Court Intervention - Procedures

(Revised 05/10/19)

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Forms

The following forms are referenced in this file, but are not inclusive of all forms necessary in Court Intervention:

•	PUB 13	Your Rights Under California Welfare Programs
•	<u>EA 1</u>	Emergency Assistance Application for Child Welfare Services
•	20-46	Language Needs Determination
•	20-49	HHSA Civil Rights - Interpreters
•	04-2	Investigation Narrative
•	04-24A-P	Authorization to Use or Disclose Protected Health Information – All Providers
•	04-24A-Psp	Authorization to Use or Disclose Protected Health Information – All Providers (Spanish)
•	04-24C	Order Authorization Examination and Treatment - Court
•	04-24p	Consent to Treat - Parent
•	04-24Psp	Consent to Treat – Parent (Spanish)
•	04-29	Authorization to Use or Disclose Protected Health Information – Single Provider
•	04-29sp	Authorization to Use or Disclose Protected Health Information – Single Provider (Spanish)
•	04-118	Protective Custody Letter (CWS/CMS Template)
•	04-134	Criminal History, CLETS Request
•	04-258	Placement Needs and Services Plan (CWS/CMS Template)
•	04-277	SDM Safety Plan

Forms (cont.)

04-296 QPI Partnership Agreement Form
 04-296sp QPI Partnership Agreement Form (Spanish)
 10-5 Foster Children's Personal Rights
 10-5sp Foster Children's Personal Rights (Spanish)
 All About Me (Infants)
 All About Me (Infants, in Spanish)
 All About Me (Children ages 1-17)
 All About Me (Children ages 1-17, in Spanish)
 Ombudsman Brochure
 Ombudsman Brochure (Spanish)

Policy

When a referral is assigned to Court Intervention (CI), the SW is responsible for conducting a thorough investigation (see ER - Investigations). This includes in-person interviews with the parents, children, any witnesses to the abuse/neglect, and collaterals. The SW will use information gathered from any other SW and/or law enforcement investigation.

The CI SW has four options:

- 1. Provide any necessary service referrals and close the referral.
- 2. Offer voluntary in-home or out-of-home services. (See ER Voluntary Services)
- 3. File a petition and recommend maintaining the children in the home.
- 4. File a petition and recommend detaining the children out of the home.

These decisions must be made according to the principles of sound safety and risk assessment and in consultation with others, such as the PSS, other SWs who have worked with the family, and the family and their support system. Every effort should be made to maintain the children in a familiar environment, as long as it can be done safely.

The CI SW is responsible for all activities required to present the case to County Counsel (CC) for screening, filing of a petition and for presenting the case to Juvenile Court.

For policies regarding the frequency of required contacts, see Contacts - General in the PM.

Role

CI SWs investigate and provide services where there appears to be sufficient evidence of risk to warrant filing a petition in Juvenile Court. This investigation is a process in which the SW continuously gathers information and evaluates risk. CI SWs engage families to develop behaviorally-specific case plans and visitation plans to address identified protective issues with a goal of returning children to a parent's case as soon as safely possible.

Filing a petition in ER and Voluntary Services

If a child active to ER or VS is brought into custody, the assigned SW may investigate and file a petition as necessary or immediately transfer the case to CI (with the exception of the Indian Specialty Unit, where the case remains with the same SW).

The ER PSS or VS PSS will consult with the CI PSS regarding which program's SW will screen and file the petition, based on the circumstances of the case/referral and workload issues. If transferring a referral from ER or VS to CI, a warm hand-off must occur.

See Petitions - General Information, Case Transfers, and Investigation Responsibilities by Program for additional information.

Non-custody CI referrals

The CI SW will investigate and provide services to children not in protective custody when:

- An ER PSS believes there may be enough evidence to warrant filing a petition in consultation with CI PSS (e.g. child with serious injuries, a positive toxicology screen with complicating factors, prior dependencies, etc.)
- A non-dependent child has a life threatening condition that does not require
 emergency treatment but will require treatment in the near future to save the child's
 life and the parent is refusing to consent. A CI SW will file a petition to obtain a court
 order for the treatment. The petition must be dismissed after treatment has been
 completed if the child is no longer at risk.
- Another County (Inter-County Transfers) has filed a petition and case is either pending
 Disposition or child is already a dependent. The Court in the other County has
 determined that the case meets the criteria for transfer to San Diego County and has
 set a Transfer-In hearing in San Diego Juvenile Court. See_Inter-County Transfers (ICTs).
 These cases are assigned to CI due to the short time frames for verification of the
 clients' address(es) and Court Hearings.

