

Statement of Consideration (SOC)

PPTL 22-07 SOP 2.1, SOP 2.2, SOP 2.3, SOP 2.4, SOP 2.6, SOP 2.7, SOP 2.14, SOP 2.15.8, SOP 2.16, FAQ on Residency Determination, KY SDM® Intake Manual, and the DPP-115. The following comments were received in response to SOP drafts sent for field review. Thanks to those who reviewed and commented. Comments about typographical and grammatical errors are excluded; these errors have been corrected as appropriate

SOP2.1

1. **Comment:** Under practice guidance the child's present location should be a consideration.

Response: Reports are assigned where the child typically resides. It is best practice for the assigned investigative worker to complete all tasks and interviews for an investigation. However, when the location of a child is a barrier to meeting response timeframes, courtesy assistance can be requested.

2. **Comment:** Under practice guidance: How is location defined here: the child's location or the location of the assigned investigator?

Response: The child's location is where the child is physically present, not necessarily where they reside.

3. **Comment:** Under practice guidance: This consideration requires a comparison. What is the other measure to be considered: the child's present location or the address of the child's typical residence?

Response: Please refer to comments 1 and 2 above.

4. **Comment:** #4 under The CI SSW: There are consideration outlined above in practice guidance that suggest there are circumstance where these assignment protocols aren't followed. If those are not include in the FAQ on Residence Determination, a reference to practice guidance should be included here or the practice guidance details should be added here.

Response: The FAQ on Residence is referenced in Practice Guidance.

5. **Comment:** #2 under Web based report:?? The WEB id turns in to the intake ID once the referral is processed by CI.

Response: The web tracker ID is the same as the intake ID.

6. **Comment:** #4 under Web based report: What is the information referenced here? I could not find anything in practice guidance that stood out as relating to the task of contacting the reporting source.

Perhaps the guidance is missing or more specificity is needed here. Or, is this a formatting issue and this line applies to item #5?

Response: This references existing SOP, which includes that a response is required for a web-based report. The response template can be found in [SOP 2.2 Reports not accepted for Assessment/Investigation](#).

7. **Comment:** #4 under Web based report: General templates have been used by CI staff in the past, is this no longer as seen below?

Response: The response template can be found in [SOP 2.2 Reports not accepted for Assessment/Investigation](#).

8. **Comment:** Specialized Reports #2: How is appropriate defined? Can this language be made more specific/concrete?

Response: Language has been changed.

2. For allegations of human trafficking, enters the caretaker report into TWIST under the name of the child's parent/custodian. For human trafficking reports on non-caretakers, the report will be listed in the name of the alleged perpetrator;

9. **Comment:** Specialized Reports #2: It sounds like there may be more than one Human Trafficking Subprogram. If so where are those defined – Include reference. If not already defined somewhere in SOP, the options should be detailed here with the criteria for their use.

Response: Please refer to the certified SDM manual and [SOP 2.3 Acceptance Criteria](#)

10. **Comment:** Specialized Reports #4: Is this a CI duty? the regions handle onsite provision requests and coordination.

Response: Change has been made to delete #4.

SOP 2.2

1. **Comment:** **If a web-based report is received, but does not meet acceptance criteria, please copy and paste the following information into an e-mail response to the reporting source:**

Suggest alternate language: notify the reporting source of the determination by email, copying the following information into the body of the message.

Response: Change has been made.

2. **Comment:** Under Does Not Meet Criteria, List: Suggest introducing the idea that the subsequent list are factors which would support or lead to a DNMC. As written, the guidance jumps from TWIST entry functions to decision making function without a clear transition.

Consider formatting changes to highlight these difference functions to include a header for Documenting the DNMC and another for consideration for making a DNMC determination.

Response: No change will be made. This language comes directly from the regulation.

3. **Comment:** Under Does Not Meet Criteria, #7: Threat of physical and threat of sexual abuse can still be considered when incident occurs in another state but perp and child reside in KY. Must be considered! Example: child says mom's paramour molested her while traveling to Tennessee. Incident occurred in TN—we refer to TN. However, paramour also lives with mom and child in KY—still a threat of sexual abuse high risk to be screened in.

