



INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE POLICY

Chapter 4: Assessment

Section 22: Making an Assessment Finding

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POLICY OVERVIEW

A timely, thorough, and thoughtful response to child safety concerns is critical to effectively protecting children. IC 31-33-8-1 requires the Indiana Department of Child Services (DCS) to complete an assessment for reports received of known or suspected Child Abuse and/or Neglect (CA/N). Upon the completion of the assessment, a finding of “substantiated” or “unsubstantiated” must be made to determine next steps for the child and family.

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PROCEDURE

DCS will make an assessment finding no later than **40 calendar days** from the date the Preliminary Report of Alleged Child Abuse or Neglect (310) was received.

DCS will make a finding of “unsubstantiated” when facts obtained during an assessment provide credible evidence that CA/N has not occurred. A finding of “unsubstantiated” is also appropriate when the evidence of CA/N does not rise to the level of a preponderance of the evidence.

DCS will make a finding of “substantiated” when facts obtained during the assessment arise to a preponderance of evidence sufficient to lead a reasonable person to believe that CA/N has occurred or when the alleged perpetrator admits to having abused and/or neglected the alleged child victim.

Note: An assessment of a homeless unaccompanied minor receiving shelter without the presence or consent of a parent, guardian, or custodian should not be considered an automatic substantiation of CA/N.

Upon completion of a thorough assessment, a determination must be made regarding whether a Child in Need of Services (CHINS) petition or Informal Adjustment (IA) will be filed in compliance with other DCS policies.

For each allegation, the Family Case Manager (FCM) will:

1. Carefully review and weigh all evidence collected during the assessment, placing greater weight on those pieces of evidence that have greater credibility or impact on the safety of the child (See Practice Guidance for more information);
2. Discuss the assessment with the local office FCM Supervisor during case staffing;

Note: If the perpetrator is unknown, the FCM should discuss with the FCM Supervisor if there is a preponderance of evidence to show CA/N occurred. The FCM must exhaust all efforts in identifying and locating the subjects (see policy 5.23 Diligent Search for Relatives/Kin and Case Participants) prior to substantiating CA/N on an unknown perpetrator.

3. Call the regional Safe Assessment Closure Team (SafeACT) phone number as soon as possible to staff the assessment with a SafeACT Supervisor, upon reaching a decision that all children involved in the assessment are safe and the assessment outcome is clearly unsubstantiated.
4. Document the finding and rationale for the finding (specific to assessments that are not closed via SafeACT), and:
 - a. Complete the following for allegations determined to be “unsubstantiated”:
 - i. Include in the assessment finding a description of the credible evidence supporting the conclusion that there is a lack of evidence that supports the allegation. Also, include a statement that there is a “lack of a preponderance of evidence to support that the allegation is true”, and
 - ii. Recommend that the assessment be closed.
 - b. Complete the following for allegations determined to be “substantiated”:
 - i. Include in the assessment finding a description of the credible evidence supporting the conclusion that the allegation is true, how the credible evidence constitutes CA/N, and that this evidence outweighs any contrary evidence,
 - ii. Complete an Initial Risk Assessment and a Child and Adolescent Needs and Strengths (CANS) Assessment to assist in determining the level of intervention and services appropriate for the family (see policies 4.23 Initial Family Risk Assessment, 4.26 Determining Service Levels and Transitioning to Permanency Services, and 5.19 Child and Adolescent Needs and Strengths [CANS] Assessment), and
 - iii. Discuss the First Steps program and referral process with the family if the child is under the age of three (3) (see Practice Guidance for more information), and ensure the caregiver understands that First Steps will contact them regarding an assessment for the child.
5. Follow all procedures to submit the Assessment of Alleged Abuse or Neglect Report (311) for approval within 30 calendar days from the date the 310 was received (see policy 4.25 Completing the Assessment Report). If the assessment is approved through SafeACT, the FCM is not responsible for completing the Safe Assessment of Alleged Abuse or Neglect (311S).

