

**November
2023**

**CHAMPAIGN COUNTY
ABUSE AND NEGLECT
MEMORANDUM
OF
UNDERSTANDING**

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INTRODUCTION

The Champaign County Memorandum of Understanding (hereinafter referred to as MOU) sets forth duties required by the Ohio Revised Code (ORC) 2151.421 (K)(2) (child abuse and neglect) and ORC 5126.058 (developmental disabilities).

Following agreement by signatories, CCDJFS will submit this MOU to the Champaign County Board of County Commissioners for approval. Once approved by the Champaign County Commissioners, CCDJFS will submit a copy of the MOU to the Ohio Department of Job and Family Services (ODJFS) for compliance determination. This MOU is considered effective on the date ODJFS determines the MOU to be compliant. Should the MOU be considered non-compliant by ODJFS review, CCDJFS will develop and submit a compliance plan within sixty (60) days of the non-compliance determination. This MOU will be reviewed on a biennial basis.

The Director of the Champaign County Department of Job & Family Services (CCDJFS) or designee, or the Superintendent of the Champaign County Board of Developmental Disabilities (CCBDD) or designee, shall convene a meeting of mandated subscribers when any changes are required to the operating procedures or responsibilities of mandated subscribers. Any amendment to the MOU which changes the operating responsibilities or procedures of mandated subscribers shall require the convening of all mandated participants for clarification and approval unless the change is necessitated by new or revised state or federal laws or rules. When the law changes, the MOU will automatically be drafted by the CCDJFS Director and approved by the Champaign County Prosecutor and copies of the changes mailed to all mandated subscribers for review and signature.

A copy of this MOU will be on file at the Champaign County Family Court and will be available at the Champaign County Department of Job & Family Services (CCDJFS), the Champaign County Board of Developmental Disabilities (CCBDD), as well as all mandated and voluntary participants. This MOU will be made available on the CCDJFS website and will be provided to any other individuals, organizations, or agencies upon request.

If a mandated subscriber is replaced through election or appointment, the Director of Champaign County Department of Job & Family Services (CCDJFS) shall provide the new representative with a copy of the current MOU. The Director will seek the endorsement of any new representative and of all mandated participants. Should any mandated participant refuse to endorse the MOU, a letter of explanation shall be attached to and be filed with the MOU.

Failure to follow procedures set forth in this MOU shall not be grounds for and shall not result in the dismissal of any charges or complaints arising from any reported case of child abuse or neglect or the suppression of any evidence obtained as a result of any reported child abuse or neglect. This MOU shall not be construed as giving any rights or grounds for appeal or post-conviction relief to any person.

PURPOSE AND GOALS

This MOU sets forth the normal operating procedures employed by the concerned officials in the execution of their respective responsibilities under the following Ohio Revised Codes:

- A. ORC 2151.421 (K)(2): Reporting child abuse and neglect; investigations and Memorandum of understanding
- B. ORC 2151.3516, ORC 2151.3517 and ORC 2151.353 Deserted Child
- C. ORC 2919.21(C): Nonsupport or contributing to the nonsupport of dependents
- D. ORC 5153.175: Reporting of abuse or neglect of a day-care license applicant
- E. ORC 5153.176: Reports of abuse and neglect involving licensed educators
- F. ORC 2919.22 (B)(1) Endangering children
- G. ORC 2919.25 Domestic violence
- H. ORC 2919.23 (B) Interference with custody
- I. ORC 2919.24: Contributing to unruliness or delinquency of a child
- J. ORC 5126.058: County Board of Developmental Disabilities and Memorandum of Understanding
- K. OAC 5101:2-42-89: Death of a child in custody
- L. OAC 5101:2-33-26: Child Abuse and Neglect Memorandum of Understanding
- M. OAC 5101:2-36-12: Requirements for cross – referring reports of child abuse/neglect.
- N. OAC 5123-17-02 DD incidents adversely affecting health and safety

The goals for the MOU are as follows:

1. To ensure prompt reporting and to clarify roles and responsibilities of timely, comprehensive investigation and/or assessment of allegations of child abuse or neglect.
2. To ensure prompt reporting and to clarify roles and responsibilities of timely, comprehensive investigation of abuse or neglect to individuals served by the Board of DD.
3. To provide protection and aid to victims and their families.
4. To bring about prosecution and treatment of the perpetrators of child abuse and neglect.
5. To identify a coordinated system of responding to reports involving individuals suspected of contributing to children becoming dependent, unruly or delinquent.
6. To identify a coordinated system for receiving and responding to reports of individuals who contribute to children leaving the custody of an individual or department without legal consent.

7. To identify a coordinated system of responding to reports of missing children.
8. To clarify standards and procedures for emergency or non-emergency removal and placement children.
9. To establish a system to notify the Champaign County Prosecuting Attorney if any mandated reporter fails to report.
10. To establish a system to notify the Champaign County Prosecuting Attorney when there is an unauthorized dissemination of information of a child abuse/neglect report.
11. To eliminate all unnecessary interviews of victims who are the subject of reports of abuse/neglect and when feasible provide for only one interview of a victim who is the subject of any of the above types of reports.
12. To ensure interagency timely communication of investigative interviews, facts, and findings.

SUBSCRIBERS TO THE MOU

Mandated by Ohio Revised Code to participate in this MOU include the following:

1. Champaign County Department of Job and Family Services
2. Champaign County Board of Developmental Disabilities
3. Champaign County Family Court
4. Champaign County Prosecutor's Office
5. Champaign County Municipal Prosecutor
6. Champaign County Sheriff's Office
7. Urbana Police Division
8. St. Paris Police Department
9. Mechanicsburg Police Department
10. North Lewisburg Police Department

This MOU includes several participants who are not mandated:

1. Champaign County Health District
2. Urbana Family Medicine and Pediatrics
3. Madison-Champaign Educational Services Center
4. Mental Health, Drug & Alcohol Services Board of Logan & Champaign Counties
5. Urbana Fire Division
6. Champaign County Coroner

REPORTS OF CHILD ABUSE AND NEGLECT

1. The following professionals (acting in their official or professional capacity) who know or have reasonable cause to suspect, that a child¹ has suffered or faces a threat of suffering child abuse or neglect, are mandated by law (ORC 2151.421) to immediately report that knowledge to the Champaign County Department of Job Family Services (CCDJFS) or a Champaign County Peace Officer:
 - Attorney* (under limited circumstances²)
 - Physician* (under limited circumstances²)
 - Cleric* (under limited circumstances³)
 - Hospital Intern
 - Resident Physician
 - Dentist
 - Podiatrist
 - Practitioner of branch of medicine under 4731.15
 - Registered Nurse
 - Licensed Practical Nurse
 - Visiting Nurse
 - Employee of a home health agency
 - Health Care professional
 - Licensed Psychologist
 - Licensed School Psychologist
 - Marriage and Family Therapist
 - Speech Pathologist or Audiologist
 - Coroner
 - Administrator or employee of a child day care center
 - Administrator or employee of a residential camp or child day camp
 - Administrator or employee of a private, nonprofit therapeutic wilderness camp
 - Administrator or employee of a certified childcare agency

¹ "Child" means any person under eighteen years of age or a person under twenty-one years of age who has a physical or mental impairment; mental or psychological disorder such as an intellectual disability; physiological disorder or condition.

² An attorney or physician is not required to make a report of abuse or neglect concerning any communication the attorney or physician receives from the client or patient if protected under ORC 2317.02 (A)(B). However, attorney-client and physician-patient testimonial privilege is deemed to have been waived if the client or patient at the time of the communication is either a child under eighteen years of age or a person under twenty-one years of age with a developmental disability or physical impairment and the abuse or neglect does not arise out of the client's or patient's attempt to have an abortion under ORC section 2151.85.

³ Clerics are not required to make a report if the cleric receives a disclosure from a penitent if protected under ORC (C). However, cleric-penitent testimonial privilege is deemed to have been waived if the penitent at the time of the communication is either a child under eighteen years of age or a person under twenty-one years of age with a developmental disability or physical impairment and the abuse or neglect does not arise out of the client's or patient's attempt to have an abortion under ORC section 2151.85, unless the disclosure of the communication the cleric receives from the penitent is in violation of the sacred trust. However clerics must report abuse or neglect by another cleric, church volunteer, faith leader, official or delegate if they know or have reasonable cause to believe based upon facts that would cause a reasonable person in a similar position to believe that a child has suffered or faces a threat of suffering any physical or mental wound, injury, disability or condition of a nature that reasonably indicates abuse or neglect of the child.

- Administrator or employee of a public or private children services agency
 - School teacher
 - School employee
 - School authority
 - Person engaged in Social Work or professional counseling
 - Agent of a county humane society
 - Person rendering spiritual treatment through prayer under a recognized religion
 - Employee of a county department of job and family services
 - Superintendent or regional administrator employed by the department of youth services
 - County Developmental Disabilities Superintendent, board member, investigative agent or employee
 - Employee of a facility or home that provides respite care
 - Employee of a home health agency
 - Employee of an entity that provides homemaker services
 - A host family
 - A foster caregiver
 - A person performing the duties on an adoption assessor
 - A third party employed by a public children services agency to assist in providing child or family related services
 - A CASA/GAL
 - Peace Officer
2. In addition to the above mandated reporters, anyone who knows or has reasonable cause to suspect that a child has suffered or faces a threat of abuse or neglect, may report to Champaign County DJFS or to a Champaign County Peace Officer.
3. If it is suspected that a person knowingly makes or causes another to make a false report, the information will be reported to the Champaign County Prosecutor's Office, pursuant to ORC 2921.14.
4. If it is suspected that a person has failed to report child abuse and/or neglect, the information will be reported to the Champaign County Prosecutor's Office. Failure to report suspected child abuse and/or neglect may result in criminal charges or civil liability in the form of compensatory or exemplary damages.

PROCEDURE FOR RECEIVING REPORTS OF CHLD ABUSE AND NEGLECT

1. Champaign County Department of Job & Family Services (CCDJFS) or any Champaign County Peace Officer pursuant to the Ohio Revised Code section 2151.421(K)(2) shall receive referrals of child abuse and/or neglect twenty-four hours a day, seven days a week.
2. During business hours of 8:00 am until 4:30 pm Monday-Friday, the assigned CCDJFS intake staff will receive calls of abuse and neglect at the agency business number of 937-484-1500.
3. Referrals may be made to CCDJFS outside of above referenced business hours or on holidays by calling the Champaign Countywide Dispatch at 937-653-3409 and requesting the CCDJFS worker on call.
4. Referrals may also be made to any Champaign County law enforcement agency, including the Champaign County Sheriff's Office at 937-652-1311, the Urbana Police Division at 937-652-4350, the St. Paris Police Department at 937-663-4468, the Mechanicsburg Police Department at 937-834-3303, the North Lewisburg Police Department at 937-653-3409, or the Champaign Countywide Dispatch at 937-653-3409.
5. In the event of an interruption of telephone or cell phone service during a natural or man-made disaster, referrals may be made via emergency response procedures contained in the Champaign County Emergency Management and County Operations Plan.
6. Each referral of suspected abuse or neglect is confidential. The information shared with the subscribers of this MOU is made available only for the purposes of investigation, treatment or case management of suspected abuse and/or neglect of a child. No person shall permit or encourage the unauthorized dissemination of contents of any report or referral made pursuant to this MOU.
7. The identity of the referral source shall not be released by CCDJFS unless ordered to do so by a court of law or shall be released to law enforcement or the Prosecutor's Office for purposes of the investigation of false reporting. When determined by the Director of CCDJFS or designee, the reporting source shall be released under specific circumstances in a criminal investigation in accordance with OAC 5101:2-33-21. If a referral source identity is made known under the above conditions, the referral source will be informed of the release by CCDJFS.
8. Every effort shall be made to have the Champaign County Child Abuse Response Team (CART) review every report of child physical abuse that involves two or more areas of discipline on the team (i.e. Children Services and Law Enforcement) as well as all reports of sexual abuse that are reported to CCDJFS or any Champaign County Peace Officer. The mission of CART is to investigate allegations of child abuse through a coordinated effort designed to protect

children and families while seeking the truth and administering justice. CART's ultimate goal is to establish a collaborative action plan that utilizes an interdisciplinary approach advocating early intervention, protection and safety. Failure of a person required to report child abuse or neglect under their official or professional capacity shall be reported to the Champaign County Prosecutor's Office for consideration of charges. Violators found guilty are subject to penalties of a misdemeanor of the fourth degree and in some cases a misdemeanor of the first degree in accordance with ORC 2151.99.

9. According to ORC 2151.421, when any person acting in an official or professional capacity "knows, or has reasonable cause to suspect based on facts that would cause a reasonable person in a similar position to suspect" child abuse or neglect, that person is mandated to immediately report the alleged child abuse and neglect to the Champaign County Department of Job and Family Services or to a county peace officer in the county where the child resides or where the abuse or neglect is occurring or has occurred.

CHILD ABUSE AND NEGLECT INVESTIGATIVE RESPONSIBILITIES

Interagency reports of serious abuse or neglect require cooperation and timely sharing of information to assure the safety of children, and/or identified individuals with developmental disabilities. Cooperation and information sharing is needed to appropriately address important case developments and to ensure culpable individuals are held responsible.

CCDJFS Social Services Department's primary role in this process is to assure maximum protection for the child and to clearly understand the circumstances surrounding the reported abuse or neglect so that the overall well-being of the child can be assessed through determining whether medical and therapeutic treatment is necessary and evaluating a safe placement for the child. The role of the Champaign County Board of Developmental Disabilities (CCBDD) is to cooperate with screened in CCDJFS Children's Services investigations and/or assessments or with Law Enforcement criminal investigations involving children with developmental disabilities. Law enforcement's role in this process in addition to the above is to uphold the Ohio Revised Code and to bring to justice individuals in violation of the law.

In order to assure a child's safety is not compromised, it is agreed that should the particular law enforcement agency or Children's Services representative require urgent assistance of the other, upon request, the other agency will respond in person within one hour. It shall be considered an urgent situation if one of the following exists.

- An allegation of abuse or neglect meeting the Champaign County/Ohio Department of Job and Family Services (ODJFS) Guidelines (Appendix D) has been made and the child is at risk of imminent harm.
- The alleged abuser identified in a child abuse or neglect allegation is in the household or has on-going contact with the alleged child victim and the victim has confirmed sexual abuse or strong evidence of sexual abuse exists.
- The alleged abuser is in the household or has ongoing contact with the alleged child victim of confirmed serious physical abuse.
- The caretaker involved in a child abuse or neglect report is unwilling or unable to fully protect the child living in the household and serious harm is likely without intervention.
- Situations may arise where a child is not found to be at imminent risk of harm at the time of the initial report, however, based on the nature of the circumstances, an immediate interview may be deemed in the best interest of the criminal investigation. In situations where a collaborative decision has been made of the need for an immediate interview of the child victim, CCDJFS will respond in an expedited manner that meets the needs of the criminal investigation.

