.A. § 15-11-30 Rights and Duties of Legal Custodian
 O.C.G.A. § 15-11-101 Medical and Psychological Evaluation Orders When Investigating Child Abuse and Neglect
 O.C.G.A. § 15-11-102 Dependency Case Time Limitations
 O.C.G.A. § 15-11-112 Court Ordered Visitation
 O.C.G.A. § 15-11-125 Venue
 O.C.G.A. § 15-11-133 Removal of Child from the Home; Protective Custody
 O.C.G.A. § 15-11-150 Authority to File Petition
 O.C.G.A. § 15-11-202 Reasonable Efforts by DFCS to Preserve or Reunify Families
 O.C.G.A. § 15-11-390 Filing of Complaint
 O.C.G.A. § 49-5-8 Powers and Duties of Department of Human Services
 O.C.G.A. § 49-5-41 Persons and Agencies Permitted to Access Records
 O.C.G.A. § 49-5-180 - § 49-5-187 Programs and Protection for Children and Youth
 Adoptions and Safe Families Act (ASFA)
 Indian Child Welfare Act (ICWA)
 45 CFR Parts 1355.38(a) (5), 1356.21(b) (3) (i), 1356.21(d), 1356.21(k), and 1356.67
 Title IV-E of the Social Security Act Sections 471(a) (15) (D) and (a) (9) (c), 472(a) (1), 472(f), and 475 (9)
 Child Abuse Prevention and Treatment Act (CAPTA)
 Preventing Sex Trafficking and Strengthening Families Act (P.L.113-183)
 McKinney-Vento Homeless Assistance Act
 J.J. v. Ledbetter-Release of Information of Confidential Records
 Health Insurance Portability and Accountability Act (HIPAA)

REQUIREMENTS

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

1. Complete an investigation of the reported allegations of child abuse or neglect within 45 calendar days of the receipt of the intake report to:
 - a. Thoroughly assess child safety and family functioning;
 - b. Take appropriate action when present danger situations or impending safety threats are identified;
 - c. Determine whether the child abuse and neglect allegations are substantiated or unsubstantiated.
2. Continue the comprehensive assessment of child safety and family functioning,

building upon information gathered in Intake and Initial Safety Assessment (ISA) by identifying, gathering, and analyzing information related to the areas of family functioning outlined in the Family Functioning Assessment (FFA).

3. Contact the reporter (if known) to clarify information and/or to obtain additional relevant information related to child safety, family functioning and the allegations of maltreatment.
4. Review and analyze DFCS history. Weigh the significance of the history prior to initiating the investigation whenever possible, but always prior to making an investigative determination.

NOTE: If the analysis of DFCS history reveals that a previous ISA, Family Support Services (FSS) or Investigations (INV) was closed due to the family being unable to be located and the previous allegations were not assessed, assess both the previous and current allegations of maltreatment.

5. Conduct a joint investigation with law enforcement for all serious and/or complex reports of abuse or neglect (including, but not limited to sexual abuse, severe physical abuse, serious injury, child death, near fatality, and chronic severe neglect) as outlined by the local Child Abuse Protocol.
6. Engage each household member privately face-to-face in the home (and other locations when necessary) to discuss the maltreatment allegations, and build consensus around the tasks or situations in their everyday life that they are having difficulty managing. This includes the following individuals:
 - a. Every alleged victim child subject to allegations of maltreatment;
 - b. All other children who reside in the home;
 - c. Caregiver(s) and other adult household members;
 - d. Each alleged maltreater; and
 - e. Any child that is seriously injured or attempted self-injury or suicide during the investigation, within 24 hours of notification to assess if the injury or attempted injury is related to maltreatment.

NOTE: Limit re-interviewing children regarding the maltreatment allegations to prevent re-traumatization. If the child was interviewed during the ISA or FSS stage, the determination whether or not to re-interview the child about the allegations should be made in consultation with the SSS. Consideration should be given to whether the interview is necessary to ensure child safety or resolve inconsistencies to make the maltreatment or safety determination.