Response: Language has been changed. #7 has been deleted and the FAQ on Residency Determination has been updated as follows: **If the report meets Kentucky's acceptance criteria, the allegations are investigated in Kentucky and in the county where the child resides. However, Kentucky cannot investigate if central intake (CI) has confirmed that the report was accepted on the same allegations in the other state.**

4. **Comment:** Under Physical Abuse Criteria: **Allegations of age-appropriate corporal punishment, without injury, mark, or bruise, and not in a critical area of the body or a substantial risk of harm.**

Consider rewording to "not targeting a critical area..."

As written this is difficult to understand...

Is this trying to convey that the corporal punishment reported is unlikely to result in substantial risk of harm? If so, I'd recommend revisions to make this idea clearer. If another idea was intended, I'd recommend similar revisions.

Response: No change will be made.

5. **Comment:** Human Trafficking: What are the conditions for DNMC for a Human Trafficking allegation? The inclusion of this subprogram and a legal rationale suggests that some exist, but none are listed here.

Response: Please refer to 922 KAR 1:330 Section 2(5)(c) as referenced in the section.

6. **Comment:** Neglect: Suggest giving examples:
- sleeping during the night or napping while the child naps
 - using the restroom or bathing while leaving the child is engage in an age-appropriate activity.

Response: Please refer to the certified SDM manual for examples.

7. **Comment:** Neglect: What is normal? Recommend trying to tighten up this language.

Response: This should be determined on a case-by-case basis, but as stated in this SOP normal behavior is behavior that any reasonable person would engage in. The inattentiveness of the caretaker(s) should show the lack of supervision outside of normal behavior. Lack of supervision cannot be solely based on a negative outcome of a normal or reasonable behavior.

8. **Comment:** Neglect: **Allegations based solely on a parent being absent or not having involvement with their child.**

Does this refer to a parent's contact with the child? Are you getting at engaging in parenting the child?

Response: No

9. **Comment:** Neglect: **Allegations regarding children being placed with a caretaker with no allegations of abuse, neglect, or dependency can be referred to the [Caregiver's Act \(HB 176\)](#) that enables relative caregivers to make health care or school arrangements for a child in their care, who is not currently under the supervision of the Cabinet.**

An "alternate" caretaker "without the provision of legal custody or guardianship" Recommend adding language to make the scenario clearer.

Response: Language has been updated: **Allegations regarding children being placed with an alternate caretaker, without the provision of legal custody or guardianship, with no allegations of abuse, neglect, or dependency can be referred to the Caregiver's Act (HB 176) that enables relative caregivers to make health care or school arrangements for a child in their care, who is not currently under the supervision of the Cabinet.**

10. **Comment:** Emotional Injury: What are the conditions for DNMC for a Emotional Injury allegation? The including of this subprogram and a legal rationale suggests that some exist, but none are listed here.

Response: Please refer to the certified SDM manual.

11. **Comment:** Duplicate Intake: A duplicate may also be one that has the same reporting source, such as duplicated JC-3's.

Response: As stated in this SOP, a duplicate intake involves the same child and the same event and does not necessarily have to be the same referral source.

12. **Comment:** Information Only: These are entered as DNMC and documented as FYI---there is no TWIST drop down for "information only".

Response: The following change has been made: **Reports with additional information regarding an active case are documented in TWIST under the Information Only path by the SSW taking the report.**

13. **Comment:** Contingencies and Clarifications: **If the court orders an investigation or assessment of allegations that do not meet acceptance criteria, the FSOS consults with regional management and/or the Office of Legal Services as necessary**

Recommend including guidance to refer to SOP 2.4 with a hyperlink.

Is this qualifier needed? Its inclusion suggests that there are certain circumstances where the court can order an investigation of allegations that DNMC without RO and OLS consult. If the court can never order an investigation of allegations that DNMC, this should be deleted.

Response: Language has been added to include a reference and link to [SOP 2.4 Non-Investigatory Response](#).

SOP 2.3

1. **Comment:** **When a report alleging child maltreatment is received at centralized intake (CI), the screening component supports a SSW's decision regarding if the situation requires a child protection response.**

guides the social service worker in determining whether the situation requires.

Response: Change has been made.