**CHAMPAIGN COUNTY DEPARTMENT OF JOB AND FAMILY SERVICES
INVESTIGATIVE RESPONSIBILITIES**

It is agreed that Champaign County Department of Job & Family Services shall:

1. Respond to emergency and non-emergency reports of child abuse and neglect by:
 - a. determining whether an incoming referral allegation meets the criteria outlined in
 - i. ORC 2151.031 Abused Child
 - ii. ORC 2151.03 Neglected Child,
 - iii. ORC 2151.04 Dependent Child
 - iv. OAC Chapter 5101:2-36-01
 - v. Champaign County/Ohio Department of Job and Family Services (ODJFS) Guidelines (Appendix D) for an investigation and/or assessment appropriate for Child Protective Services.

In making this determination Champaign County Department of Job and Family Services may consider historical information available to the agency. If information is insufficient or does not meet the ODJFS Screening Criteria, the referent will be given informational resources to potentially assist the family;

- b. accepting twenty-four hours a day, seven days per week, from any reporting source, as reports for investigation and/or assessment, those referrals meeting screening criteria for investigation and/or assessment, services and/or intervention of alleged child abuse and neglect including those alleging risk to children due to exposure to suspected illegal chemical laboratories;
- c. accepting as reports Family in Need of Services requests by custodians for family assessment or interview of their child(ren) when services are needed;
- d. commencing an investigation and/or assessment within one hour of the report being screened in if the agency determines imminent risk to the child's life and safety or within 24 hours if no immediate safety concerns are reported;
- e. refer to law enforcement or, in some cases if law enforcement declines to assist, to a neighboring county children's services agency for a "third party investigation", any reports of child abuse or neglect (including death of a child in the custody of CCDJFS as outlined in 5101:2-42-89) involving a conflict of interest according to the OAC 5101:2-36-08 for one or more of the following:
 - i. any employee of an organization or facility that is licensed or certified by the Ohio department of job and family services (ODJFS) or another state agency and supervised by Champaign County Department of Job and Family Services

- ii. foster caregiver, pre-finalized adoptive parent, adoptive parent, relative, or kinship caregiver who is recommended, approved, or supervised by the Champaign County Department of Job and Family Services
 - iii. an employee or an agent of Champaign County Department of Job and Family Services, or agent of Ohio Department of Developmental Disabilities or Ohio Department of Job and Family Services as defined in ORC Chapter 5153.
 - iv. a “ type B family day care home or type A family child care home” licensed by the Ohio department of job and family services (ODJFS) when Champaign County Department of Job and Family Services has assumed the powers and duties of the county children services function defined in Chapter 5153. of the Revised Code.
 - v. any authorized person representing Champaign County Department of Job and Family Services who provides services for payment or as a volunteer
 - vi. a foster caregiver or employee of an organization or facility licensed by ODJFS when the alleged child victim is in the custody of, or receiving services from, Champaign County Department of Job and Family Services
 - vii. a report, involving mandated reporters or other key community personnel, in which the agency determines that a third-party investigation would be appropriate in the interest of justice
 - f. ensure child safety and not compromise the child protective assessment/investigation while concurrently assisting law enforcement with the criminal investigation;
 - g. promptly refer to the CCBDD any reports of incidents involving individuals age 18 or older receiving or in need of DD services when abuse, neglect or exploitation is alleged. Agree upon steps for completion of a joint investigation for individuals between 18-21 years of age.
2. Request law enforcement assistance for the following situations, but not limited to when:
- a. there is reason to believe the child is in immediate danger of serious harm;
 - b. there is reason to believe the worker is or will be in danger of harm;
 - c. there is reason to believe that a crime is being committed or has been committed against a child;
 - d. an exigent circumstance exists;
 - e. a worker must conduct a home visit after regular CCDJFS business hours and a law enforcement escort is recommended as a standard operating procedure;

- f. CCDJFS is removing a child from his or her family via an order of the Court and the assistance of law enforcement is needed as the worker has reason to believe the family will challenge the removal;
 - g. CCDJFS is working with a client who has a propensity toward violence and the assistance of law enforcement is needed to ensure the safety of all involved;
 - h. CCDJFS is working with a family that has historically threatened to do harm to CCDJFS staff.
3. Conduct an investigation and/or assessment to determine:
- a. immediate safety concerns and ensure the child's protection while keeping the child within the family, extended family, or identified non-relative kin if at all possible;
 - b. if child maltreatment has occurred and/or underlying factors leading to concerns around the allegations of abuse/neglect;
 - c. if there is risk of future maltreatment;
 - d. if future agency services are needed to address the effects of child maltreatment and reduce the risk of future maltreatment.
4. Investigate and/or assess reported cases of abuse/ neglect or dependency by determining:
- a. circumstances surrounding the injury, abuse, or neglect;
 - b. the cause thereof;
 - c. the person(s) responsible;
 - d. the need to protect the child from further harm.
5. Such an investigation and/or assessment shall include, but is not limited to:
- i. a face-to-face interview with the alleged child victim/child subject of the report and in serious cases of abuse or neglect, interviews shall be audio or video recorded whenever possible;
 - ii. when deemed appropriate under a county approved forensic interviewing protocol, the human anatomy tool (Appendix #C) shall be used to collect information from an alleged child victim of sexual abuse;
 - iii. the interview information shall be shared with the investigating Law Enforcement agency and the Champaign County Prosecutor's Office;

- iv. a face-to-face interview with the alleged perpetrator/adult subject of the report unless the perpetrator/adult subject of the reports are alleged to have committed a criminal act and thus will be interviewed by the investigating Law Enforcement Agency;
- v. a face-to-face interview with the child's caretaker(s) unless the caretaker is alleged to have committed a criminal act and thus will be interviewed by the investigating Law Enforcement Agency;
- vi. a safety assessment using ODJFS Safety Assessment factors and considerations;
- vii. if indicated, develop a written Safety Plan with the family to assure immediate safety needs of the child;
- viii. conducting a Family Assessment using the ODJFS Family Assessment tool to evaluate the potential for future harm and the family's strengths and needs for services;
- ix. arranging for a medical examination of the child and if necessary, accompany the child and protective caretaker to the hospital for a medical exam;
- x. immediately contacting law enforcement if the abuse and/or neglect report alleges a criminal offense and/or the perpetrator has unprotected access to the child;
- xi. coordinating appropriate services for the family;
- xii. providing necessary information for a filing with the Champaign County Family Court for an Ex Parte Emergency Custody Order, Court Ordered Protective Supervision and/or Temporary Custody;
- xiii. provide notification to other DJFS program areas (cash assistance, food assistance) of the removal of a child from the household;
- xiv. provide notification to the CCDJFS worker assigned to determine day care services when the report involves an individual who is a "type B family day care provider" (*OAC rule 5101:2-36-12*);
- xv. promptly referring to law enforcement with request for information to be entered into the National Crime Information Center (NCIC) database and the Ohio Attorney General Missing Children Clearinghouse (1-800-325-5604) when a child is missing from his or her family, and to the National Center for Missing and Exploited Children (NCMEC) if the child is in the custody of CCDJFS;
- xvi. promptly completing a Protective Service Alert, when the whereabouts of a child or family is unknown it is determined that the child is in immediate danger of serious harm or during the course of the provision of protective services (*OAC 5101:2-36-14*);
- xvii. promptly reporting to law enforcement when a child is reported to have run away or left the care of a department or individual without consent;
- xviii. promptly reporting to law enforcement and determine need for third party or joint investigation upon receipt of a report of the death of a child who is in the legal custody of Champaign County Department of Job and Family Services (*5101:2-33-14 (E)(1)*);
- xix. contact law enforcement prior to the completion of the report disposition to determine the status of the criminal investigation and document the status of the criminal investigation in the case record.

6. Immediately refer to the law enforcement agency with jurisdiction the following information:
 - knowledge gained of individuals who aid, abet, induce, cause, encourage, or contribute to a child or a ward of the Family Court toward becoming an abused, dependent or neglected child;
 - knowledge gained of individuals who aid, abet, induce, cause, encourage, or contribute to a child or a ward of the Family Court toward becoming an unruly or delinquent child, or leaving the custody, department, or public or private institution without the legal consent of the custodian;
 - knowledge gained of a missing child;
 - knowledge gained of a methamphetamine or other dangerous chemical lab site;
 - knowledge gained that a child may be a victim of human trafficking.
7. Conduct a joint investigation and/or assessment with the law enforcement agency having jurisdiction when the CCDJFS has knowledge of:
 - a child death suspected to be a result of abuse or neglect;
 - a child who appears to be in imminent danger;
 - a child who is in imminent danger as a result of a sexual assault and/or is being exploited for pornographic purposes or for prostitution;
 - severe physical abuse in which the child requires medical treatment;
 - caregivers who are manufacturing controlled substances in/around the home;
 - caregivers dealing/using controlled substances and the children are exposed to the drug or drug residue;
 - evidence learned during the course of an investigation and/or assessment which suggests the possibility of a criminal offense;
 - a referral made by a Peace Officer to conduct a child abuse or neglect investigation and/or assessment of children residing in the home of a parent or caretaker being investigated for alleged crimes under ORC 2919.22 and ORC 2919.24;

- a child alleged to be a victim of human trafficking.
8. Respond according to the ORC 2151.3517 when a child under 31 days old is left in accordance with the law by:
 - a. taking necessary actions to protect the child's health or safety, including taking possession of the infant;
 - b. making available to the parent documents on which medical information regarding the child can be gathered;
 - c. making available to the parent written materials describing services available to assist parents of newborns;
 - d. commencing a child abuse/neglect investigation if the child is suffering from a condition that reasonably indicates abuse or neglect.
 9. Respond to allegations of the alleged withholding of medically indicated treatment from a disabled infant with life-threatening conditions by doing the following:
 - a. Prepare for response to cases of alleged withholding of medically indicated treatment from a disabled infant with life threatening conditions by contacting Mercy Health- Urbana Hospital, in Urbana, Ohio upon any revision of the MOU to determine if a committee for reviewing disabled infants with life threatening conditions has been established and to obtain the name, address, and telephone number of the facility administrator.
 - a. Upon receipt of a referral from any other hospital, gather information about whether that facility has a committee for reviewing disabled infants with life threatening conditions and to obtain the name, address, and telephone number of the facility administrator.
 - b. Review within one hour the information received from the referral source with the appropriate health care facility designee to determine if there is a need for initiation of assessment/investigation.
 - c. Respond within one hour of a screening decision by contacting the appropriate health care facility's administrator to obtain information regarding the condition of the infant.
 - d. Respond within one hour to reports alleging that a disabled infant with life-threatening conditions, whose legal parent/custodian resides in Champaign County, is a neglected child due to withholding of appropriate nutrition, hydration, medication, or medically indicated treatment under OAC 5101:2-36-07 by:
 - providing verbal notification to the disabled infant's parent that the agency has received the report alleging the child is not receiving medically indicated treatment;

- in cooperation with a medical consultant to review the infant's records and conduct interviews of the attending physician and health care facility staff to determine:
 - measures taken to provide medically indicated care;
 - if life support will be sustained during the assessment/investigation;
 - condition and risk to the infant;
- plan to convene or adopt the recommendations of a health care facility review committee;
- pursue any legal remedies that may be necessary to insure indicated treatment;
- discontinue investigative activities if there is sufficient information to indicate the infant will continue to receive medically indicated treatment;
- if neglect is determined, continue face to face interviews with parents and complete an assessment/investigation and seek consent to provide, medically indicated treatment including assistance from the Champaign County Prosecutor's Office if consent is refused;
- monitor the case to assure continued appropriate medically indicated treatment is being provided;
- assist the parents with obtaining necessary services for the infant.

10. Participate in Champaign County's multidisciplinary team - Champaign County Child Abuse Response Team (CART) by doing the following:

- a. Training all investigative social services workers to utilize application of a Champaign County Prosecutor's Office approved forensic interviewing protocol.
- b. Each component of the protocol may be modified where necessitated by the specific circumstances of the interview, including but not limited to, the age and cognitive capacity of the alleged child victim, as well as the circumstances surrounding the opportunity to obtain an interview of the child victim.
- c. Interviews should generally consist of open-ended questions coming from the child's free recall memory, however deviations from the protocol follow in these examples:
 - i. A single video recorded interview by a trained forensic interviewer is the preferred method for interviewing a child victim of sexual or severe physical abuse in which the child requires medical treatment. However, the trained interviewer may not abandon the prospect of interviewing a child if a video recording system is not operable and they believe that critical evidence may be sacrificed by waiting (e.g. preserving evidence of the child's

- state of mind, familial pressures on the child to recant the allegations, etc.).
- ii. Although a single interview of the child victim is preferred, CART recognizes that situations may arise where a second interview of the child is appropriate (e.g. the child discloses additional information to a caregiver or friend subsequent to the victim's initial interview with the interviewer, etc.).
 - iii. An emergency might evolve or exist necessitating the requirement for obtaining immediate information in order to protect the health, safety or welfare of the child victim/child subject of the report or a related family or household member. As such, differing locations for conducting interviews and additional types of questioning styles may be employed by the interviewer.
- d. Assure exchange of information critical to child safety, family assessment and concurrently assisting law enforcement with their criminal investigation.
 - e. Assign supervisory and investigative staff to attend bi-weekly CART meetings.
 - f. Participate in joint trainings in investigative skill and team building development.
 - g. Demonstrate flexibility, problem solving and exploring of ideas to further the goals of the team.
11. Promptly report to the Champaign County Prosecutor or the Champaign County Municipal Court Prosecutor when the agency obtains knowledge that there has been unauthorized dissemination of confidential child abuse investigation information.
 12. Promptly report to the Champaign County Prosecutor according to OAC 5101:2-36-05 if there is reason to believe the alleged perpetrator has not been investigated by law enforcement.
 13. Contact the Champaign County Humane Agent/Champaign County Sheriff's Office for the handling of abused or neglected animals discovered during a child abuse/neglect investigation.
 14. Respond to reports of a death of a child by using the afore identified procedure for handling serious cases of abuse or neglect. Participate in exchange of information according to ORC 3701.045 Child fatality review boards conducting reviews.
 15. Share OAC 5101:2-42-90 required information to the county board of education for any youth in the custody of Champaign County who is enrolled outside of Champaign County.

16. Report to the Office of Professional Conduct in the Ohio Department of Education (ODE) pursuant to ORC 5153.176 notice of the initiation of an investigation against an educator and the final disposition of the investigation. If further information is requested, Champaign County Department of Job and Family Services will determine through the Champaign County Prosecutor whether criminal charges will be filed and what information can be released to ODE.