7. Provide and explain the following forms and material, when applicable:
 - a. Caregiver's Guide to Child Protection Services (CPS);
 - b. Caregiver Request for Case Record Information when the caregiver is a parent, guardian or legal custodian of a child; and
 - c. Health Information Portability and Accountability Act (HIPAA) Notice of Privacy Practices and obtain a signature on the notice.
8. Interview the alleged maltreater regarding the allegations of maltreatment, if not interviewed during the ISA, and/or if additional information is needed to assess child safety and family functioning, or make an investigation determination.

NOTE: Do not reveal the identity of the reporter. If the alleged maltreater is not the parent/caregiver do not provide confidential information to the alleged maltreater about the family (see policy [2.6 Information Management: Confidentiality and Safeguarding Information](#)).

9. Observe all children for any physical signs of injuries or maltreatment as outlined in

policy [5.2 Investigations: Purposeful Contacts in Investigations](#).

10. Observe and assess the physical home environment, including every room in the home to determine if it is safe and appropriate to meet the needs of each child. Take appropriate action to remedy environmental concerns or hazards prior to leaving the home.
11. When an infant under one year of age is in the home, assess and discuss safe sleep practices with the caregiver. Take appropriate action to remedy unsafe sleep situations prior to leaving the home such as helping a caregiver to prepare a safe sleeping area for an infant (see DFCS Infant Safe to Sleep Guidelines and Protocol in Forms and Tools).
12. Engage any child who doesn't reside in the home but has direct access to the alleged maltreater.
13. Use court intervention and/or request support from law enforcement to interview/observe a child, when prevented from doing so by the caregiver and to protect a child when child safety cannot be assured; or when removal of a child is necessary.
14. Engage individuals identified as collateral contacts who can provide relevant information for assessing child safety, family functioning and maltreatment allegations.
NOTE: The school and/or daycare of each child must be engaged as a collateral contact during the investigation.
15. Review and analyze reports, assessments, and physical evidence gathered that supports or refutes the allegations of abuse or neglect. This may include pictures, medical reports and/or mental health evaluations, educational records, police reports and incident reports.
16. Connect the family to formal and/or informal services at any point the need is identified during the investigation.
17. Develop and implement a Plan of Safe Care, if the investigation involves an infant identified by medical personnel as being affected by prenatal exposure to substances or by an FASD, as outlined in policy [19.27 Case Management: Plan of Safe Care for Infants Prenatally Exposed to Substances or a Fetal Alcohol Spectrum Disorder \[FASD\]](#).
18. Submit a referral to Babies Can't Wait (BCW) via Children 1st to assess and meet the developmental needs of any child who meets the criteria outlined in policy [19.28 Case Management: Children's 1st and Babies Can't Wait](#).
19. Assess and address homelessness, potential caregiver resources and education support through McKinney-Vento liaison for the public school system for any youth identified as an Unaccompanied Homeless Youth (see policy [19.17 Case Management: Service Provision](#)).
20. Immediately report to the Georgia Bureau of Investigation (GBI) (no later than 24 hours) any child or youth who the agency identifies as being a known or suspected victim of sex trafficking/sexual servitude; or red flags exist that suggest a child might be a sex trafficking/sexual servitude victim and follow the procedures outlined in the Commercial Sexual Exploitation/Domestic Minor/Sex Trafficking Case Management Protocol in Forms and Tools.
EXCEPTION: If the GBI was notified at the time of intake or the ISA, a second report is not required.
21. Ensure that any child who is a member of a federally recognized Indian Tribe, or eligible for membership and has a biological parent who is an enrolled member, and is subject