2. **Comment:** There needs to be timeframe clarification on the SOP. A definition of what is high, moderate and low risk. It is in the manual, but not the SOP.

Response: Response timeframes are determined by KAR and can be found in SOP 2.6 Completing the CPS Intake of the SOP manual.

3. **Comment:** Practice Guidance: #3: Add only 1 second incident can be attached to an intake, not repeats, or a 2nd 3rd, etc---this is new and a major change in practice.

Response: Language has been changed as follows: **If a new allegation is received within fifteen (15) working days of the original allegation and is not in the same program/subprogram as the original allegation, the SSW may add the new information to the existing report as a second (2nd) incident after it is screened using the certified SDM tool. Only one (1) second (2nd) incident can be attached to an intake. E.g a second (2nd) or third (3rd) incident cannot be added.**

4. **Comment:** Practice Guidance: #4: Note all other allegations or additional vic/perp pairings will need to be entered via a new Intake and entered via CI.

Response: A victim/perp pairing that is connected to the original maltreatment program/subprogram can be added within 30 working days by any person that has access to the case. Second incidents are new allegations and can only be entered by central intake staff.

5. **Comment:** Procedure: 3. **If a report meets criteria for acceptance and is designated as a fatality/near fatality, please refer to SOP 2.14 Investigations of Child Fatalities and Near Fatalities.**

Guidance for designation a F/NF is in 2.14. Recommend revision to read: "involves a deceased child or child requiring significant medical intervention

Recommend additional language: "for determining whether a fatality/near fatality designation is required".

Response: No change will be made.

6. **Comment:** Neglect: Under #3: Should access to weapons, specifically firearm, be included here?

Response: No change will be made.

7. **Comment:** Neglect #5 A iii: What qualifies or would be examples of a child as being 'disabled', an 'infant', and a 'life threatening condition'?

Response: No change will be made. Please refer to the certified SDM manual.

8. **Comment:** Neglect #7: New SOP mentions nothing regarding caretakers exhausting their resources and no longer being able to care for child(ren), is this obsolete?

Response: No change will be made.

9. **Comment:** Neglect #8 A i: Just a suggestion from what we see frequently in practice and as reports are made, but can specific citation from KRS 159.141 rgd. school resource officer/school court liaison filing petition in court for truancy/neglect---that piece on required filing at the school level.

Response: No change will be made. Link to KRS 159.140 is included.

10. **Comment:** Neglect #8 B iii: Should this be under DNMC rather than what DOES meet?

Response: Language has been changed to strike iii. Language has been added to SOP 2.2 Reports not accepted for Assessment /Investigation.

11. **Comment:** Neglect #8 B vi: This seems VERY confusing....we are saying "except" these circumstances, ED NEG should be assigned?

Response: Language has been changed to strike vi. Language is added to SOP 2.2 Reports not accepted for Assessment /Investigation.

12. **Comment:** Neglect #9: Just 'non prescribed' drugs?

Response: Yes.

13. **Comment:** Neglect #9: It defines Substance exposed as expose to nonprescription drugs. This needs clarification. What if mother is in a MAT program, are we no longer taking those reports? What if her use of MAT meds is excessive? What if she has old prescriptions? They are still valid but not being used appropriately.

Response: If the infant was exposed to a substance that was prescribed to the mother, the referral does not meet acceptance criteria.

14. **Comment:** Emotional Injury: EI is very subjective to one's opinion. A lot of the below subcategories are reported ALL the time, without supporting examples of how it harms the child(ren), if this can be explained through SOP.

Response: If there are supporting examples of caretaker behavior with no information of specific harm to the child, the report may meet threat of emotional injury. Changes may be forthcoming.

15. **Comment:** Emotional Injury: EI can only be substantiated by a QMHP however DV referrals could be assigned under EI, if not for that.

Response: A QMHP diagnosis is not required for acceptance of an emotional injury report but is required for of substantiated finding. A threat of emotional injury referral does not require a QMHP for a substantiated finding.

16. **Comment:** Emotional Injury: A. is VERY vague....negatively impacts the child? Also seems to be very subjective to one's definition of "pattern of negative behavior".

Response: No change will be made. Please refer to the certified SDM manual. Changes may be forthcoming.