See Investigation Responsibilities by Program for additional information.

Procedures when referral is assigned

When a referral is assigned to CI after a child has already been taken into protective custody, <u>WIC 309</u> mandates that the SW immediately investigate the circumstances and facts surrounding the child's being taken into custody, and the SW shall immediately release the child to the custody of the parent UNLESS continued detention of the child is a matter of immediate and urgent necessity for the protection of the child and there are no reasonable means by which the child can be protected in his or her home.

Refer to ER - Investigations for policy and procedures regarding all investigations.

When a referral is assigned to CI, the CI SW shall follow these additional steps:

Step	Action
1	If child is already in protective custody, check custody time and calculate the 48 judicial hour deadline ("kick out time").
2	If/when a newborn placed on a Hospital Hold (see Hotline - CWS Hospital Holds) is being released imminently or if/when children are temporarily detained at PCC, notify regional Placement Unit of need for a resource family home placement. If there are potential relatives/NREFMs available for evaluation, notify the Placement Unit of need for Resource Family Approval (RFA).
3	Review CWS history on the child/family, which includes step-parents, significant others, or any other adults who reside in the home on an ongoing basis and provide care for the children. If a family has recently moved here from out-of-county or out-of-state, contact the other jurisdiction for CWS history.
	NOTE: Although some information can be gathered by doing a CWS/CMS search for other counties in California, the SW will call that county for full details of CWS history.
4	Immediately contact the RP to gather more information about the allegation(s) and to assess the motivation of the RP.
5	Contact all alleged child victim(s) in person per policy (see the Child Victim Witness Protocol and ER - Time Limits).
	Perform an Inquiry about Indian Status (ICWA) of each alleged victim.

Step	Action
6	Make face-to-face contacts with parents and siblings (within 5 business days if child is not in custody). If parent's whereabouts are unknown, initiate search efforts (see Parent Searches).
	Inquire about Indian Status (ICWA) of each parent.
	If the child was brought into custody after-hours by non-CWS staff and it was determined by the Hotline Standby PSS that immediate assignment of siblings not in custody was not necessary and siblings have not been seen, make a face-to-face contact the next working day .
	Inform the client (parent/guardian) of their civil rights (see Civil Rights Requirements) by providing and/or completing the following forms: • "Your Rights" Pamphlet (PUB 13, available in several languages) • HHSA Civil Rights – Interpreters (20-49), if needed • The Ombudsman brochure.
	NOTE: If the above forms have already been provided and documented by a previous SW investigating the current allegations (e.g Standby SW), then the CI SW is not required to provide them again.
	Have parents sign the Language Needs Determination form (20-46) and retain in case file.
	Provide parents with referrals to community resources.
7	Contact collaterals to gather additional information and/or verify information provided by others.
8	Initiate a criminal history background check (see Criminal History Information), including calling Department of Justice (DOJ). Submit CLETS Request (04-134). Criminal history is to be obtained on the parents/guardians that the child is being removed from.

Step	Action
9	If the alleged perpetrator is a Community Care Licensing (CCL) approved provider (e.g., daycare facility) or an employee of an approved CCL facility, make a cross report to CCL.
	EXCEPTION : If the referral is on an approved CCL provider employee's own children, DO NOT cross-report general neglect or at risk, sibling abused allegations, or any other DOJ non-reportable issues [see Processing DOJ Form BCIA 8583]. The SW will fax a copy of the child abuse report and the Investigation Narrative (04-2) to CCL when the investigation is completed.
	Community Care Licensing (CCL) contact information: PHONE (619) 767-2200 FAX (619) 767-2203
	NOTE: If, during the course of an investigation, the SW suspects negligence on behalf of a FFA foster parent or LGH/STRTP staff and they had not been named as the alleged perpetrator, the SW will consult with Institutions Evaluation Unit (IEU).
10	 Complete Structured Decision Making (SDM) Safety and Risk Assessments. SDM Safety Assessment must be completed within 2 business days of initial contact with each alleged victim. Upon completion of the safety assessment, if one or more safety threats are identified and safety interventions can mitigate the danger, then the children may remain in (or be returned to) their home as long as a Safety Plan (04-277) has been developed and approved by a PSS. If the safety threats cannot be resolved with parent cooperation in a Safety Plan, promote the referral to a case and incorporate all remaining interventions into the case plan. SDM Risk Assessment must be completed after concluding the allegations and before closing the referral.
11	Complete the Emergency Assistance Application (EA1) if the child is determined to be at risk and is removed from the parents/caregivers, unless the ER worker has already completed it. This should be completed and signed by a parent, if possible, and must include the date the child was taken into protective custody. Submit the original to the Registrar within 48 hours of the child being placed in out-of-home care and keep a copy in the case file. See Emergency Assistance.
12	Develop an appropriate plan based on a thorough investigation and assessment. The plan could include closing the referral without further intervention, opening a case for VS, or filing a petition. See ER - Voluntary Services and Investigation Responsibilities by Program for additional information.