- to removal, placement and/or any other legal action involving DFCS, is afforded all rights under the Indian Child Welfare Act (ICWA) to promote the stability and security of Indian Tribes and their families (see policy [1.6 Administration: Indian Child Welfare Act \(ICWA\) and Transfer of Responsibility for Placement and Care to a Tribal Agency](#)).
22. Report immediately any new known or suspected instances of child abuse or neglect to the CPS Intake Communications Center (CICC) as outlined in policy [3.15 Intake: Mandated Reporters](#).
 23. Conduct efforts to locate a family when they cannot be located or have moved to an unknown location (see policy [19.21 Case Management: Unable to Locate](#)).
 24. Make a safety determination in consultation with the Social Services Supervisor (SSS) prior to concluding each purposeful contact with the child, parent, caregiver, adult household member and/or alleged maltreater; and take appropriate action to ensure child safety by:
 - a. Developing and implementing with the caregiver (s) an in-home or out-of-home safety plan; and/or
 - b. Initiating court/legal intervention.
 25. Complete the Present Danger Assessment in Georgia SHINES whenever a present danger situation is identified during the investigation.
 26. Reach consensus with the parent/caregiver regarding the tasks or situations in their everyday life that that they are having difficulty managing based on information gathered; and develop solutions with the family to address those challenging situations.
NOTE: When no consensus or only partial consensus is reached with the parent/caregivers, the SSCM must still take action to address safety concerns while continuing to make efforts to establish partnership.
 27. Make a formal safety and maltreatment determination at the conclusion of the investigation.
 28. Discuss the investigation determination of substantiated or unsubstantiated with the caregiver, parent, guardian, or legal custodian; and any other alleged maltreater.
 - a. When allegations were substantiated the discussion shall also include the inclusion of the substantiated maltreater's name on the Child Protective Services Information System (CPSIS) (see policy [20.1 Child Protective Services Information System: CPSIS Inclusion and Notification to the Alleged Child Abuser](#)).
 - b. The discussion with the alleged or substantiated maltreater who is not a caregiver, parent, guardian, or legal custodian must be limited to the specific allegation(s) of maltreatment that the individual was alleged to have committed. Confidentiality must be maintained.
 - c. When the substantiated maltreater is a minor (ages 13-17) the discussion of the investigation determination should be conducted with the minor and the minor's caregiver, parent, guardian, or legal custodian.
 29. Provide written notification to the parent, guardian, or legal custodian, and the alleged maltreater of the investigative determination within five calendar days of the completion of the investigation as outlined in policy [5.4 Investigations: Notification of CPS Investigation Outcome](#).
 30. Provide written notification to mandated reporters within five calendar days of the completion of the investigation as outlined in policy [5.4 Investigations: Notification of CPS Investigation Outcome](#).
 31. Document investigation activities in Georgia SHINES within 72 hours of occurrence.

PROCEDURES

Upon the assignment of an Investigation, the SSCM will:

1. If the SSCM who conducted the ISA is not completing the Investigation:
 - a. Conduct a transfer staffing (see policy [19.4 Case Management: Case Transfer](#));
NOTE: Best practice requires that the same SSCM conducts the ISA and Investigation to facilitate continuity in information gathering, partnership and consensus building with the family.
 - b. Review the case documentation in Georgia SHINES; and
 - c. Review DFCS history (see policy [19.10 Case Management: Analyzing DFCS History](#)).
2. Complete the Safety Plan tab in Georgia SHINES when safety concerns were identified and a Safety Plan implemented with the family, during the ISA.
3. Complete the Allegation Detail page in Georgia SHINES to add any allegations, victim children or alleged maltreaters identified during the ISA that relates to the current report.
4. Contact the reporter, if known, to clarify information and/or obtain additional information related to child safety and the allegations of maltreatment, if the reporter was not contacted during the ISA process, or additional information is needed to assess child safety and family functioning.
5. Engage the following individuals in private face-to-face purposeful contact(s) concerning the maltreatment allegations to continue the assessment of child safety and family functioning as outlined in policy [5.2 Investigations: Purposeful Contacts During Investigations](#).
 - a. Every alleged victim child subject to allegations of maltreatment;
 - b. All other children who reside in the home and/or who are subject to the care of the alleged maltreater;
 - c. Caregiver(s) and other adult household members; and
 - d. Each alleged maltreater.
6. Continue consensus building with the family during purposeful contact(s) by engaging the family around the following areas of family functioning:
 - a. Extent of the Maltreatment (What is the Presenting Problem? What Happened);
 - b. Maltreatment Context and Circumstances; Sequence of Events (How and Why Did This Happen);
 - c. Family Developmental Stages and Tasks (How is the family's overall functioning in the care of their children);
 - d. Family's Pattern of Disciplining their Children (How do they discipline the children);
 - e. Individual Caretaker Patterns of Behavior (Are there self-management issues that affect the family care tasks);
 - f. Child/Youth Development (How are the children doing in their development); and
 - g. Family Support (Who else in the family or network can help)?
7. Construct a genogram with the family to identify the family's support system using the information gathered during the purposeful contact(s).
8. Observe and assess the physical home environment to determine if it is safe and appropriate to meet the needs of each child:
 - a. Examine every room in the home for present or potential environmental concerns or hazards. Take appropriate action to remedy environmental concerns or hazards (i.e. loose wires or cords, alcohol or beer bottles, any drug paraphernalia, broken glass or windows, medications or toxic cleaning items that are in reach of small