LAW ENFORCEMENT INVESTIGATION OF CHILD ABUSE AND NEGLECT

It is agreed that Champaign County Peace Officers shall:

1. Respond to emergency and non-emergency reports of child abuse/neglect or of an adult with developmental disabilities by:
 - a. assuring the safety and well-being of the alleged child victim or adult with disabilities, and any other children residing in the home or accessible to the alleged perpetrator;
 - b. interviewing suspects alleged to have committed crimes against a child or disabled adult;
 - c. conduct interviews of additional witnesses as relevant to the reporting circumstances per the request of the Champaign County Prosecutor's Office;
 - d. act as the lead agency in the collection of forensic evidence related to criminal investigations and coordinate with the necessary facilities to obtain and store such evidence;
 - e. accompany Champaign County Department of Job and Family Services caseworkers when:
 - i. safety concerns for a caseworker exist;
 - ii. a child is in immediate danger;
 - iii. there is reason to believe a crime is being committed, or has been committed, against a child;
 - iv. Champaign County caseworkers are denied access to the home and there is reason to believe children are in immediate danger;
 - v. assistance is requested by Champaign County DJFS caseworker when executing an emergency custody order for removal of children, or;
 - vi. due to the immediacy of the situation Champaign County DJFS is unable to obtain a court order authorizing the emergency removal;
 - vii. a parent or legal guardian refuses to permit a child interview in a serious child abuse or neglect investigation.
2. Confer with Champaign County Department of Job and Family Services on-call caseworkers when law enforcement removal of children is contemplated.

3. Respond to request for a “third party investigation” (OAC 5101:2-36-08) of child abuse or neglect when the alleged child victim resides in a home licensed by Champaign County Department of Job and Family Services, the child is in the custody of the Champaign County Department of Job and Family Services, or the investigation involves an employee of the agency or an employee’s immediate family.
4. Respond to reports of abuse, neglect, or exploitation involving individuals with disabilities by investigating and referring for prosecution if necessary. Communicate interviews, facts, and findings with joint CCBDD or CCDJFS Children’s Services investigators in a timely manner, as applicable.
5. Enter information for missing children in CCDJFS custody into the National Crime Information Center (NCIC) database and assist CCDJFS with location efforts. Work collaboratively with the National Center for Missing and Exploited Children (NCMEC) staff if contacted regarding a missing child in CCDJFS custody.
6. Report incidents of child abuse and neglect to Champaign County Department of Job and Family Services, including incidents of Domestic Violence, under ORC 2919.25 when children are harmed by or witness to incidents of domestic violence.
7. Contact the Champaign County Humane Agent/Champaign County Sheriff’s Office for the handling of abused or neglected animals discovered during a child abuse/neglect investigation.
8. Provide a report to Champaign County Department of Job and Family Services of conclusions reached in a child abuse or neglect criminal investigation referred by Champaign County Department of Job and Family Services, within 60 days of referral. If an ongoing criminal investigation prevents a report of conclusion, a preliminary report will be provided outlining investigative activities.
9. Provide a report to CCBDD of conclusions reached in an abuse or neglect criminal investigation regarding a child or adult with disabilities within 45 days of referral. If an ongoing criminal investigation prevents a report of conclusion, a preliminary report will be provided outlining investigative activities.
10. Participate in Champaign County’s multidisciplinary team - Champaign County Child Abuse Response Team (CART) by:
 - a. interviewing alleged perpetrators of criminal child abuse and neglect actions;
 - b. attending bi-weekly CART meetings;
 - c. participating in joint trainings in investigative skill and team building development;
 - d. demonstrating flexibility, problem solving and exploring of ideas to

further the goals of the team.

11. If person making the report is identified as a part of a criminal investigation, maintain confidential the name of the person making the child abuse or neglect report under ORC 2151.421(I)(1).
12. Respond to crimes against children under ORC 2919.22 and ORC 2919.24 to address criminal charges against individuals alleged to have endangered children or contributed to their unruliness or delinquency. In the course of investigating allegations, any encounter of the following shall be reported to the Champaign County Department of Job and Family Services and to the Champaign County Prosecutor's Office:
 - a. Abuse of a child
 - b. Torture or cruel abuse of a child
 - c. Excessive corporal punishment
 - d. Unwarranted discipline seriously impairing or delaying a child's mental health or development
 - e. Reports of an adult involving a child in obscene, sexually oriented matters or nudity
 - f. Reports of children residing within 100 feet of a methamphetamine lab or other drug operation
 - g. Reports of children in a vehicle when an individual is found to be operating a vehicle while under the influence of drugs or alcohol
13. Under ORC 2151.3516, respond by taking possession of a child under 31 days of age deemed to be deserted in order to assure necessary protection for the child's health and safety. Immediately notify CCDJFS of the deserted child so that arrangements can be made for the child's custody and care.

**CHAMPAIGN COUNTY BOARD OF DEVELOPMENTAL DISABILITIES
CHILD ABUSE AND NEGLECT INVESTIGATIVE RESPONSIBILITIES**

It is agreed that Champaign County Board of Developmental Disabilities shall:

1. Respond to reports of abuse, neglect, exploitation or misappropriation of individuals pursuant to OAC 5123-17-02, (Addressing major unusual incidents and unusual incidents to ensure health, welfare, and continuous quality improvement) and ORC 2151.421 (Reporting child abuse or neglect) by:
 - a. receiving allegations of sentinel events from mandated reporters as identified in ORC 5101.61 as well as from private citizens, and family members, regarding individuals with disabilities;
 - b. respond to reports made to CCBDD staff Monday through Friday during business hours of 8:00 a.m. until 4:00 p.m. at the agency business number of 937-653-5217 and be available 24 hours per day, 7 days per week to receive and respond in accordance with OAC 5123-17-02. Afterhours reports can be made by calling 937-653-5217 and pressing 1 to be forwarded to the on-call SSA.
2. Upon identification or notification of alleged abuse, neglect, exploitation or misappropriation (i.e. ORC 2151.03 and ORC 2151.031 child abuse/neglect and/or abuse/neglect of an individual with disabilities under the age of twenty-one years):
 - a. immediately take necessary steps and/or ensure that there have been reasonable measures taken to protect the health and safety of the at-risk individual;
 - b. immediately notify CCDJFS and law enforcement agency having jurisdiction.
3. A DD investigative agent shall:
 - a. immediately commence, conduct and document an investigation according to the *Standards for Conducting Protocol Investigations* (i.e. 5123-17-02 Appendix A*) except when the Ohio Department of Developmental Disabilities (DODD) directs investigations, or when an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID), law enforcement agency having jurisdiction, or CCDJFS is conducting the investigation;
 - b. provide assistance to ICF/IID, CCDJFS, and law enforcement for interviews, as needed, and/or the agent may utilize the ICF/IDD, CCDJFS and/or law enforcement interviews and other information to meet the requirements of the rule when these entities is/are the investigator(s);

- c. commence an investigation that was declined by law enforcement or CCDJFS within twenty-four hours as applicable;
 - d. follow up with law enforcement and CCDJFS if a joint investigation is being conducted;
 - e. complete an investigation report within 30 days according to ORC 5123-17-02(H)(10).
4. Maintain confidential the name of the person making the child abuse or neglect report under ORC 2151.421 (I)(1).
5. Contact the Champaign County Humane Agent/Champaign County Sheriff's Office for the handling of abused or neglected animals discovered during the course of a child abuse/neglect investigation.
6. Participate in Champaign County's multidisciplinary team -Champaign County Child Abuse Response Team (CART) by:
- a. attending bi-weekly CART meetings;
 - b. participating in joint trainings in investigative skill and team building development;
 - c. demonstrating flexibility, problem solving and exploring of ideas to further the goals of the team.

**CHAMPAIGN COUNTY PROSECUTOR, MUNICIPAL COURT PROSECUTOR
CHILD ABUSE AND NEGLECT RESPONSIBILITIES**

It is agreed that the Champaign County Prosecutor and Municipal Court Prosecutor shall:

1. Act in their capacity as public officers to receive information from the general public pursuant to ORC 2151.421 at any time about suspected child abuse or neglect, and pursuant to OAC 5123-17-02 exploitation or misappropriation of individuals and immediately refer the information to CCDJFS Children's Services for investigation and/or assessment.

It is agreed that the Champaign County Prosecutor shall:

1. Provide legal representation for CCDJFS regarding the filing of petitions for court ordered protective services or custody of children whenever child abuse, neglect or dependency proceedings in Family Court are being considered. Secure ex parte emergency orders for custody when children are determined to be at imminent risk of harm.
2. Review, at the request of law enforcement, CCBDD, or CCDJFS reports, regarding the exploitation or misappropriation of individuals or child abuse and/or neglect cases (including "out of home care", third party involvement, missing children, death of a child, and alleged withholding of appropriate nutrition, hydration, medication, or medically indicated treatment of a disabled infant with life-threatening conditions) for possible prosecution.
3. Receive and respond to reports of cases involving individuals who aid, abet, induce, cause, encourage, or contribute to a child or ward of the Family Court becoming a dependent, neglected, unruly or delinquent child as defined in the Ohio Revised Code.
4. Assist Champaign County Department of Job and Family Services (CCDJFS), Champaign County Board of Developmental Disabilities (CCBDD), and law enforcement in the completion of their investigation and/or assessment.
5. In cases where CCDJFS is denied access to the child(ren) and the law enforcement agency having jurisdiction has been consulted about possible imminent risk of harm, file a motion on behalf of the child for the child to be produced so that an investigation of alleged abuse/neglect can occur.
6. Determine cases requiring prosecution.
7. Assist with the coordination of the investigation process with CART partners.
8. Prepare and present delinquency, unruly or criminal cases in Family, Municipal or Common Pleas General Division Courts.

9. Whenever possible, seek opportunities to reduce trauma to children involved in the criminal justice process by avoiding multiple interviews and, when available and appropriate, assigning Victim/Witness Assistance Personnel.
10. Participate in Champaign County's multidisciplinary team - Champaign County Child Abuse response Team (CART) by:
 - a. assisting with the training/orientation of all investigative social services workers to utilize consistent quality interviews;
 - b. attending bi-weekly CART meetings;
 - c. participating in joint trainings in investigative skill and team building development;
 - d. demonstrating flexibility, problem solving and exploring of ideas to further the goals of the team.

CHAMPAIGN COUNTY FAMILY COURT RESPONSIBILITIES

It is agreed that Champaign County Family Court shall:

1. Attend meetings concerning the MOU.
2. Exercise jurisdiction over adults and children to hear and decide matters as permitted by Ohio Revised Code Chapters 2151 and 2152 and issuing orders regarding the care, protection, health, safety, and best interest of children.
3. Hear evidence and issue findings of fact and conclusions of law as to any abused, neglected, or dependent child.
 - a. Order timely and safe permanency dispositions for children.
 - b. Preserve the family environment whenever possible while keeping the child's health and safety paramount.

OPTIONAL SUBSCRIBER DUTIES

As an optional subscriber of this plan of cooperation, agree to:

1. Immediately report suspected child abuse and neglect to the Champaign County Department of Job and Family Services, Children's Services and/or to the appropriate law enforcement agency.
2. Educate staff of their respective organizations on Ohio Mandatory Reporting Law and the contents of this plan of cooperation.
3. Work cooperatively with Champaign County Department of Job and Family Services, Social Services Department in arranging in-service training on child abuse and neglect for professionals within their organizations who are required by Ohio's law to report suspected child abuse and neglect.
4. Share necessary identifying information to assist in completing investigation and/or assessment of child abuse and neglect.
5. Adhere to requirements of confidentiality with information that is known and professionally shared regarding child abuse and neglect reports.
6. Follow up a verbal report of abuse or neglect (if requested) with a written report within 24 hours or the next working day.
7. Whenever possible, collaborate with Champaign County Department of Job and Family Services, in the development of a treatment plan for timely access to services ordered by the Champaign County Family Court in cases involving CCDJFS Children's Services.

CROSS REFERRAL OF INFORMATION

It is agreed that:

1. In accordance with OAC 5101:2-36-12, OAC 5101:2-33-21, and this MOU, Champaign County Department of Job and Family Services will make a cross report to law enforcement:
 - a. upon receiving information alleging a criminal offense;
 - b. within seven (7) calendar days of screening in a report alleging abuse unless an arrest was made by law enforcement at the time of the report or;
 - c. within seven (7) calendar days of screening in a report alleging neglect that requires intervention for an active safety threat, unless an arrest was made by law enforcement at the time of the report.
2. In accordance with rule OAC 5101:2-36-12 and OAC 5101:2-33-21, the appropriate state licensing and/or supervising authority shall be contacted no later than the next working day to share information regarding reports involving out of home care abuse or neglect.
3. The lead Children's Service agency for a child abuse investigation and/or assessment involving more than one county will be determined as outlined in OAC 5101:2-36-03. In order to coordinate investigations across county lines, information shall be shared in accordance with OAC 5101:2-33-21 and OAC 5101:2-36-13.

RESPONDING TO MANDATED REPORTERS

1. Within seven (7) days of receiving a referral from a mandated reporter, the Champaign County Department of Job and Family Services will send notification to the mandated reporter including the information permitted by ORC 2151.421(K):
 - a. Whether the agency has initiated an investigation of the report.
 - b. Whether the agency is continuing to investigate the report.
 - c. Whether the agency is otherwise involved with the child who is the subject of the report.
 - d. The general status of the health and safety of the child who is the subject of the report.
 - e. Whether the report has resulted in the filing of a complaint in juvenile court or of criminal charges in another court.
2. Upon closure of an investigation/assessment reported by a mandated reporter, CCDJFS will send notification to the mandated reporter of investigation closure and an agency contact person.

UNAUTHORIZED DISSEMINATION OF INFORMATION

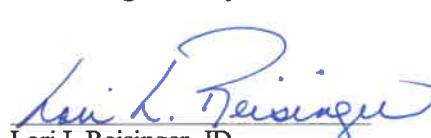
According to ORC 2151.421, the reporter's identity is confidential and is not to be confirmed or denied, except as permitted by the Ohio Revised Code. When any person commits, causes, permits or encourages the unauthorized dissemination of information concerning the identity of a reporter of a child abuse or neglect, Champaign County Department of Job and Family Services will give written notification of such unauthorized dissemination to the Champaign County Prosecutor or the Champaign County Municipal Court Prosecutor.

SIGNATURES

Non-compliance with this MOU shall be reported to the respective Agency Official listed below. The Agency Official agrees to address the non-compliance, as is appropriate, and to promote the safety and welfare of the children of Champaign County.