Note: If the 311 is originally submitted more than 30 calendar days from the date the 310 was received, an additional face-to-face contact may need to be made with each child victim prior to submission of the 311 for approval to ensure no more than 30 calendar days passes between contacts with the child.

The FCM Supervisor will:

1. Discuss the evidence collected during the assessment and complete the Assessment Staffing Guide (ASG) with the FCM during case staffing;
2. Upload the ASG to the case management system;
3. Determine if the information provided in the 311 and documentation in the case management system support the finding of the assessment;

4. Ensure the assessment is completed and approved in the case management system within 40 calendar days from the date the 310 was received; and
5. Follow all procedures contained in policy 4.25 Completing the Assessment Report.

The SafeACT Supervisor will staff the assessment with the FCM by completing the ASG and uploading it to the case management system, and:

1. Completing the 311S and closing the assessment, if all information is provided to determine all children are clearly safe and the assessment should be unsubstantiated;
2. Requesting the FCM complete the next steps outlined in the Needs More Information (NMI) section of the ASG; or
3. Referring the assessment back to the DCS local office if:
 - a. The SafeACT Supervisor does not have sufficient information and/or evidence to support a safety decision of clearly safe with a recommendation to unsubstantiate, or
 - b. The assessment includes allegations or factors that are complex in nature and the FCM may benefit from additional guidance and support by the local office FCM Supervisor.

Intentional False CA/N Reports

DCS will collaborate with the local prosecuting attorneys to facilitate the prosecution of individuals who intentionally make false CA/N reports, if there is reason to believe an intentional false CA/N report was made.

The FCM will immediately notify the FCM Supervisor in writing (e-mail is acceptable) that the FCM suspects a reporter has intentionally made a false CA/N report.

The FCM Supervisor will

1. Review the information provided by the FCM; and
2. Forward the information to the Local Office Director (LOD) if the FCM Supervisor concurs with the FCM's suspicions.

The DCS LOD will:

1. Consult with the DCS Staff Attorney and Chief Counsel if the LOD concurs with the FCM Supervisor's suspicions; and
2. Notify the prosecuting attorney for possible prosecution with local procedures if the DCS Staff Attorney, Chief Counsel, and LOD determine there is a reason to believe that a person has made an intentional false report of CA/N.

The DCS Staff Attorney and Chief Counsel will consult with the LOD to help determine whether to forward the information to the local prosecuting attorney.

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RELEVANT INFORMATION

Definitions

Case Staffing

Case staffing is a systematic and frequent review of all case information with safety, stability, permanency, and well-being as driving forces for case activities.

Credible Evidence

Credible evidence is evidence that is believable.

Emotional Injury

Emotional injury occurs when a child has an observable, identifiable, and substantial impairment of the child's mental or psychological ability to function as a result of an act or failure to act by a parent, caregiver, or household or family member. (See the DCS Screening and Response Time Assessment [SDM Tool] for additional information on emotional injury.) These acts may include, but are not limited to the following:

1. Implied or overt threats of death or serious injury of the child or others;
2. Implied or overt threats in the form of pet or animal torture; and/or
3. Constant denigration.

Homeless Unaccompanied Minor

A homeless unaccompanied minor is an individual who is under 18 years of age and is receiving shelter without a parent, guardian, or custodian present.

Preponderance of the Evidence

Preponderance of the evidence is an evidentiary standard used in a burden of proof analysis. The preponderance standard applies to the quality and weight of the evidence and is not specifically related to the quantity of evidence. Under the preponderance of the evidence standard, the burden of proof is met when the fact finder is convinced that a fact is more likely true, than not true.

SafeACT

SafeACT is a process for closing out specific assessments of CA/N when it is determined all children are safe and the assessment finding is "unsubstantiated".