- children) prior to leaving the home;
 - b. Review the sleeping arrangements for all household members; and
 - c. When an infant under one year of age is in the home assess and discuss safe sleep practices with the caregiver. Take appropriate action to remedy unsafe sleep situations prior to leaving the home such as helping a caregiver to prepare a safe sleeping area for an infant (see DFCS Infant Safe to Sleep Guidelines and Protocol in Forms and Tools).
9. Complete an Authorization for Release of Information with the caregiver or other household members, obtaining the individual's signature in order to obtain protected or other personal health information (PHI), when applicable. The signed release form must be uploaded to Georgia SHINES External Documentation.
NOTE: The family should not be asked to sign a blank ROI. Only obtain signatures on ROIs that are filled out completely and denoting specific information from the provider.
 10. Provide the caregiver(s) Suggestions for Parents/Tip Sheet related to the task(s) or situation the family is having difficulty managing, where applicable.
 11. Engage and assess noncustodial parents to further assess child safety and gather family functioning information (see policy [5.2 Investigations: Purposeful Contacts During Investigations](#)).
 12. Make a safety determination and take appropriate action to ensure child safety, prior to concluding each purposeful contact with each victim and non-victim child, parent/caregiver, all adult household members and alleged maltreaters child (see policy [5.2 Investigations: Purposeful Contacts During Investigations](#)).
 13. Contact and interview persons identified as collateral contacts that are knowledgeable about the allegations of abuse or neglect, child safety, and family functioning as outlined in policy [19.16 Case Management: Collateral Contacts](#). The school and/or daycare of each child must be engaged as a collateral contact during the Investigation.
 14. Obtain, review and analyze reports, assessments, and physical evidence gathered that supports or refutes the allegations of maltreatment. This may include pictures, medical evaluation/reports and/or mental health evaluations, educational records, police reports and incident reports.
 15. Request state criminal history record information of adult household members, when warranted (see policy [19.8 Case Management: Criminal Records Check](#)).
 16. Complete the Family Functioning Assessment (FFA) in Georgia SHINES (see policy [19.13 Case Management: Family Functioning Assessment](#)).
 17. Based on the information gathered, determine if maltreatment occurred and make a preliminary safety and maltreatment determination (see policy [19.11 Case Management: Safety Assessment](#)).
 18. Participate in a dispositional staffing with the SSS as outlined in policy [5.3 Investigation: Making an Investigative Determination](#):
 - a. Make a formal safety and maltreatment determination;
 - b. Discuss the need for further DFCS intervention;
 - c. Discuss and identify services that may influence or manage the family's challenging situations.
 19. When the investigation determination is approved by the SSS, engage the family to discuss the following:
 - a. The child safety determination and the safety plan needed to address safety concerns;
 - b. The investigation disposition (safety and maltreatment determination);