17. **Comment:** Emotional Injury: B. Again, subjective to the reader's opinion of "destructive interpersonal interactions"---relationships?

Response: No change will be made. Please refer to the certified SDM manual.

18. **Comment:** Emotional Injury: #2 A. Very subjective of what "severe symptoms" could be.

Response: No change will be made. Please refer to the certified SDM manual.

19. **Comment:** Emotional Injury: #2 A. Severe symptoms of mental illness of the adult or child victim in these scenarios---very vague.

Response: No change will be made. Please refer to the certified SDM manual.

20. **Comment:** Emotional Injury: #3 I would also like to see threats of a parent by another parent/paramour, and with weapons?

Response: No change will be made. Please refer to the certified SDM manual.

21. **Comment:** Emotional Injury #3 B. vi Not sure that "unreasonable control of an adult victim" is the correct term for CPS criteria?

Response: No change will be made. Please refer to the certified SDM manual.

22. **Comment:** Related Information: **Any report received by the Cabinet must meet acceptance criteria prior to Division of Service Region (DSR) staff initiating an investigation or assessment, regardless of the source of the report (please refer to CHFS v. Hon. Eleanore Garber and Hon. Jerry Bowles). If a court orders an investigation or assessment of allegations that do not meet the Cabinet's acceptance criteria, the FSOS consults with regional leadership as necessary**

Recommend inserting guidance to refer to 2.4 with a hyper link to this content.

Response: Language has been updated to add link to SOP 2.4 Non-Investigatory Response.

23. **Comment:** Related Information: **Any report received by the Cabinet must meet acceptance criteria prior to Division of Service Region (DSR) staff initiating an investigation or assessment, regardless of the source of the report (please refer to CHFS v. Hon. Eleanore Garber and Hon. Jerry Bowles). If a court orders an investigation or assessment of allegations that do not meet the Cabinet's acceptance criteria, the FSOS consults with regional leadership as necessary**

Is this qualifier necessary? Its inclusion suggests that there are certain circumstances where the court can order an investigation of allegations that DNMC without RO and OLS consult. If the court can never order an investigation of allegations that DNMC, this should be deleted.

Response: Language is added to include a reference and link to SOP 2.4 Non-Investigatory Response.

SOP 2.4

1. **Comment:** Practice Guidance
 - **There may be a non-investigatory response required by DCBS. A non-investigatory response pathway is selected when a report does not meet the statutory and regulatory definitions of abuse or neglect, however, will require a worker response for one of the following pathways;**
 - **A non-investigatory response pathway is selected when a report does not meet the statutory and regulatory definitions of abuse or neglect, however, will require a worker response for one of the following pathways;**

- **Any report received by the court or law enforcement should be screened for acceptance criteria.**
- **If any of the following is selected, no further SDM® assessments are required.**

What are the following conditions being referenced here?

- **Response:** Language has been changed to strike ~~If any of the following is selected, no further SDM® assessments are required.~~

2. **Comment:** **If any of the following is selected, no further SDM® assessments are required.**

Following note after or below, maybe say above mentioned.

- **Response:** Language has been changed to strike ~~If any of the following is selected, no further SDM® assessments are required.~~

3. **Comment:** **Any report received by the court or law enforcement should be screened for acceptance criteria.**

This seems like it would be the first step in any decision making for this acceptance track. Should it be the first bullet point in this section?

Response: Language has been changed.

4. **Comment:** **If any of the following is selected, no further SDM® assessments are required.**

This looks like a repeat of the first bullet point above.

Response: Language has been changed.

5. **Comment:** Court ordered investigations. Many times the Judge orders something to be done while at court. This says not to initiate until a determination is made. Staff can't delay court to submit a referral and wait for CI to take 4 hours to process. This is unrealistic for staff.

Response: A referral is not a CPS investigation without screening through the SDM tool and meeting acceptance criteria. However, if a judge requests that DCBS assess a situation while in a court session through a brief interview that can be completed while at that court session, the SSW or other staff can complete that task.

6. **Comment:** Procedure: #3: For consult? What is the reason for contacting the SRA or Branch Manager?

Response: Even when court ordered, DPP cannot investigate and contact a person regarding something that is outside of DPP's legal scope of work.