Substantiated

According to IC 31-9-2-123, "substantiated, when used in reference to a CA/N report made under IC 31-33, means a determination regarding the status of the report whenever facts obtained during an assessment of the report provide a preponderance of evidence that child abuse or neglect has occurred".

Unsubstantiated

According to IC 31-9-2-132, "unsubstantiated, for purposes of IC 31-33 and IC 31-39-8-4, means a determination regarding the status of a report made under IC 31-33 whenever facts obtained during an assessment of the report provide credible evidence that child abuse or neglect has not occurred".

Forms and Tools

- [4.B Tool: Assessment Narrative](#)
- Assessment of Alleged Child Abuse or Neglect (SF 113) (311) – available in the case management system
- [Assessment Staffing Guide \(SF 56567\)](#)
- Child and Adolescent Strengths and Needs (CANS) Assessment – Available in the case management system
- [DCS Screening and Response Time Assessment \(SDM Tool\)](#)
- [First Steps Website](#)
- Initial Risk Assessment – Available in the case management system
- [Investigation Services](#)

- Preliminary Report of Alleged Child Abuse or Neglect (SF 114) (310) – available in the case management system
- [SafeACT Sharepoint](#)
- [Safe Assessment of Alleged Child Abuse or Neglect \(SF 57056\) \(311S\)](#)

Related Policies

- [2.30 Domestic Violence](#)
- [4.23 Initial Family Risk Assessment](#)
- [4.25 Completing the Assessment Report](#)
- [4.26 Determining Service Levels and Transitioning to Permanency Services](#)
- [5.19 Child and Adolescent Strengths and Needs \(CANS\) Assessment](#)
- [5.23 Diligent Search for Relatives/Kin and Case Participants](#)

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LEGAL REFERENCES

- [IC 31-9-2-14: “Child abuse or neglect”](#)
- [IC 31-9-2-123: “Substantiated”](#)
- [IC 31-9-2-132: “Unsubstantiated”](#)
- [IC 31-33: JUVENILE LAW: REPORTING AND INVESTIGATION OF CHILD ABUSE AND NEGLECT](#)
- [IC 31-33-8-1: Investigations by the department of child services; time of initiation, investigations of child care ministries](#)
- [IC 31-33-8-12: Classifying reports as substantiated or unsubstantiated](#)
- [IC 31-33-22-3: False reports; criminal and civil liability; notification of prosecuting attorney](#)
- [IC 31-39-8-4: Expungement of child abuse or neglect information](#)
- [IC 34-6-2-34.5: “Domestic or family violence”](#)

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PRACTICE GUIDANCE- DCS POLICY 4.22

Practice Guidance is designed to assist DCS staff with thoughtful and practical direction on how to effectively integrate tools and social work practice into daily case management in an effort to achieve positive family and child outcomes. Practice Guidance is separate from Policy.

Credibility of Evidence

Many factors affect the credibility of evidence. When making assessment findings, the credibility of each piece of evidence must be evaluated by considering factors such as, but not limited to:

1. A witness's ability and opportunity to observe what the witness has claimed;
2. The manner and conduct of the witness while speaking;
3. Any interest, bias, or prejudice the witness may have;
4. Any relationship the witness may have with other interested parties;
5. The reasonableness of the witness's testimony considered in the light of all the evidence heard;
6. Additional evidence and information that supports someone's prior statements or other evidence. This information makes the prior statement or other evidence it supports more credible than evidence that has not been verified or supported by independent sources; and
7. The witness is a professional source who may provide an opinion because of the witness's knowledge, skill, experience, training, or education. Consider the following when deciding how much weight to give a professional source opinion:
 - a. The witness's skill, experience, knowledge, and familiarity with the facts of this case;
 - b. The reliability of the information supporting the witness's opinions; and
 - c. The reasons for the opinions.