- c. The reason for closure, when applicable;
 - d. The need for continued DFCS involvement through case transfer to Family Preservation Services or Permanency (Foster Care), when applicable;
 - e. Formal services that are recommended for the family and any referrals for formal service providers already completed, when applicable;
 - f. Community resources the family can access after case closure, when applicable;
 - g. The transition plan for services and supports continuing or ending.
- NOTE:** Cases identified for continued DFCS involvement through Family Preservation Services should begin transition as soon as the need is identified by initiating a joint staffing with the Investigation SSCM and Foster Care or Family Preservation Services staff.
20. If the child is determined to be unsafe, engage the family in taking immediate actions to control the safety threats by:
 - a. Developing and implementing with the caregiver (s) an in-home or out-of-home safety plan (see policy [19.12 Case Management: Safety Planning & Management](#));
 - i. Complete the Safety Plan tab in Georgia SHINES and submit to the SSS for approval.
 - ii. If a present danger situation, also complete the Present Danger Assessment in Georgia SHINES and submit to the SSS for approval.
 - b. Initiating court/legal intervention when appropriate (see policy [5.8 Investigations: Juvenile Court Intervention During an Investigation](#));
 - c. Informing the family that the Investigation will be stage progressed to Family Preservation Services or Permanency (as applicable).
 21. If the child abuse or neglect allegation(s) are substantiated, inform the alleged maltreater(s) of the following:
 - a. His/her name will be included in the Child Protective Services Information System (CPSIS) also known as the child abuse registry, due to the substantiated maltreatment determination;
 - b. The substantiated determination will be transmitted to the CPSIS upon the conclusion of the investigation;
 - c. He/she will receive the Notice of Inclusion into the CPSIS via certified mail (return receipt requested), upon his/her name being entered into CPSIS. The notice will also include the process for appealing the substantiated determination with the Office of State Administrative Hearings (OSAH); and
 - d. If he/she decides to appeal the substantiated determination, such request for appeal to OSAH must be made within 10 calendar days of the receipt of the Notice of Inclusion into the CPSIS.
 22. Document Investigation activities in the Contact Narrative under the Contact Summaries in Georgia SHINES within 72 hours of occurrence, including uploading all related case information such as reports, signed forms, assessment documents, pictures, or letters to External Documentation.
 23. Submit the Investigation in Georgia SHINES for closure/stage progression and supervisory approval.

The SSS will:

1. Provide consistent guidance to the SSCM throughout the investigation regarding the gathering, analyzing and documenting of information needed to make a safety and investigation determination, recommendation for service provision and/or transitioning

the case for continued DFCS intervention or case closure.

2. Conduct staffings with the SSCM at a minimum:
 - a. Prior to the first investigation contact with the alleged victim child and/or caregiver to discuss the ISA or FSS case determination, developmental stage of the family and difficult task(s) or situations that have been identified by the family;
 - b. Immediately upon notification of the existence of a present danger situation to provide guidance around effective safety interventions and safety planning; and
 - c. Prior to completion of the investigation to determine the maltreatment and safety determination (see policy [5.3 Investigations: Making an Investigation Determination](#)).
3. Review the sufficiency of the safety plan for controlling or mitigating the present danger situation or impending danger safety threats, when applicable.
4. Determine the sufficiency of individual and family services recommended for case planning, or initiated to address the needs of the child and family (as applicable).
5. Review documentation and professional assessments to provide guidance regarding the investigation and the need for Family Preservation Services or Foster Care.
6. Review the PDA findings and supporting documentation to determine the existence of a present danger situation; and complete the Supervisory section of the PDA approving or rejecting the findings within 72 hours of submission by SSCM.
7. Review the FFA findings and supporting documentation including whether an impending danger safety threat exists, and complete the Supervisory section of the FFA approving or rejecting the findings.
8. Review the Allegation Detail page and the Investigation Conclusion and approve or reject case management activities in Georgia SHINES within five business days of the investigation being submitted by the SSCM.
9. Close or stage progress the Investigation within 45 calendar days of receipt of the intake report in Georgia SHINES. Stage progression should be completed as outlined by policy [19.4 Case Management: Case Transfer](#), when applicable.