Step	Action
13	 A Family-Centered Meeting (FCM) will be held: Prior to removing a child (this is sometimes not possible due to exigency), or Within 1 working day of an emergency removal (prior to the Detention Hearing).
	NOTE: Best Practice strongly encourages holding a FCM prior to the Detention Hearing because the need for a petition might be avoidable, depending on the outcome of the FCM.

NOTE: WIC 313 requires a child to be released from custody within 48 hours, excluding non-judicial days (weekends, holidays, and court "dark days"), unless a petition is filed. If no petition has been filed and the child has not been released within 48 hours, then **immediately** notify PSS, who will immediately contact CC.

If the child was in custody for more than 6 hours and released without a petition being filed, send the Protective Custody Letter (04-118, CWS/CMS template) to the parents.

Determining whether a child can remain safely in the home

SWs will utilize the SDM Safety Assessment to determine whether a child:

- can remain safely in the home without specific safety intervention
- can remain in the home WITH a Safety Plan (04-277), or
- requires protective placement to ensure safety, based on what, if any, Safety Threats have been identified.

The SW will complete this tool during the first face-to-face contact with each alleged victim and document it within 2 working days.

The purpose of the Safety Assessment is to:

- assess whether the child is likely to be in immediate danger of serious bodily injury,
 which requires a protective intervention, and
- determine what intervention(s) should be initiated or maintained to ensure appropriate protection.

Additional Safety Assessments will be used on any open referral or case in which circumstances that affect the child's safety change, such as changes in:

- family circumstances;
- household composition;
- information known about the family; or
- ability of safety interventions to mitigate safety threats.

See Structured Decision Making (SDM) for additional information.

Documenting necessity of services

During an investigation, the SW must determine whether continued child welfare services are necessary to ensure a child's safety, either through VS or CI.

Per Division 31 (state) regulations (31-101.5), within **30 days*** the SW must determine whether or not child welfare services are necessary.

If child welfare services **are** necessary, SWs shall develop Case Plans , based on the Family Strengths and Needs Assessment (FSNA) SDM Tool, with the parents and the child, if appropriate, and get PSS approval (in CWS/CMS) within 30 days*. Once service needs are identified, the CI SW will make referrals for the child(ren) and parents to appropriate services and document these referrals in CWS/CMS.

* "Within 30 days" means within 30 calendar days of the in-person investigation (i.e., first face-to-face contact) or initial removal, or by the date of the dispositional hearing, whichever comes first.

If child welfare services are **not** necessary, the SW must close the referral/case.

Practice considerations

The CI SW is responsible for the following:

Services for the Child and Family

- Initiate supportive services immediately, including a Family-Centered Meeting (FCM) where both the placement decision and case plan may be discussed as a team, and possibly a referral to the Intensive Family Preservation Program (IFPP).
- Services must be directly correlated to supporting behavioral change in response to the identified Safety Threat(s) and the Priority Needs on the FSNA. The behavioral changes must be outline clearly on the Case Plan.
- Monitor the provision of services and ensure that all services are efficiently delivered and utilized by the family. The reunification process works best when parents, their Safety Network, the SW and service providers collaborate to help families overcome their resistance, engage in services and address the identified protective safety and risk concerns.

Court Process

- If a petition is filed, explain the court and CWS processes to the family in language they can understand (avoid jargon). Provide the family with the brochure "A Parent's Guide to Child Welfare." Attend the Detention and Jurisdictional/Dispositional Hearings whenever possible, as it can be a form of support to the family and may help prevent continuances in the court process.
- If any family member is claiming possible Indian heritage, conduct a thorough inquiry in order to proceed with ICWA notice (see ICWA Noticing Manual). Obtain assistance with ICWA noticing from the Regional ICWA Notice Specialist.
- Explain the reasons for court intervention and the recommendations to the family.
- Encourage the family to express their feelings about your decision to pursue court
- Explain that there will be separate attorneys appointed to protect the legal rights of each parent and the child(ren).

Practice considerations (cont.)

Court Process (cont.)