Kevin Talebi, JD
Champaign County
Prosecuting Attorney



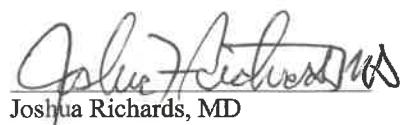
Lori L. Reisinger, JD
Champaign County Court of Common Pleas
Domestic Relations-Juvenile-Probate Judge



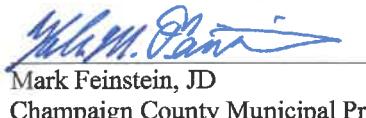
Matt Lingrell
Urbana Police Chief



Leigh Anne Wenning
Champaign County
Board of DD Superintendent



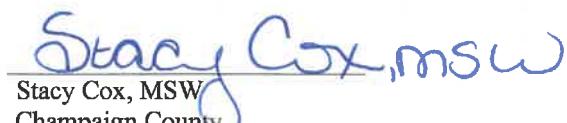
Joshua Richards, MD
Champaign County Coroner



Mark Feinstein, JD
Champaign County Municipal Prosecutor



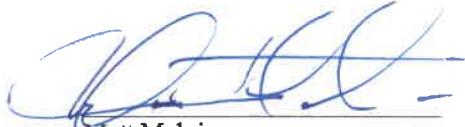
Scott Bodey
North Lewisburg Police Chief



Stacy Cox, MSW
Champaign County
Director DJFS



Brett Gilbert, JD
Champaign County Court of Common Pleas
Domestic Relations-Juvenile-Probate Judge



Matt Melvin
Champaign County Sheriff



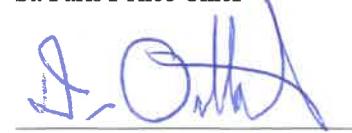
Erich Hopkins
Champaign County
Dog Warden Officer



David Patrick
Mechanicsburg Police Chief



Eric Smith
St. Paris Police Chief



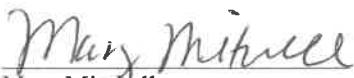
Dean Ortlieb
Urbana Fire Division Chief



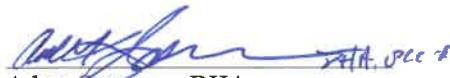
Gabe Jones, MPH
Champaign County Health District Commissioner



Jene Bramel, MD
Urbana Family Medicine and Pediatrics



Mary Mitchell
Madison-Champaign
Educational Service Center Superintendent



Adam Sorensen, DHA
Executive Director
Mental Health/ Drug and Alcohol Board
of Logan & Champaign Counties

5123-17-02

APPENDIX A

Page 1 of 8

**ADMINISTRATIVE INVESTIGATION PROCEDURE FOR
MAJOR UNUSUAL INCIDENTS IN CATEGORY A**

**(ACCIDENTAL OR SUSPICIOUS DEATH, EXPLOITATION,
FAILURE TO REPORT, MISAPPROPRIATION, NEGLECT,
PHYSICAL ABUSE, PROHIBITED SEXUAL RELATIONS,
RIGHTS CODE VIOLATION, SEXUAL ABUSE,
AND VERBAL ABUSE)**

Findings in administrative investigations of major unusual incidents in category A shall be based upon a preponderance of evidence standard. "Preponderance of evidence" means that credible evidence indicates that it is more probable than not that the incident occurred. There are three possible findings of a category A administrative investigation:

- "Substantiated" means there is a preponderance of evidence that the alleged incident occurred.
- "Unsubstantiated/insufficient evidence" means there is insufficient evidence to substantiate the allegation. "Insufficient evidence" means there is not a preponderance of evidence to support the allegation or there is conflicting evidence that is inconclusive.
- "Unsubstantiated/unfounded" means the allegation is unfounded. "Unfounded" means the evidence supports a finding that the alleged incident did not or could not have occurred.

Steps for Investigating Major Unusual Incidents in Category A

1. Commence the administrative investigation immediately, or no later than twenty-four hours after discovery of the incident. "Commencing the administrative investigation" means any of the following:
 - a. Interviewing the reporter of the incident.
 - b. Gathering relevant documents such as nursing notes, progress notes, or incident report.

- c. Notifying law enforcement or the public children's services agency and documenting the time, date, and name of the person notified. If law enforcement or the public children's services agency decides not to conduct an investigation, the investigative agent shall commence the administrative investigation.
 - d. Initiating interviews with witnesses or victims.
2. Interview the victim no later than three working days following notification of the major unusual incident and document the results. Exceptions to this requirement are when the individual is unable to provide any information or the investigative agent determines that the circumstances warrant interviewing the individual later in the administrative investigation.
3. Visit the scene of the incident.
4. Secure physical evidence. Take photographs of injuries, as applicable. Secure and sketch and/or photograph the scene of the incident. Provide a detailed description of any injury that may have resulted from the incident, including the shape, color, and size. Take a photograph of any injury that may have resulted from the incident; record the name of the person who took the photograph and the date and time the photograph was taken. Provide a written description of the physical evidence along with the date, time, and location of the gathering of evidence. Photograph and/or describe materials or objects that played a part in the incident. Provide a written description, sketch, or photograph of the area where the incident occurred. Note environmental factors that may have caused or contributed to any injury.
5. Follow-up with law enforcement. Include a copy of the police report, as applicable.
6. Review all relevant documents relating to the primary person involved that form the basis for the reported incident and the relevant documents relating to the individual who is the alleged victim.
7. Interview persons who have relevant information about the incident and document the interviews. Interviews may be documented and statements taken via videotape, audiotape, or other means as appropriate. Gather written statements from all relevant witnesses.

8. Interview medical professionals as to the possible cause/age of the injuries and document the interviews. Include a statement from a qualified medical professional as to whether or not the injury is consistent with the description of the incident, including the apparent age of the injury and probable force necessary to cause the injury. Include a description of treatment received or ordered. Qualified medical professionals include, but are not limited to, physicians, nurses, emergency medical technicians, and therapists.
9. Conduct follow-up interviews if needed.
10. Evaluate all witnesses and documentary evidence in a clear, complete, and non-ambiguous manner.
11. Evaluate the relative credibility of the witnesses. Factors to be considered in judging the credibility of a witness include:
 - a. Whether the witness's statements are logical, internally consistent, and consistent with other credible statements and known facts (e.g., does the witness appear to leave out or not know about information that he or she should know about?);
 - b. Whether the witness was in a position to hear or see what is claimed;
 - c. Whether the witness has a history of being reliable and honest when reporting incidents or making statements regarding incidents;
 - d. Whether the witness has a special interest or motive for making a false statement (e.g., is there a possible bias of the witness?);
 - e. The relevant disciplinary history of the primary person involved, such as involvement in similar past allegations;
 - f. The witness's demeanor during the interview (e.g., did the witness appear evasive or not forthcoming?); and
 - g. Whether the witness did other things that might affect his or her credibility.
12. Complete a written report that:
 - a. Includes a clear statement of the allegation;
 - b. Includes a succinct and well-reasoned analysis of the evidence;
 - c. Includes a clearly stated conclusion that identifies which allegations were and were not substantiated;
 - d. Identifies the causes and contributing factors to the incident; and
 - e. Addresses preventive measures that have been implemented.

Incident Specific Requirements – Accidental or Suspicious Death

1. Provide a statement explaining why the death is considered accidental or suspicious.
2. Document relevant medical interventions, treatment, or care received by the individual.
3. Include a copy of the police and/or coroner's investigation report.
4. Complete the required questions following deaths as specified by the department.

Incident Specific Requirements – Exploitation or Misappropriation

When five or more people had access to the individual's property and the value of the property is fifty dollars or less, detailed questionnaires may be substituted for initial interviews. Follow-up interviews shall be conducted as indicated based on information included or omitted in responses to the detailed questionnaires.

1. Document that there was an unlawful or improper act of using an individual or an individual's resources for monetary or personal benefit or gain of the primary person involved.
2. Document the depriving, defrauding, or otherwise obtaining the real or personal property of an individual by means prohibited by the Revised Code. Include any indication of the intent of the primary person involved.
3. Describe any items taken from the individual or anything received by the primary person involved as a result of the exploitation or misappropriation.
4. Gather copies of all financial records related to the incident, including cancelled checks.
5. Document the time, date, and officer's name for law enforcement agency notification.
6. Include an indication of whether or not the individual may have consented to the taking of his or her property or to the exploitation.

7. Verify that the property belonged to the individual.
8. Provide a description of how the improper act occurred.
9. Obtain the outcome of a criminal case, if resolved.

Incident Specific Requirements – Failure to Report

1. Provide a statement indicating the abuse, neglect, exploitation, or misappropriation the primary person involved did not report, including when and how it occurred.
2. Provide a statement indicating that the primary person involved was aware of the abuse, neglect, exploitation, or misappropriation, including when and how the primary person involved became aware of the abuse, neglect, exploitation, or misappropriation.
3. Provide a statement of how the failure to report the abuse, neglect, exploitation, or misappropriation by the primary person involved caused physical harm or a substantial risk of harm to the individual; be specific regarding any wound, injury, or increased risk of harm to which the individual was exposed as a result of the failure to report.
4. Explain why the primary person involved knew or should have known that the failure to report would result in a substantial risk of harm to the individual.
5. Provide a written description of any injury.
6. Provide an explanation from the primary person involved of why he or she failed to report.
7. Provide a statement of any reasons or circumstances explaining the failure to report by the primary person involved.

Incident Specific Requirements – Neglect

1. Verify and document the duty of the primary person involved to provide care to the individual.
2. Document the medical care, personal care, or other support required but not provided by the primary person involved that consequently

resulted in serious injury or placed the individual or another person at risk of serious injury. Include the time period of the alleged neglect.

3. Verify and document the primary person involved had knowledge that the withheld medical care, personal care, or other support was needed by the individual. Such documentation might include the individual's plan of care, medical information available to the primary person involved, statements made by others to the primary person involved, statements made by the primary person involved, or training received by the primary person involved.
4. Verify that the action or inaction of the primary person involved resulted in serious injury or placed the individual or another person at risk of serious injury.
5. Specifically describe the serious injury or risk of serious injury caused by the action or inaction by the primary person involved.

Incident Specific Requirements – Physical Abuse

1. Provide written statements that include a description of the amount of physical force used which may include, but is not limited to, speed of the force, range of motion, open or closed hand (fist), the sound made by impact, texture of surface if the individual was dragged or pulled, and the distance the individual was dragged, pulled, or shoved.
2. Provide a description of the individual's reaction to the physical force used (e.g., the individual fell backward or the individual's head or other body part jerked backward) and any indication of pain or discomfort experienced by the individual which may include words, vocalizations, or body movements.
3. Include comments made during the incident by the primary person involved.
4. Document how the harm to the individual is linked to the physical force used by the primary person involved.

Incident Specific Requirements – Prohibited Sexual Relations

1. Describe and document the type of sexual conduct or contact.
2. Document whether or not the incident was consensual. (Note: Consent does not excuse sexual contact by a caregiver with an individual when the caregiver is paid to care for the individual.)
3. Verify and document that the primary person involved was providing paid care to the individual.
4. Verify and document that the primary person involved was not married to the individual.
5. Provide a statement of any known, long-term, personal relationship the primary person involved has with the individual or other circumstances relevant to the sexual contact or conduct.

Incident Specific Requirements – Rights Code Violation

1. Indicate the specific right or rights of the individual violated by the primary person involved and describe how each right was violated, including any information or circumstances relevant to the incident.
2. Describe the harm or risk of harm caused to the individual as a result of the rights code violation by the primary person involved.

Incident Specific Requirements – Sexual Abuse

1. Document that the sexual activity was unwanted or the individual was unwilling.
2. Document that the primary person involved engaged in importuning, voyeurism, public indecency, pandering, or prostitution with regard to an individual.
3. Document the individual's capacity to consent.
4. Document any touching of an erogenous zone for the apparent sexual arousal or gratification of either person.
5. Describe the sexual conduct/contact, including any penetration of the individual.

6. Include the results of any physical assessment conducted by a medical professional.
7. Include the results of any human sexuality assessment.
8. Provide a copy of the police report.
9. Include all medical information related to the incident.
10. Document the date, time, and officer's name for law enforcement agency notification.

Incident Specific Requirements – Verbal Abuse

1. Provide a statement of the exact words or gestures used to threaten, coerce, intimidate, harass, or humiliate the individual and the context in which these were used.
2. Provide a description of the reaction of the individual to the words or gestures, including any words or vocalizations.
3. Describe the volume used, including such description as loud, soft, and tone of voice, and where the primary person involved was located in relation to the individual.
4. Describe the past history of verbal interactions between the primary person involved and the individual.

APPENDIX B

**CHILDREN SERVICES REPORT FORM
(Pursuant to Ohio Revised Code 2151.421)
FAX # 937-484-1506**

Date(s) of alleged incident (s) _____

Full name of Alleged Child Victim _____ DOB _____

Grade level _____ Special needs _____

Full name of Alleged Child Victim _____ DOB _____

Grade level _____ Special needs _____

Full name of Alleged Child Victim _____ DOB _____

Grade level _____ Special needs _____

Identify parents for each child
Father's Name _____ DOB _____

Address _____ Phone _____

Mother's Name _____ DOB _____

Address _____ Phone _____

Who is the custodian? _____

Other children in the home with Alleged Child Victim

Name _____ M/F _____ DOB _____

Hazards known in the home (guns, dogs, prior domestic violence)

Allegation of Abuse/ Neglect (detailed account of type and extent of injury / harm)