PRACTICE GUIDANCE

Joint Investigations with Law Enforcement

Law enforcement is the criminal investigative agency in the community and is often investigating the same allegation as DFCS. When this is the case, CPS and law enforcement must work as a team to coordinate investigative activities. The team approach is desirable as it allows both law enforcement and DFCS to avoid potential conflict and to improve investigative outcomes. Joint investigations with law enforcement may be requested for all serious and/or complex reports of abuse or neglect (including, but not limited to, sexual abuse, severe physical abuse, serious injury, child death, near fatality, and/or chronic, severe neglect) and should be conducted as outlined by the local Child Abuse Protocol. A joint investigation may include:

1. Developing a plan to complete the investigation;
2. Responding with law enforcement;
3. Frequent and open communication to discuss the status of the case; and
4. Obtaining and sharing information in a timely manner, particularly following critical communication points:
 - a. Completion of interviews;
 - b. Filing a dependency petition;

- c. Prior to the return of the child victim to the home at any time during the life of a case;
- d. Prior to the return of an alleged maltreater to the home at any time during the life of a case;
- e. Reassessment of safety to include a possible change in the safety plan or change in placement; and
- f. Disclosure of information about the criminal conduct.

In addition to joint investigations, DFCS also engages law enforcement when case managers must visit a potentially dangerous location and situation. Case managers should consider a request for law enforcement officers to accompany them based on the location of the visit being made, the time of day/night, or the history of the subjects involved. The presence of law enforcement during a case manager's visit with a family has a stabilizing effect and thus helps to ensure the safety of all parties involved. When it is necessary to remove children from their home, law enforcement officers are often called upon for assistance. Law enforcement has general authority to take custody of children if the legal requirements are met.

Resolving Discrepancies or Conflicting Information

Often, during the course of an Investigation, there are discrepancies in information collected or there are conflicting accounts regarding the allegations of abuse and neglect. It is important to resolve discrepancies or conflicts to ensure that the information gathered accurately supports the investigation determination. Some ways to address these situations include but are not limited to:

1. Reviewing the information gathered again to determine what information is needed to resolve the issue(s).
2. Seeking supervisory assistance to review the information or develop a plan to resolve the issue(s).
3. Conducting additional interviews with the family members, reporter, collaterals, etc.
4. Engaging subject matter experts to assist in the review of evidence or to discuss the information via a staffing or consultation.
5. Requesting additional professional assessments or evaluations for the child(ren) or caregiver(s).

Requesting Criminal History Record Information

There are times when a criminal history check must be conducted for each adult in the household, such as during the course of an emergency removal of a child placed the legal custody of DFCS but remaining in a placement household such as a relative, pending full approval. In these situations a GCIC/NCIC criminal history records check must be conducted for each adult person in the placement household. Other instances when a criminal history check is warranted is when there is an indication that an individual who has a caregiving role for a child(ren) may have criminal history that impacts child safety; or when an individual's behavior indicates he or she may be, or have been involved in criminal activity that could impact child safety.

When a criminal history record check is requested, it is critical that DFCS follow guidelines established by the Office of Inspector General (OIG) and Georgia statutes. Pursuant to O.C.G.A. § 49-2-14, DFCS may receive from any law enforcement agency criminal history information, including arrest and conviction data and any and all other information which may be provided pursuant to state or federal law which is relevant to any adult person who resides

in a home where children in the custody of DFCS have been or may be placed or which is the subject of a CPS referral, complaint or investigation.