- Prior to and immediately following all court hearings, be available to answer questions regarding the court's orders and possible outcomes, but refer family to their respective attorneys for any specific questions.
- Discuss with the family all noted strengths and how they will assist them in achieving their goals of independence and reunification.
- Obtain social/family history for the Juris/Dispo Report from the parents, case records and other professionals.
- Collaborate with the parents and children (depending on age and developmental ability) to develop a case plan, including a Danger Statement and Safety Goal and activities/services the family and the Agency will do to work toward reunification.
- Explain the principles of Concurrent Planning to the family, including time frames for reunification and permanency. Explain that CWS has a legal obligation to identify a permanency alternative if efforts to reunify are unsuccessful.
- If child is on psychotropic medication, obtain psychotropic medication authorization (see Authorization for Psychotropic Medications).

Placement

The decision to recommend out-of-home placement for the child can be very difficult for the family. Planning placement decisions with the parents, the child (when possible), and extended family conveys to the parents that they are primary participants in decision-making related to their child's well-being. See CI - Detention of Child and SW Expectations While the Child Is in Placement.

- Ask the parents to complete the "All About Me" form for the child.
- Ask the parents and the child for names of potential substitute care providers (SCPs) known to the child, relatives or NREFMs, and provide that information to the regional Placement Unit for assessment.
- Begin Relative Searches.
- Ensure any relative or NREFM requesting placement is assessed by the regional Placement Unit.
- WIC 361.3 states that preferential consideration for placement is given to relatives. The following relatives shall be given preferential consideration: an adult who is a grandparent, uncle, aunt or adult sibling of the child.
- Ensure that any relative or NREFM is "approved" prior to any placement, unless the relative/NREFM meets RFA emergency placement criteria.
- Arrange a pre-placement visit, when possible, between the child(ren) and the proposed SCP.
- Follow SW Expectations While the Child Is in Placement including providing SCP with all necessary health and education information and completing QPI Partnership Agreement (04-296 and 04-296sp).
- Facilitate a Family-Centered Meeting (FCM) between the children, parents, and proposed SCP as soon as possible to establish clear expectations of roles.
- Determine the child's school of origin and assess whether potential SCP will transport child to school of origin.

Practice considerations (cont.)

Placement (cont.)

- Submit all health and education information to the Health and Education Passport (HEP) clerk and enter education information into CWS/CMS.
- Provide the child information about their rights by providing Foster Children's
 Personal Rights (10-5 and 10-5sp in Spanish) and explain their rights to them in an
 age-appropriate manner. For youth age 14 and over, have them sign the 10-5 and
 retain in the case file. Provide a copy to the child as well.
- If the initial detention/placement is not in the preferred family home setting, continually reassess the safety of returning a child to the family home when risk has been sufficiently reduced. The Court frequently allows SW discretion to expand visitation and begin a 60-day trial visit with a parent with concurrence of minor's counsel. A Special Hearing can also be requested if the next scheduled hearing is more than 30 days away.

Visitation

- Provide parents with contact number for child's caregiver as soon as possible. SWs
 must make a diligent and reasonable effort to ensure regular telephone contact
 between the parent and a child of any age prior to the detention hearing, unless that
 contact would be detrimental to the child. The initial telephone contact shall take
 place as soon as practicable, but no later than five hours after the child is taken into
 custody.
- Follow all policies and procedures related to Visitation.
- Arrange for visitation between child and parent(s) as soon as safely possible after child is placed in out-of-home care.
- Cultural considerations should be taken into account when planning visitation.
 Consider settings such as the family's home, the home of a Safety Network member or the family's church.

Case Management

- Transparency regarding SDM Tools (including Safety and Risk Assessments, FSNA, and Reunification Reassessment or In-Home Risk Assessment) and the CWS process is encouraged. See Structured Decision Making (SDM).
- Immediately make referrals and arrange for services for the family.
- Consult with County Counsel prior to writing the Jurisdictional/Dispositional Hearing report to determine whether it is appropriate to request bypassing reunification services (see non-reunification criteria in Types of Hearings - Disposition).
- Explain to the family that another SW will be assigned after the Jurisdictional/Dispositional hearing(s) are complete and that SW will assist them in completing their reunification plan and when they can expect to hear from that worker. Provide family with contact information for CS SW and PSS, if known.
- Assure them that you are available for assistance and support until the new worker has contacted them.
- Expedite transfer of the case to a Continuing Services SW, including participating in a "warm hand-off."