Alleged Child victims current functioning/ behavior

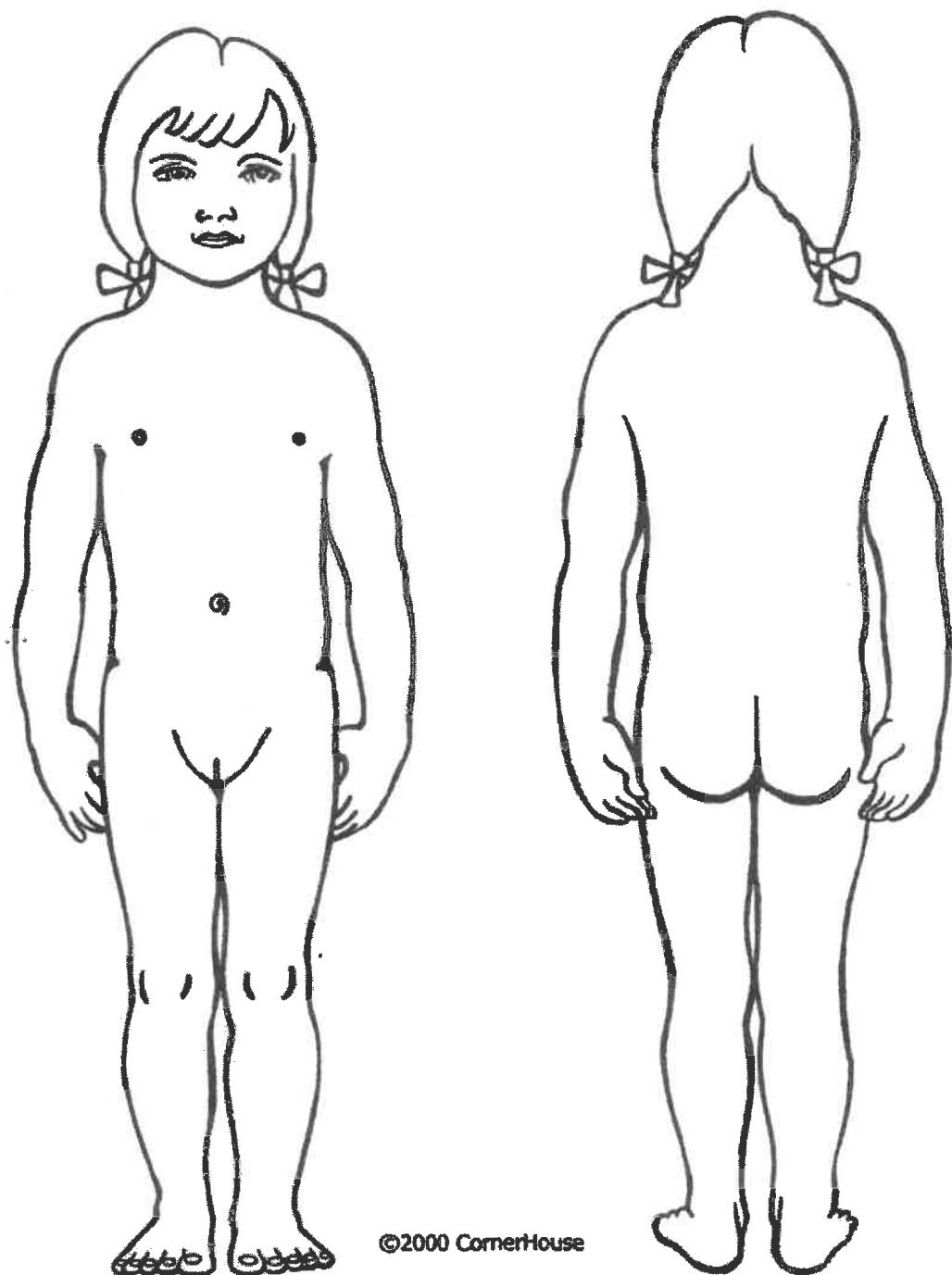
Has law enforcement been called? YES NO Unknown

Custody hearing pending? YES NO Unknown

Prior suspected abuse or neglect

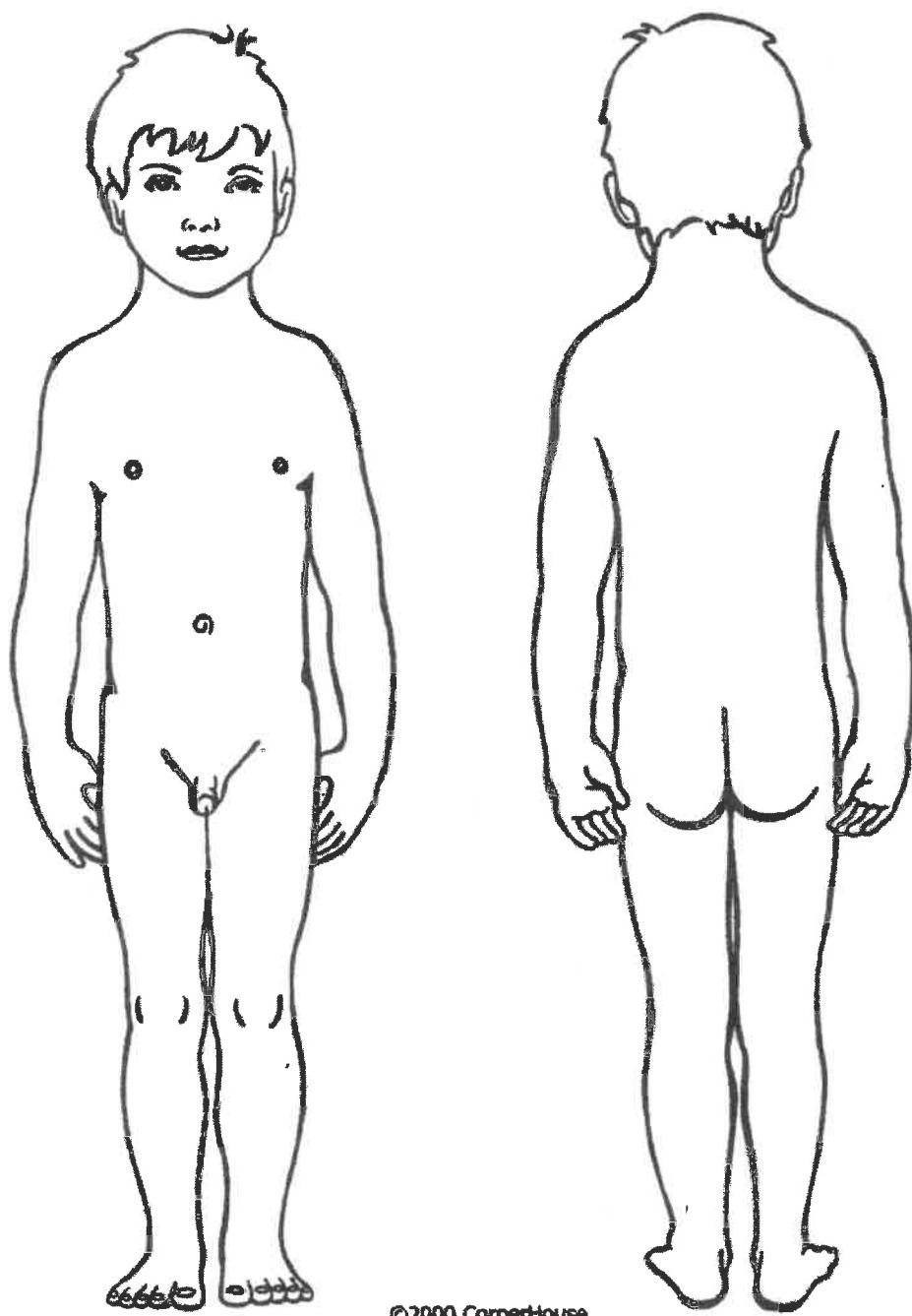
Reporters Name _____ Agency Address _____
Phone _____

NOTE: All information does not need to be complete to make a report



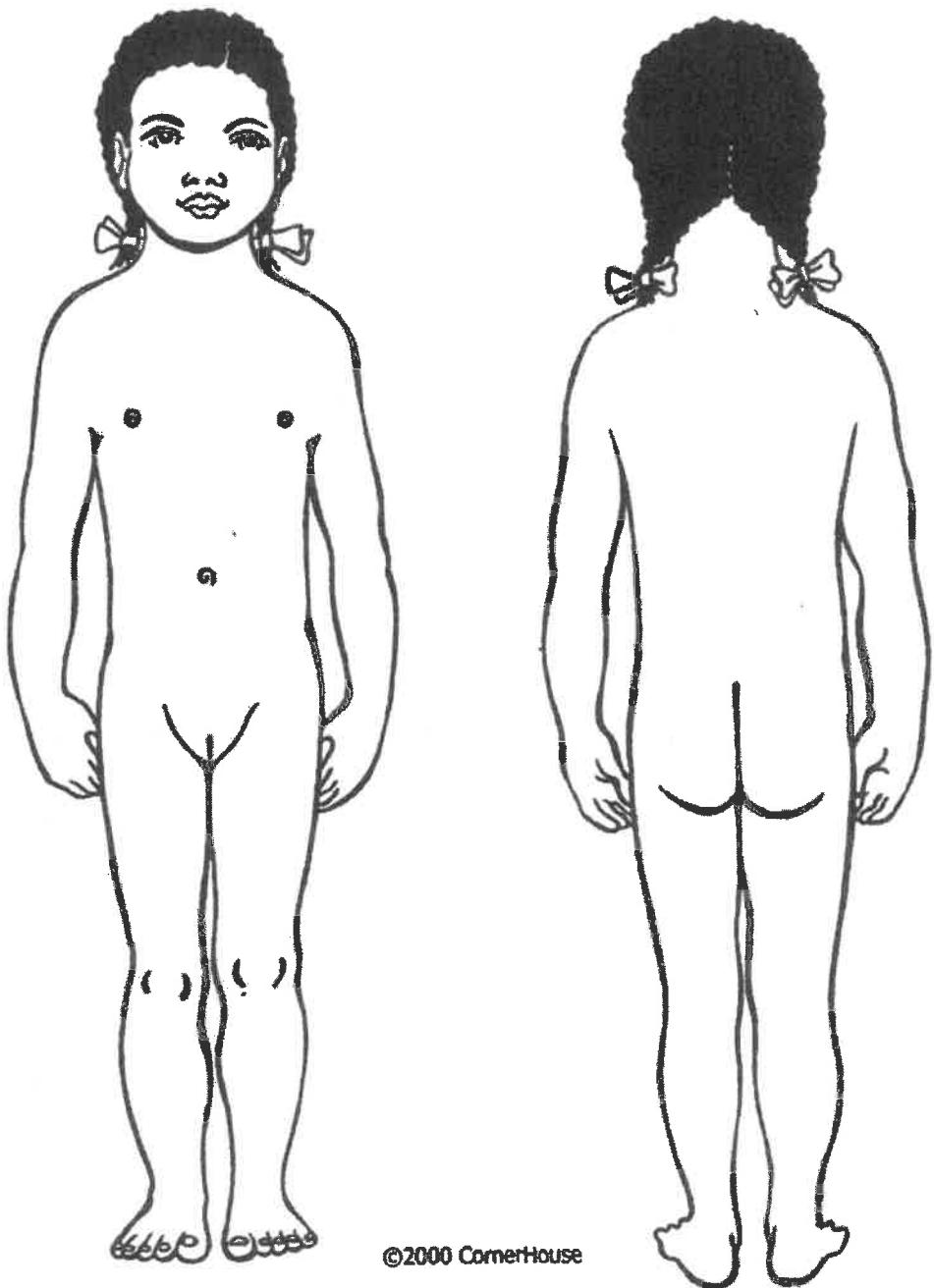
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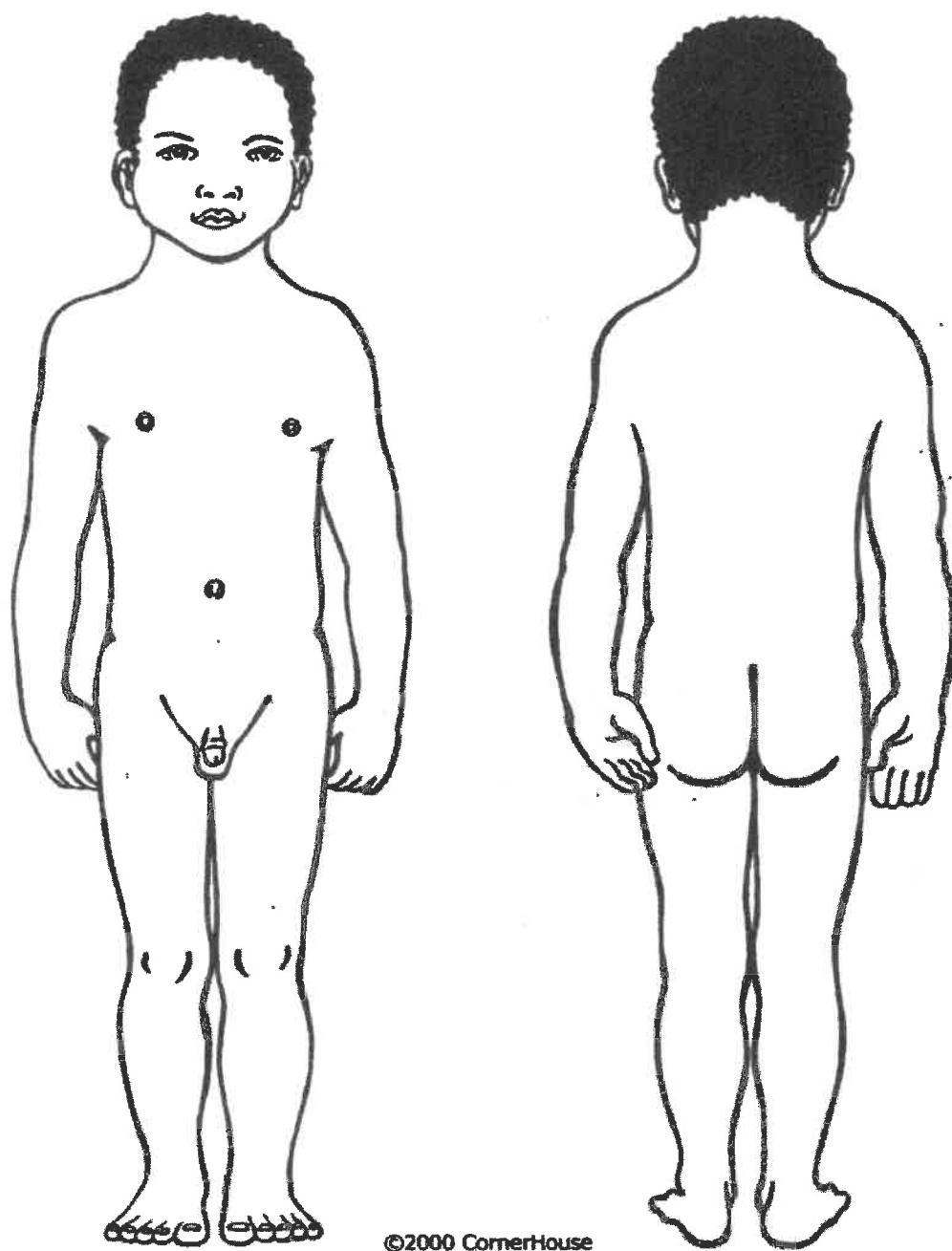
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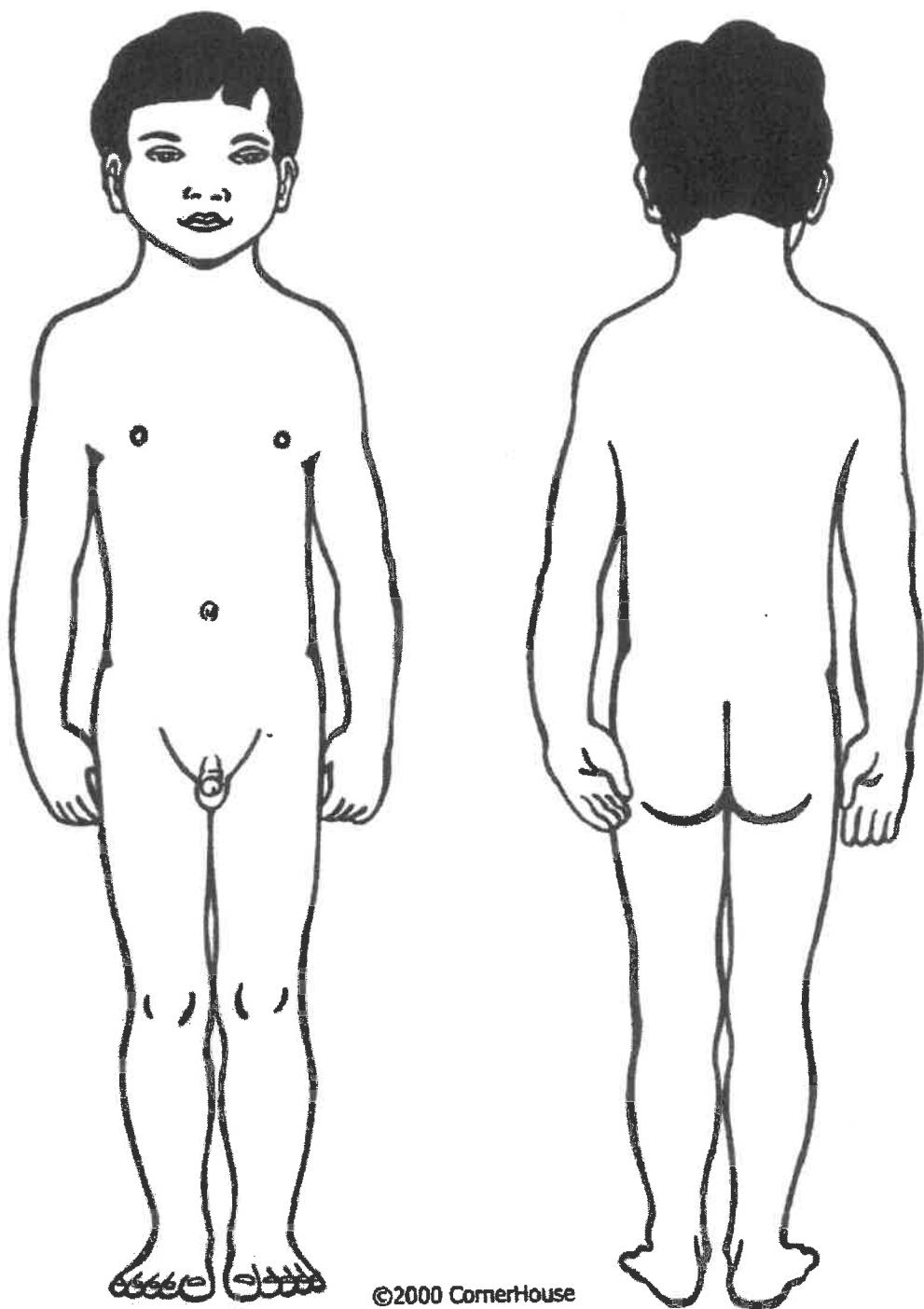
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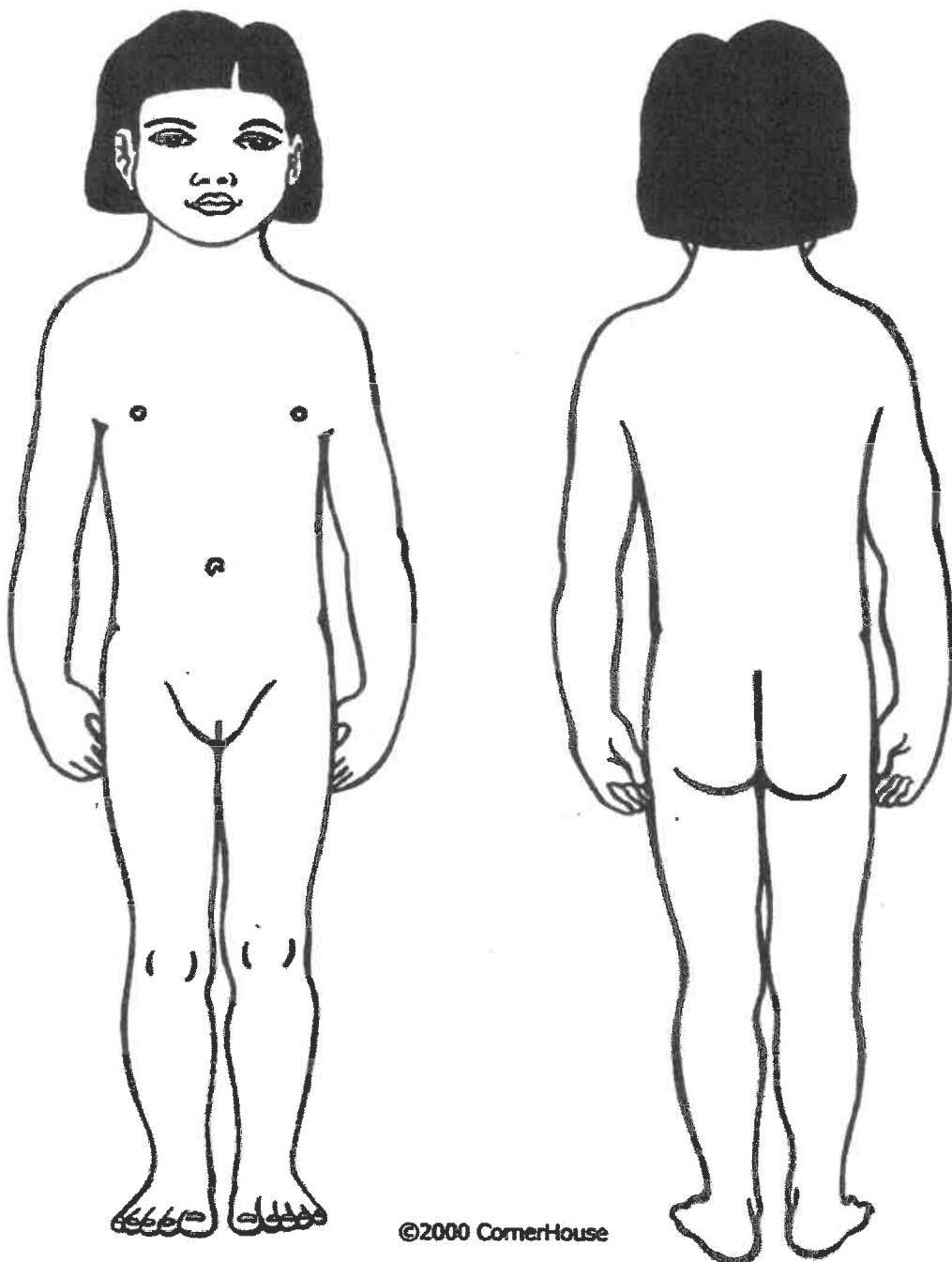