When Is a New Intake Report Required Versus Adding a New Maltreatment Code

When an intake report is received, an allegation code that corresponds to a maltreatment definition is assigned. This code is tied to the alleged victim, and should correspond to the specific allegations of maltreatment that are captured in the intake assessment. Sometimes, however, during the course of Investigation or Family Support Services (INV or FSS), new information is obtained that may or may not require a new intake report.

When completing an investigation, if the SSCM determines that the original maltreatment code that was assigned at intake is incorrect, then at the conclusion of the investigation, the original code should be unsubstantiated and the correct maltreatment code added on the allegation detail page in Georgia SHINES. A new intake report is not required in this situation, as the new maltreatment code that was added is applicable to the originally alleged victim child, the original person identified as the alleged maltreater, and the original allegations of maltreatment. If additional maltreatment codes need to be added that are related to the original incident that was reported, these codes may be added on the allegation detail page at the conclusion of the INV without making a new intake report.

EXAMPLE: At intake allegations of substance abuse were received concerning a mother and her baby. The allegation code of N3 was assigned based on the mother's use of the illegal drugs and lack of supervision. During the course of the Investigation, the SSCM determined that the child tested positive at birth for illegal substances and was classified as affected by medical personnel. This was not known at intake. The allegations are related to the original report of substance abuse, and since the child tested positive at birth, now the maltreatment code of N10-Prenatal Exposure applies and should be added along with the N3 code that was originally captured in the intake report.

During an FSS case, maltreatment determinations are not applicable, therefore, no maltreatment code adjustments need to be completed in Georgia SHINES. Documentation should denote the specific issues that the SSCM was working with the family on resolving related to the original maltreatment allegations made in the intake report.

In both FSS and INV when there is a new event or incident of maltreatment, then a new intake report must be made to the CPS Intake Communications Center (CICC) to capture the information. This also applies when a new or different child is determined to be a victim of a maltreatment regarding a different incident than was originally reported in the intake. This new report must occur so that the child is captured as a victim of abuse or neglect and a record of the incident captured. The new case that is created in Georgia SHINES can be merged upon the immediate safety of the new victim child being assured through the ISA process.

The same is true when a new maltreater is identified during the course of a CPS assessment (ISA, FSS or INV) related to a different maltreatment incident. The new CPS Intake will provide the record of the alleged maltreatment event, and the new malteater identified, and can also subsequently be merged into the existing case in Georgia SHINES.

EXAMPLE: A father is identified in an intake assessment as the alleged maltreater. The allegations reported from the school stated that the father is beating his child, leaving marks and bruises. During the course of the investigation, it is also discovered that the mother is using drugs and leaving all the children in the home unsupervised. A new intake report should be completed to capture the new allegations of N3-inadquate supervision and the different alleged maltreater (the mother). The two investigations can subsequently be merged in Georgia SHINES. In this situation simply adding a new maltreatment code cannot suffice due to the new/different “event” or “incident” that occurred. The allegations of inadequate supervision are completely independent of what was originally reported and they contain not only new allegations of maltreatment from a different reporter (the SSCM), there are also new victims (other children in the home) and a different maltreater (the mother), therefore a new intake report is required.

FORMS AND TOOLS

[A Guide to Gathering Information During an Investigations](#)
[Authorization for Release of Information](#)
[Authorization for Release of Information - Spanish](#)
[Caregiver’s Guide to a Child Protective Services \(CPS\) Investigation](#)
[Caregiver’s Guide to a Child Protective Services \(CPS\) Investigation - Spanish](#)
[Caregiver Request for Case Record Information](#)
[Commercial Sexual Exploitation/Domestic Minor Sex Trafficking Protocol](#)
[Commercial Sexual Exploitation of Children \(CSEC\) Referral Form](#)
[Consent for State Criminal Records Check Form](#)
[HIPAA Notice of Privacy Practices](#)
[Infant Safe to Sleep Guidelines and Protocol](#)
[Intimate Partner Violence \(Domestic Violence\) Guidelines & Protocol](#)
[Maltreatment Codes](#)