When a referral stays in CI

When a referral stays in CI beyond the initial contact, the CI SW shall do all of the following:

- Make all required contacts within required ER Time Limits.
- Review law enforcement history, priors and services.
- Complete SDM Assessments within required timeframes.
- Assess the need for services.
- Assess available relatives/NREFMs (see Relative and Non-Relative Extended Family Member Approvals) for current or possible future placement.
- Obtain relevant information from Collaterals such as medical and mental health professionals prior to developing the case plan.
- Complete an assessment, case plan, and initiate services within 30 calendar days of the initial face-to-face contact or initial removal of child.
- Initiate parent/relative search for absent parents and extended family members and record in CWS/CMS.
- If child is in custody, give parents "A Parent's Guide to Child Welfare Services."
- Request the parent's signature on the Consent to Treat (04-24P, 04-24Psp),
 Authorization to Use or Disclose Protected Health Information All Providers (04 24A-P, 04-24A-Psp), and Emergency Assistance Application for Child Welfare Services
 (EA1). The court can sign the Order Authorizing Examination and Treatment Court
 (04-24C) only if the parent is unwilling or unavailable to sign the 04-24P and 04-24A P. If a parent is unwilling or unable to sign the above forms, document that
 information in the Detention Hearing Report when requesting the court to sign.
- Obtain medical records from PCC nursing, if the child was at PCC.

SWs must make a diligent and reasonable effort to ensure regular telephone contact between the parent and a child of any age, prior to the detention hearing, unless that contact would be detrimental to the child. The initial telephone contact shall take place as soon as practicable, but no later than five hours after the child is taken into custody.

Guardianship in CI

Issues concerning guardianship may arise regarding a child assigned to CI. If there is a request to revoke a guardianship for a child who had been a dependent prior to guardianship, refer to 388 Motions on Guardianships by Parents or Guardians for procedures.

If a CI SW determines that guardianship may be in the best interest of the child and that a petition does not need to be filed, refer to Request for an Independent Guardianship.

If a CI SW wants to recommend guardianship at the Disposition hearing, refer to Recommending Guardianship at the Dispositional Hearing. If the prospective guardian is a relative, see also Kin-GAP (Kinship Guardianship Assistance Payment).

Recommending outof-home detention

After a petition has been filed, the SW shall recommend that a child be detained out-of-home only when one or more of the following conditions are met:

- The child has no parents, guardians or responsible relatives/NREFMs available or willing to provide care.
- There are no reasonable means by which the child can be protected in his/her home based on a combination of risk and safety assessment, professional judgment and case consultation.
- A protective issue exists and the child or his/her parent is likely to flee the jurisdiction of the court.
- The child has left a placement ordered by the Juvenile Court.

Confidentiality of placement

Unless the court makes a "good cause" finding at the Dispositional Hearing to release the SCP's address, the child's location shall remain confidential. Withholding the child's address does not preclude visitation between the parent and the child. Confidential placements and the appropriateness of contact and visitation are separate issues and must be separately assessed.

See Confidential Placements for additional information.

Ongoing CI Tasks

Throughout the time a case remains in CI, the SW will continue to do all of the following:

- Gather evidence to support or negate the allegations
- Assess for risk and safety of the children
- Assess the family's strengths and needs
- Provide social services
- Assess for reunification
- Evaluate potential detentions/placements
- Continue to communicate with Collaterals such as school, medical and mental health professionals whenever relevant
- Verify information given by the parents regarding their compliance with the case plan
- Provide for visitation with parents and siblings, unless the court has found that it is not in the child's best interests
- Search for absent parents and relatives.

Safely Surrendered Babies

See Safely Surrendered Babies policy.

Alignment with SET

CI Procedures aligns with:

<u>Value 1</u> and the Guiding Principles of recognizing that enhancing safety for children and youth in the home is the top priority for everyone involved, and building shared understanding and agreement through family engagement. It also supports the Agency practices of developing case plans that reflect specific behavioral detail to achieve the safety goal, and establishing and maintaining collaboration with schools, public health, public safety, and other community partners.

<u>Value 3</u> and the Guiding Principle of identifying living situations that support children and their relationships should be done as quickly as possible. It also supports the Agency practice to maintain connections to important people, activities, and cultural traditions in the child/youth's life.

<u>Value 5</u> and the Guiding Principle of ensuring that all parties have mutual understanding of, and respect for, one another's roles, the law, and the rights due to children, youth, and families. It also aligns with the Agency practices of valuing teamwork and coordination of CWS investigations throughout the life of the case, and advocating for the least restrictive and most liberal visitation.