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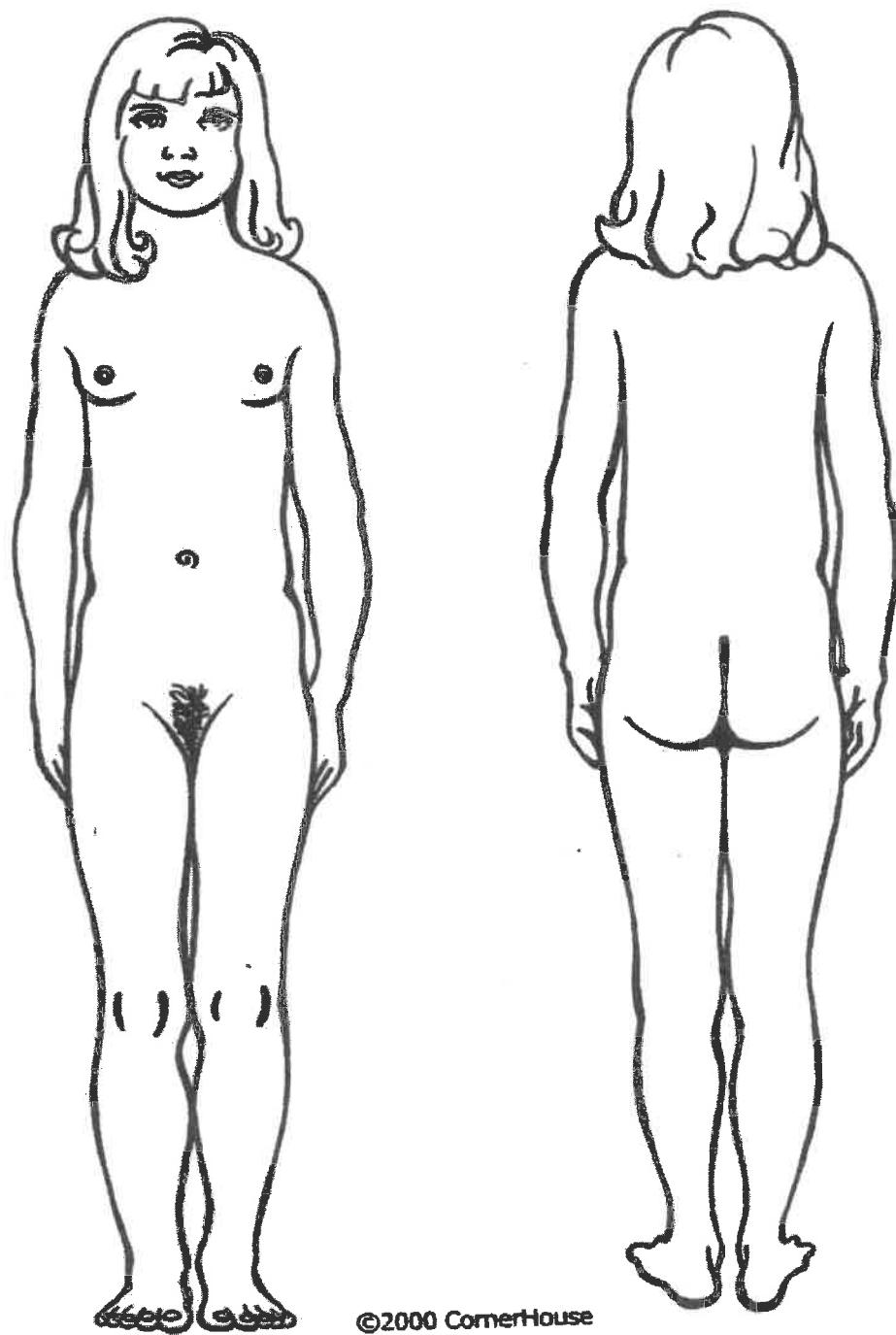