While a detailed description of a complex chain of events is beyond the capabilities of young children, they are able to give plausible and specific descriptions of traumatic situations that would normally be beyond their experience (e.g., sexual acts) and such statements should be taken seriously. Consultation with a Qualified Mental Health Professional (QMHP) is appropriate when considering emotional injury to the child.

Considerations in Requesting A Child In Need Of Services (CHINS) Petition

In contrast to a substantiation, a CHINS designation focuses on the condition of the child rather than on an act or omission (fault) by the parent, guardian, or custodian. A CHINS proceeding establishes whether a child's circumstances necessitate services that are unlikely to be provided without the coercive intervention of the court. The purpose of a CHINS adjudication is to protect the child, not punish the parent, guardian, or custodian. Every CHINS request must be made focusing on the needs of the child.

Considering Unsubstantiated CA/N History in Making an Assessment Finding

Documentation of unsubstantiated assessments will be maintained in electronic form until 24 years after the birth of the youngest child named as an alleged victim of CA/N in the DCS assessment report. DCS personnel will have access to the assessment. This documentation may be used in the assessment of a subsequent report concerning the same child or family; however, DCS may not rely solely on the unsubstantiated history to support substantiation. Unsubstantiated case documentation will not be available when it has been expunged.

First Steps

The Indiana First Steps program is provided through the Indiana Family and Social Services (FSSA) and is accessible to families in every county. This service uses professionals from education, health, and social services to provide coordinated early intervention resources. Families who are eligible to participate in First Steps have children under three (3) years of age who:

1. Are experiencing developmental delays, or
2. Have a diagnosed physical or mental health condition that has a high probability of resulting in a developmental delay.

While most First Steps referrals originate from doctor's offices, hospitals, or social service agencies such as DCS, a parent may also initiate a "self-referral". For further information, visit the First Steps website.

Parental Drug Use

A single positive drug screen or single instance of drug use outside the presence of the child should not be considered an automatic CHINS. All the information gathered during the assessment, including the impact the drug use has on the child and home environment, should be carefully considered before making a determination. Each situation should be evaluated on a case-by-case basis, taking into consideration the needs of the child as well as the actions of the parent, guardian, or custodian.

Presumption of CA/N

Some injuries presume CA/N by their nature. For example, a child who has suffered a subdural hematoma, internal injuries, bone fractures, or burns as the result of parental action or inaction may be presumed to have been abused and/or neglected. Other injuries do not presume CA/N by their nature. For example, bruises or welts as the result of parental action or inaction may or may not constitute CA/N.

Whether the incident constitutes CA/N depends upon the extent of the injury, the location of the injury, the age of the child, and other pertinent factors. These factors may include, but are not limited to the child's:

1. Developmental age;
2. Maturity;
3. Ability to make sound judgment; and
4. Ability to care for or protect oneself.

Although parental responsibility for the provision of protection, supervision, food, shelter, clothing, education, and a sanitary environment continues until the child turns 18 years of age or is a legally emancipated minor, the need for the parent, guardian, or custodian to provide these things decreases as the child's own ability to protect oneself or to obtain and/or provide these necessities increases.

Utilization of SafeACT

FCMs are eligible to independently call SafeACT upon completion of an assessment. Specially trained SafeACT Supervisors are available from 8:00 AM to 4:00 PM (local time), Monday through Friday (excluding holidays) to staff the assessment and assist with documentation to close the assessment immediately.

Substantiating on an Unknown/Undetermined Perpetrator

In situations where there is a preponderance of evidence to show CA/N did occur and the alleged perpetrator denies allegations or places blame on someone or something else, it is unacceptable to simply substantiate CA/N on an unknown perpetrator. In situations of sexual abuse where an alleged perpetrator is unknown and does not live in the household, it may be acceptable to substantiate on an unknown perpetrator if the FCM is unable to locate or identify the alleged perpetrator.

Note: When attempting to identify an unknown alleged perpetrator and identifying information is available, a referral should be made to Investigation Services.

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