7. **Comment:** Procedure: #3: This needs to note OLS needs notified since court ordered. Agree CI worker should inform next lien which would be their CI FSPS, then CI FSOS should notify SRA or designee and CI Branch Manager.

Response: Please refer to response for #6.

8. **Comment:** Law Enforcement Assist Path: **The law enforcement assist (LEA) path is selected when the intake SSW receives a report that indicates law enforcement has requested assistance from DCBS staff. Any report received by the Cabinet must meet acceptance criteria prior to DPP staff initiating an investigation/assessment, whatever the reporting source (refer to CHFS v. Hon. Eleanore Garber and Hon. Jerry Bowles).**

This is confusing---LEA are assigned with no allegations.

Response: In cases where law enforcement is requesting assistance, the SSW should obtain all required information, including identifying information for any children or adults and the purpose for the assistance. This information is used for DPP screening purposes.

9. **Comment:** Law Enforcement Assist Path: **If an SSW is assisting an officer and observes concerns of abuse or neglect then a new report must be made prior to DPP staff initiating an investigation/assessment.**

To Central Intake to screen for assignment.

Response: No change will be made. In some cases, such as on-call, CI is not responsible for screening the report.

10. **Comment:** Law Enforcement Assist Path: Law enforcement assist, it states for worker to not interview anyone without police present. Sometimes this is an issue, when on the scene this is not always possible. It seems unrealistic for staff.

Response: On a law enforcement assists, DPP is acting outside of the scope of legal authority if the SSW interviews or makes contact with a person outside of law enforcement presence.

SOP 2.6

1. **Comment:** Introduction: **The tool is completed as soon as possible when processing the report, no later than the end of the Central Intake (CI) staff's shift. Non-accepted reports must be approved by a supervisor before the end of the CI staff's shift.**

This broad timeframe could prove problematic for field staff who will be responsible for responding afterhours if the screening determination is delayed until the end of the CI worker's shift.

Response: This does not apply to reports that are screened on-call.

2. **Comment:** Procedure: #1 Address on call and intake assessment tool, who completes?

Response: SRAs have been informed and provided the tools and manual to provide to staff for on-call screening of reports. SOP 1.12 On Call Activities is being revised and changes are forthcoming.

3. **Comment:** Procedure: # 3 the guidance for overrides in SOP 2.4 is not clear. I found only one reference to "override in that SOP and dealt with documenting the override decision. SOP 2.4 may need additions to include criteria and process guidance for overrides.

What is an override? If it is another term for non-Investigatory response, that should be articulated somewhere.

Response: Please refer to the certified SDM manual.

2. **Comment:** The FSOS or designee: Are these considerations in the proper order? It seems that item C would be the first step in this process flow and item A would be the last.

- a. **If the report is approved or if it needs to be pended back in TWIST to the CI SSW for corrections;**
- b. **If the tool selections and response times are accurate considering the allegations and history; and**
- c. **Whether the call contains protective service allegations;**

Response: The following change has been made:

- A. Whether the call contains protective service allegations;**
- B. If the tool selections and response time are accurate considering the allegations and history; and**
- C. If the report is approved or if it needs to be pended back in TWIST to the CI SSW for corrections;**

3. **Comment:** The FSOS or designee: Clarify the CI SSW and CI FSOS.

Response: No change will be made. It will not always be a CI FSOS or designee.

4. **Comment:** The FSOS or designee #1: CI staff make the determination, it is then submitted to the Supervisor to review and approve or pend back to the CI SSW for corrections.

Response: Refer to the response for comment #2 above.

5. **Comment:** The FSOS or designee, #5: CI does not notify SRA of SI reports, these are assigned to the SI team by the regional protocols.

Response: Language has been changed and #5 has been removed.

6. **Comment:** The SRA or designee, #1: CI assigns to the SI teams, based on regional protocols.

Response: The task goes to the SRA or designee for reassignment if an assignment is outside of regional protocols.

SOP 2.16

1. **Comment:** Procedure, #7 What is the appropriate assessment tool? If there is more than one tool that could be completed for this type of case, what are the criteria for selecting each?

Response: Language has been changed: **Completes the ADT that is generated in TWIST;**