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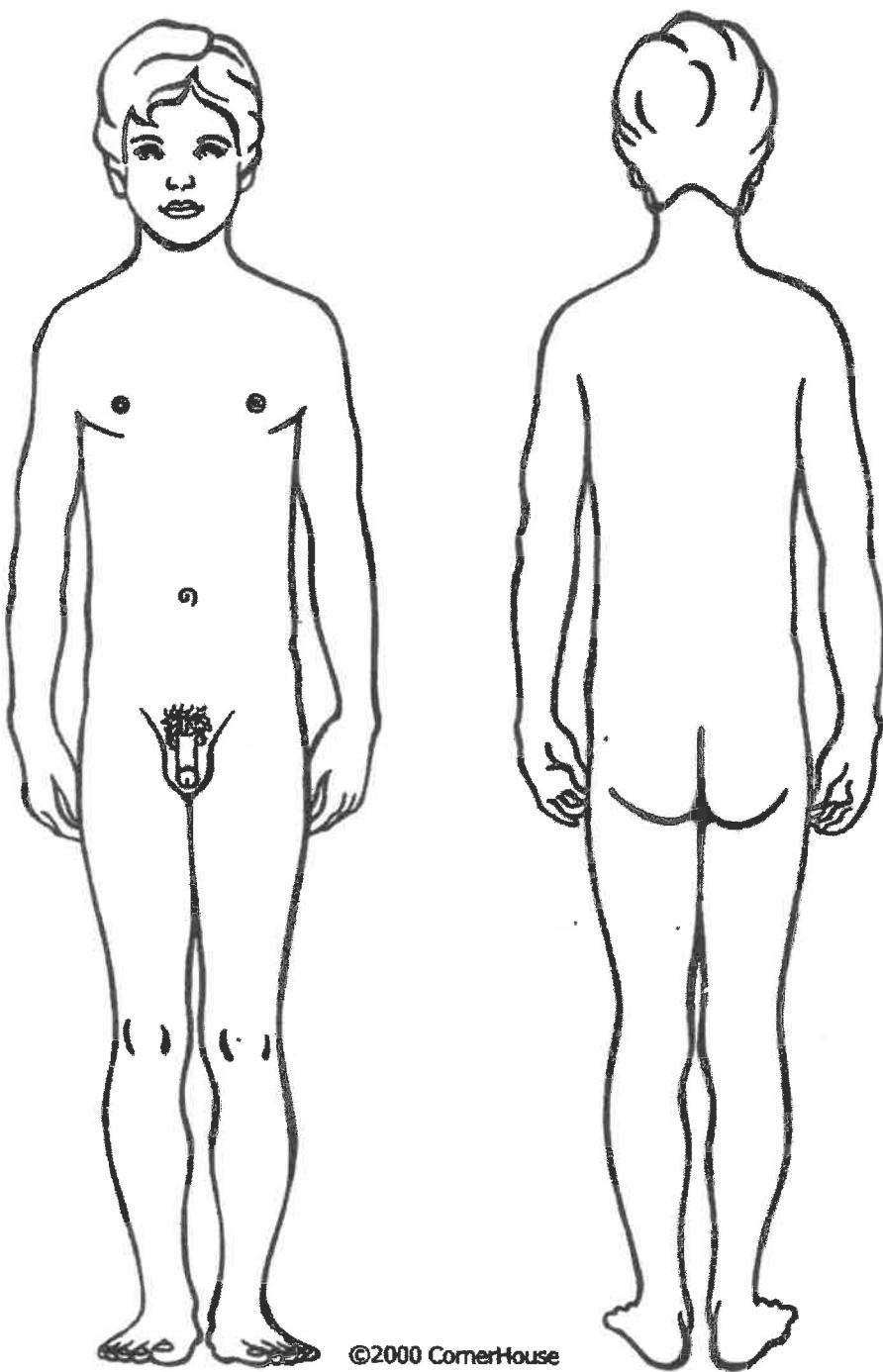
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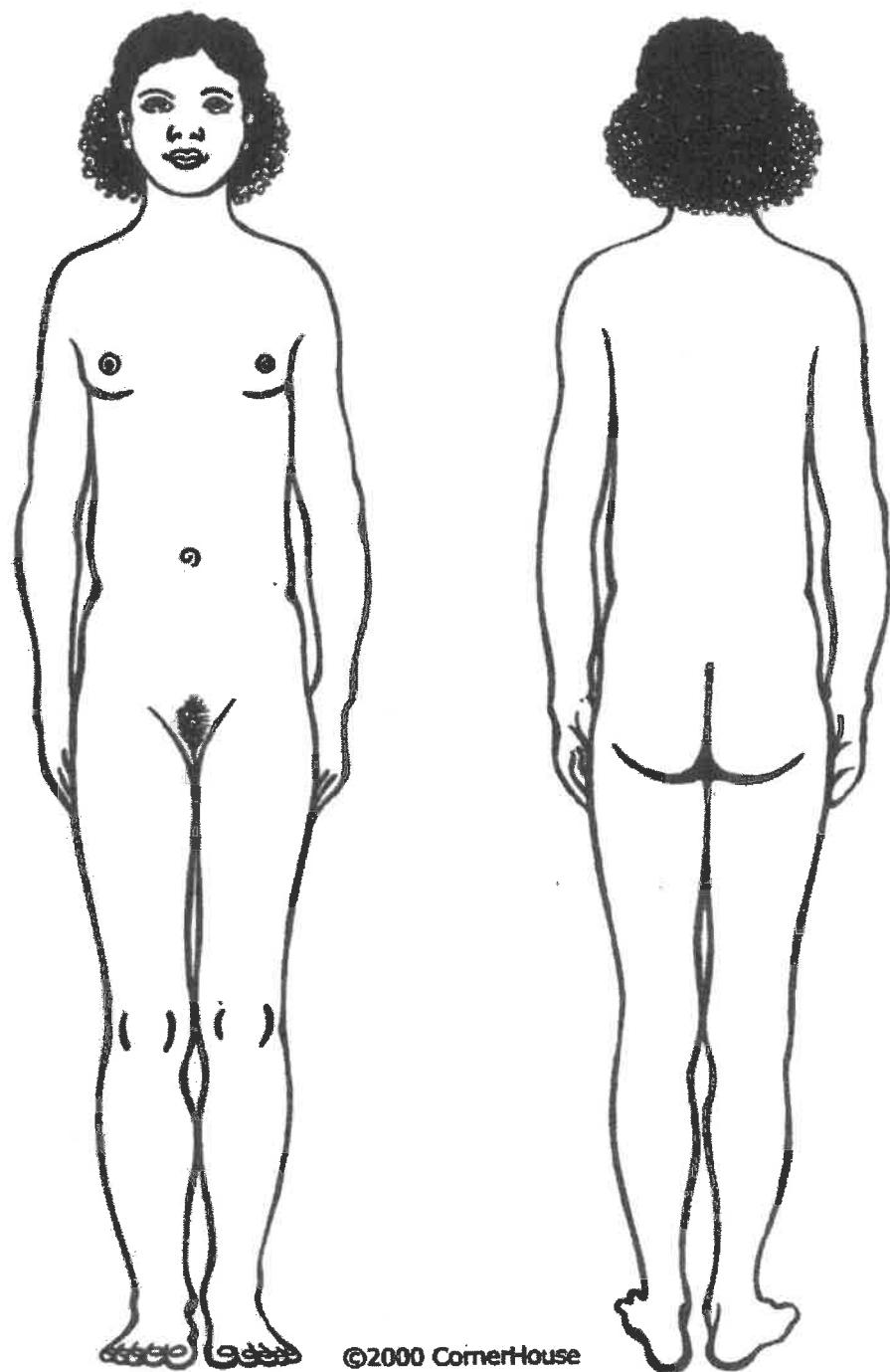
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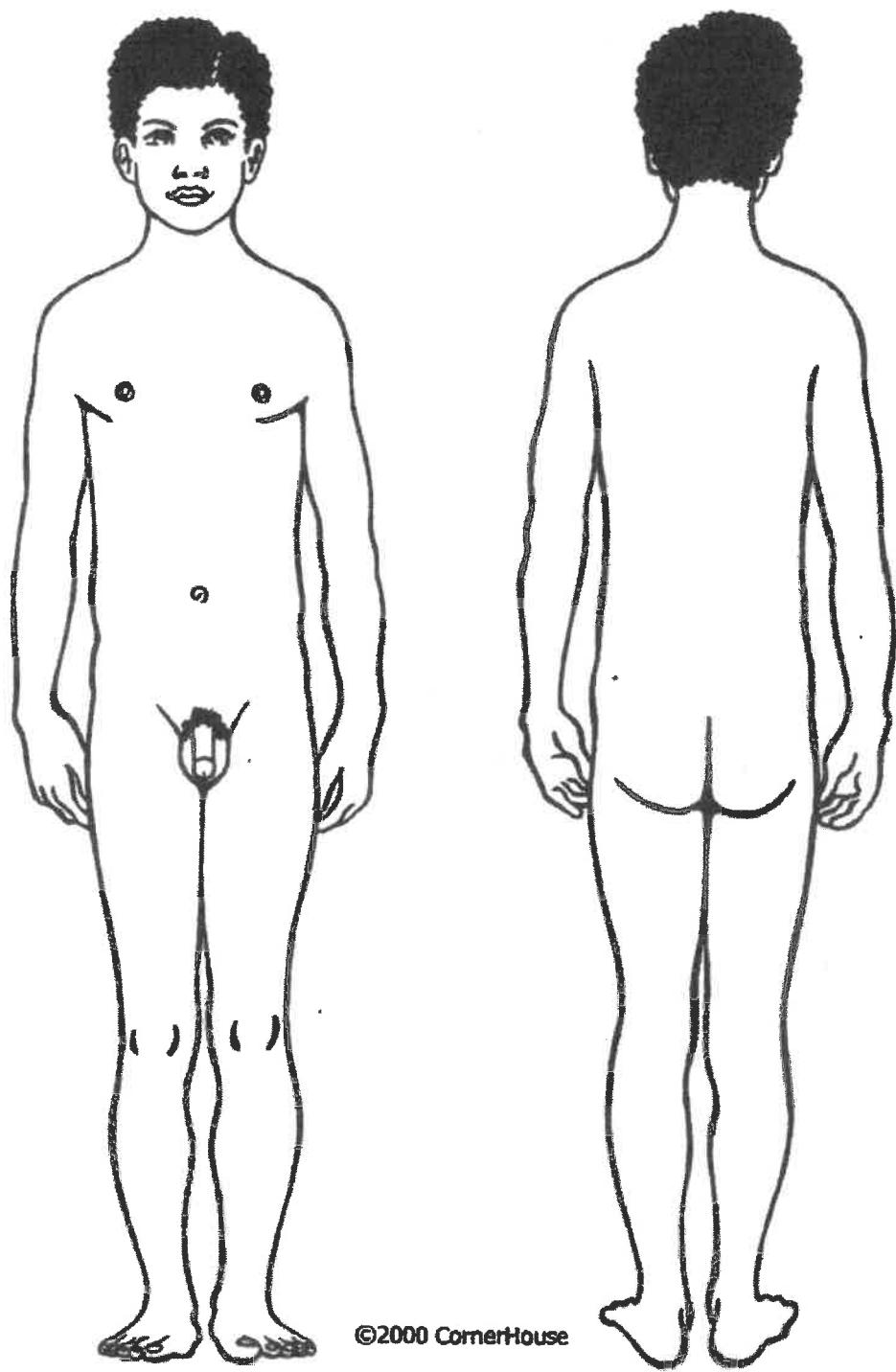
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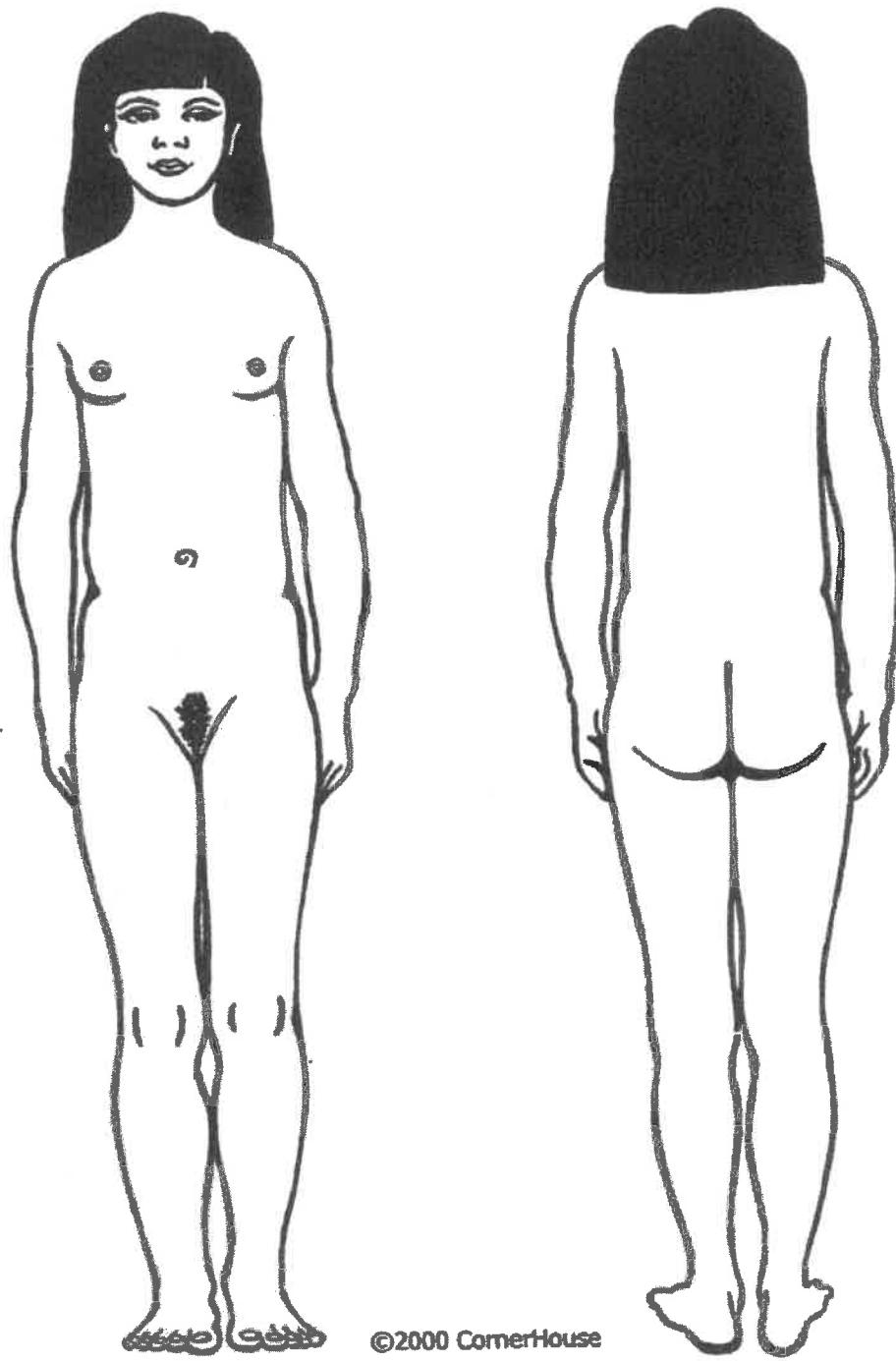
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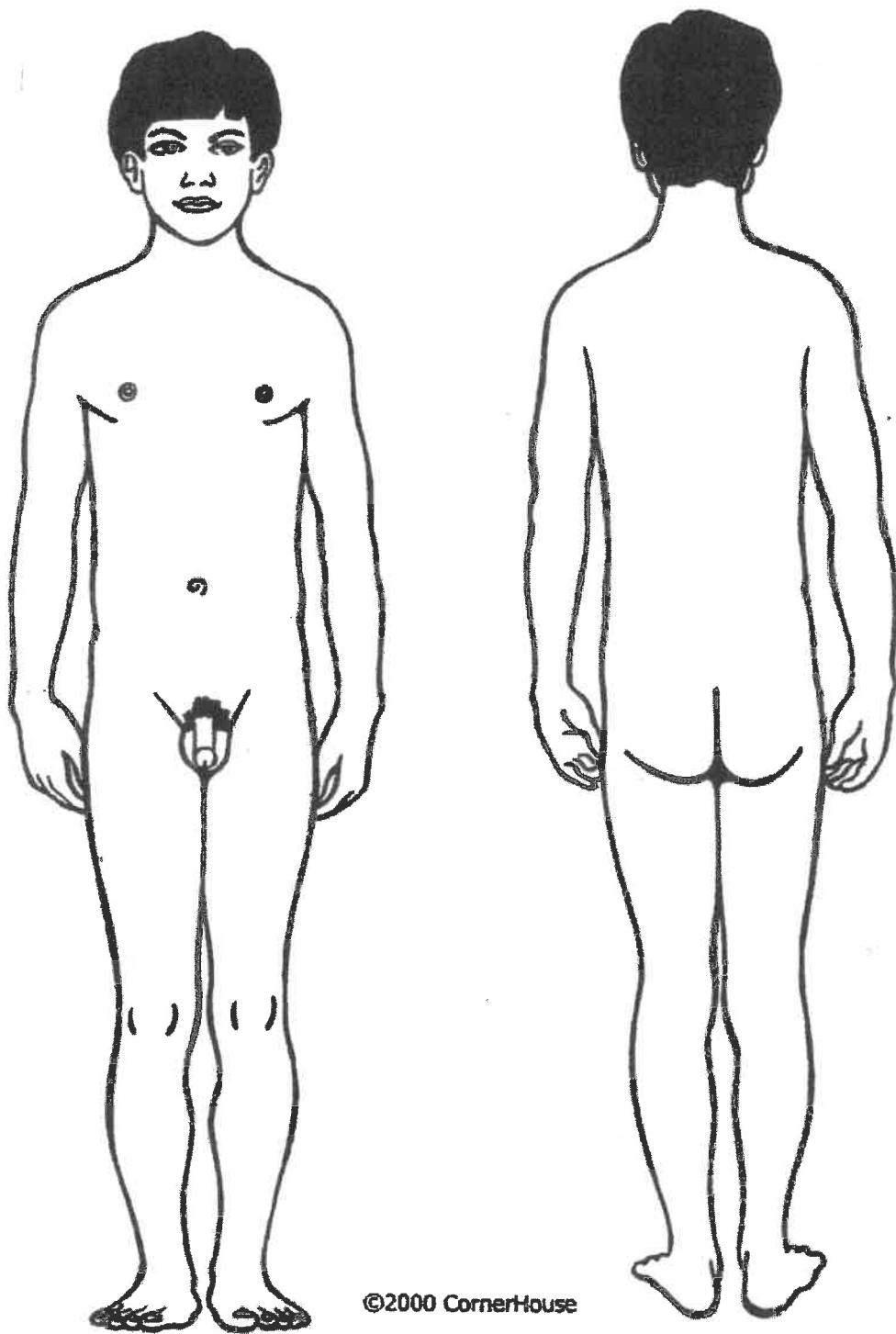
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Ohio Child Protective Services

Screening Guidelines

Guidelines for Screening

The Screening Guidelines were developed by the Ohio Department of Job and Services (ODJFS), Office of Families and Children, in collaboration with representation from Ohio's Public Children Services Agencies (PCSA), The Human Trafficking Task Force, Ohio's Chapter of the American Pediatric Association, and The Institute for Human Services.

These guidelines have been created to assist PCSA screeners in recognizing the link between the applicable statutes and/or rules to the intake categories. The utilization of the Screening Guidelines provides examples for each report category to assist in the categorization of the referral information. Additionally, the Screening Guidelines define each category pursuant to the Ohio Revised Code (ORC) and the Ohio Administrative Code (OAC) when applicable and provide examples to assist the screener in determining how to categorize the information received and how to complete screening decisions. The Screening Guidelines is provided to promote consistency in screening decision making across the state for PCSAs.

This document is strictly a guide to promote screening consistency statewide. The statements contained herein are not intended to be legal advice and screening staff should consult their agency's legal counsel when in doubt about the legality of any screening decision.

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The Screening Decision

The term "caretaker" is used throughout the Screening Guidelines outside of the definition in Ohio Revised Code (ORC). Within this document "caretaker" is used to represent; parent, guardian, custodian, and/or adult.

The screening decision is a formal process that is completed by the county PCSA and is documented in the case record. All reported information the **referent believes** may place a child at risk of abuse or neglect must be documented in SACWIS, regardless of the agency's screening decision. The appropriateness of the screening decision is dependent upon gathering accurate and complete information about the circumstances of the alleged maltreatment and the family situation. This is critical to the assessment of safety and risk to the child.

All referrals received by the PCSA must be categorized into one of the following categories:

- Abuse
- Neglect
- Dependency
- Family in Need of Services
- Information and/or Referral

A **referral** is the allegation of child abuse, neglect, dependency, or family in need of services made orally, in writing via hard copy or electronic medium. It includes, but is not limited to, allegations involving individuals, families, and out-of-home care settings.

A **report** is the documented screening decision based upon information obtained from the referent. To determine whether a referral meets the criteria to be accepted for assessment/investigation or intervention, the information provided by the referent should indicate suspected abuse, neglect, dependency, or that a family needs service.

The screening decision maker shall complete a screening decision and determine the immediacy of need for an agency response to ensure child safety within 24 hours from receipt of the information. The intake report shall be entered in SACWIS and a screening decision completed by the next working day from receipt of the information.

The primary responsibility of the screener is to identify the children who need protection or services and gather detailed information regarding concerns from the referent. The first assessment of safety occurs during the intake and screening process. Screeners must gather sufficient information from the referent in order to determine if PCSA intervention is necessary.

The screener shall attempt to obtain, at a minimum, the following information from a referent in order to determine an intake category and to arrive at a screening decision:

- The name(s) and address(es) of the child and their parent, guardian, or custodian.
- The child's age.
- The child's and any family member's race and ethnicity.
- The type, extent, frequency, and duration of the abuse, neglect, or dependency, as applicable.
- Alleged perpetrator's access to the child, if applicable.
- The child's current condition.
- The child's current location.
- Circumstances regarding the abuse, neglect, or dependency or the circumstances indicating a need for PCSA services.
- Information regarding any evidence of previous injuries, abuse, or neglect.
- Any other information that might be helpful in establishing the cause of the known or suspected injury, abuse, or neglect or the case circumstances that support the family needs PCSA services.

Receipt of all of the above listed information is not required in order to screen in a report, however it is encouraged to be obtained. The ability to make an informed screening decision is directly linked to the information gathered during the referral process. A lack of specific information, for example; an address or names of participants, does not necessarily justify screening the referral out. The totality of the circumstances should always be considered.

Screening staff responsible for receiving and recording referral information must be able to utilize interviewing techniques that will elicit thorough and pertinent information. It is recommended that PCSA's utilize skilled and experienced caseworkers at the screening level. A skilled screener will increase the efficiency and effectiveness of the PCSA's response in protecting children. The ability to be able to gather the information, analyze and evaluate the information, and make an unbiased decision are critical skills needed at the screening level.

Documentation within the intake narrative should not include specific information identifying the referent, since that information is confidential to encourage reporting suspected abuse/neglect without the fear of retaliation. For example, the referent's name, role, relationship to the child, the referent's place of employment, etc., or any other information that would indicate the identity of the referent. Documentation should be clear and concise and easily understood by a third party, including the use of quotes when appropriate.

Screening decisions are ***critical decisions***. Screening a referral is the first point at which a decision must be made about a child's safety. Gathering the appropriate information at the screening level can greatly increase the efficiency and effectiveness of the agency's response and can allow agencies to act quickly to protect children in danger.

The purpose of screening is:

- To determine whether an incoming allegation meets the criteria for assessment/investigation and is appropriate for Child Protective Services (CPS) involvement.
- To gather sufficient information to locate the family and child(ren), and to identify children who may be in danger.
- To determine whether the information indicates the need for an emergency response because a child appears to be unsafe.

In accordance with ORC section 2151.421, the PCSA shall investigate each report of known or suspected child abuse or child neglect, or threat thereof, which is referred. Furthermore, ORC section 5153.16(A)(1) also states that the PCSA shall make an investigation concerning allegations of an abused, neglected, or dependent child. Based on the information obtained from the referent, the agency must determine whether the allegation meets the criteria for assessment/investigation.

Engaging the Referent

The screener must be able to engage a referent to disclose essential information that may not be readily provided.

- It is optimal to speak with a referent immediately. In the event this is not possible, it is recommended to be cognizant of the referent's wait time and obtain information regarding concerns of a child or family accordingly.
- Affirm the referent's decision to contact the PCSA with their concerns.
- Guide the conversation by encouraging the referent to tell you about the situation, and concerns for the child and family.
- Be patient and professional.
- Once the referent has provided the information, actively interview the referent so that pertinent information is gathered to support the decision-making process that is critical to the report categorization and screening decision.
- Use open-ended questions in order to expand on the information the referent provided.
- Gather details specific to the child and family functioning that provide insight to possible underlying conditions, protective capacities, contributing factors, and child vulnerabilities.
- Determine the referent's relationship to the alleged child victim(s) and the family.
- Determine how the referent obtained knowledge about the alleged maltreatment (i.e., Did the referent witness it or was told by another individual?).
- Determine what prompted the referent to report the information to the PCSA.
- Provide assurance to the referent that you understand their concerns and that it is very important that they called.
- Let the referent know that it is important for you to hear what they think about the family's situation and not "just the facts".
- Educate the referent about the PCSA's procedures regarding screening and assessment/investigation.

- Describe the types of cases accepted by Child Protective Services (CPS) as well as the types of information needed from the referent.
- Be honest with the referent regarding the information that has been provided and how the PCSA may be responding.
- Be responsive to any referent that may have a cognitive delay, physical disability or limited speech that impacts their ability to communicate their concerns effectively.
- Gather any safety concerns known in the home in which the PCSA should be aware of; dogs, guns, environmental safety issues, anger issues, etc.
- Ability to multi-task while talking with the referent (i.e., talking, data entry, SACWIS searches, etc.).

Credibility of Information

Credible information is defined as "*information worthy of belief*." A screener should evaluate the credibility of the information provided by a referent, not the credibility of the referent. Asking a referent to describe specific behaviors or describe the impact on the child will assist in determining the credibility of the information reported. This is the first step in the assessment of a child's safety, as the assessment of safety relies on credible information.

Referencing the Screening Guidelines when determining how to categorize the information received will be beneficial to the screener. Definitions and examples designed to assist in making screening decisions are located within these Screening Guidelines.

Regardless of any suspicions about the motives of the referent, if the allegations meet the statutory definitions of abuse, neglect, or dependency the referral must be screened in as an assessment/investigation.

Things to Consider

{Examples of, but not limited to}

Obtaining the following information from a referent will assist in the categorization of the referral, completion of the screening decision, and assignment of a response priority.

General:

- Demographic information of the individuals involved.
 - Name of the alleged child victim (ACV) of the report.
 - Name of ACV's parent, guardian, or custodian.
 - Court ordered custody arrangements, including residential, shared parenting and/or visitation (a.k.a., parenting time).
 - Address of the ACV.

- Address of the ACV's parent, guardian, or custodian.
- Phone number of ACV.
- Phone number of ACV's parent, guardian, or custodian.
- Referent's name, address, and contact information.
- The alleged perpetrator's (AP) name and identifying information.
- AP's address.
- The type of maltreatment the referent is reporting.
- Information regarding the family/extended family and supports to the family.

Safety and Risk

A thorough description of the allegations; inclusive of current and past maltreatment allegations should be gathered. The surrounding circumstances related to the maltreatment as well as the services or intervention needed for the child will assist the agency in completing an informed decision. The below information regarding the "*Who, What, Where, When and How*" of the alleged maltreatment should be gathered if available:

- The extent, frequency, and duration of the maltreatment.
- When (date and time) the child maltreatment occurred.
- Where the child maltreatment occurred.
- How often does the maltreatment occur?
- The identity of the alleged perpetrator and relationship to the child.
- The ACV's current location and degree of safety.
- The ACV's current physical condition and health.
- Witnesses' name, address, relationship.
- How the referent received or knows about the information they are reporting.
- Gather the following information on all children in the home of the ACV:
 - Name
 - Age
 - Relationship to the adults
 - Vulnerability
- Gather the following information on all adults in the home of the ACV:
 - Name
 - Age
 - Relationship to the ACV

- Circumstances, underlying conditions, contributing factors
- Protective capacities
- AP's access to the ACV
- AP's access to other children

Vulnerability of the Child

Vulnerability describes the degree to which a child can avoid or modify the impact of safety threats or risk concerns. Any information regarding the following characteristics of the child will assist in completing a screening decision.

- Ability to protect self
- Age
- Ability to communicate
- Likelihood of serious harm
- Provocativeness of the child/s behavior or temperament
- Special needs: behavioral, emotional, or physical
- Access to individuals who can protect the child
- Family composition
- Role in the family
- Physical appearance, size, and robustness
- Resilience and problem-solving skills
- Prior victimization
- Ability to recognize and report abuse/neglect

Protective Capacities of the Caretaker

Protective capacities of the caretaker(s) describe the strengths or resources that reduce, control, or prevent threats of serious harm from arising or having an unsafe impact on a child. Identifying how the family utilizes the below protective capacities to ensure the child's safety is important in the screening decision.

- Demonstrates willingness to better understand the needs of the child

- Protects the child from potential harm
- Provides the child with supervision appropriate to age and state of development
- Active in the child's treatment, therapy, court ordered services, case plan goals, etc.
- Utilizes resources to meet the child's basic needs
- Tolerates the stress of parenting
- Takes the child to all necessary medical appointments
- Utilizes a support network to assist in caring for the child when necessary
- Provides for the child's basic needs
- Demonstrates love, empathy, and sensitivity toward the child
- Uses safe/effective coping skills when caring for the child
- Has accurate knowledge of age-appropriate supervision for the child
- Understands the child's development in relation to the child's age
- Understands the needs of the child supersede the needs of an adult
- Understands the child is dependent and must have their needs met by the caretaker

Types of Child Abuse and Neglect Assessments/Investigations

After determining the information contained in the referral constitutes a report of child abuse and/or neglect, the type(s) of assessment/investigation will be selected.
There are three types of assessment/investigations:

1. An *Intra-Familial Investigation* is an assessment/investigation conducted by a PCSA in response to a child abuse or neglect report and includes an alleged perpetrator who meets one or more of the following criteria:
 - Is a member of the alleged child victim's family
 - Is known to the family or child and has had access to the alleged child victim, whether or not the access was known or authorized by the child's parent, guardian, or custodian (regardless of continued access, the service needs of the child and family should be considered).
 - Is involved in daily or regular care for the alleged child victim, excluding a person responsible for the care of a child in an out-of-home care setting.

The requirements for conducting an *intra-familial assessment/investigation* are contained within OAC rule 5101:2-36-03.

2. A **Specialized Assessment/Investigation** is an assessment/investigation conducted by a PCSA in response to a child abuse or neglect report and includes an alleged perpetrator who meets one or more of the following criteria:
- Is a person responsible for a child's care in out-of-home care as defined in ORC section 2151.011 and defined in OAC rule 5101:2-1-01 (e.g., a day camp counselor, a foster parent, a pre-finalized adoptive parent, a school teacher, an employee of a residential facility, or a licensed/approved childcare provider or facility; **this does not include kinship**).
 - Has access to the child by virtue of his/her employment or affiliation with an institution (i.e., a Boy/Girl Scout leader).
 - Has access to the alleged child victim through placement in an out-of-home care setting (See FAQs for examples at the end of this document).
- The requirements for conducting a **specialized assessment/investigation** are contained within OAC rule 5101:2-36-04.
3. A **Stranger Danger** investigation is a type of investigation identified under the "Family in Need of Services" (FINS) intake category and its definition is contained in the FINS section of this document (p. 54).

Conflict of Interest Requiring Third-Party Involvement

- Third-Party Involvement in an Investigation** requires the PCSA to request the assistance of law enforcement or another PCSA, or both, when conducting an assessment/investigation due to the potential conflict of interest a PCSA may have assessing/investigating an entity or person(s) when the following parties are involved as alleged perpetrators or principals of the report of child abuse or neglect:
- Any employee of an organization or facility that is licensed or certified by the Ohio Department of Job and Family Services (ODJFS) or another state agency and supervised by the PCSA. (i.e., PCSA's own licensed group home and child residential center).
 - A foster caregiver or pre-finalized adoptive parent that is certified or approved by ODJFS and supervised by the PCSA. (i.e., PCSA's own approved pre-finalized adoptive home or PCSA's own certified foster caregiver).
 - Any employee, or agent of ODJFS or the PCSA as defined in Chapter 5153. of the Revised Code. (i.e., PCSA's own employee or an ODJFS employee).
 - Any authorized person representing ODJFS or the PCSA who provides services for payment or as a volunteer.
 - A third-party investigation shall also be completed any time a PCSA determines that they have a conflict of interest.
- Third-party involvement* may be required for an intra-familial assessment/investigation or a specialized assessment/investigation depending upon the relationship of the alleged perpetrator with the alleged child victim.
- Further direction and requirements for involving a third-party in the assessment/investigation of a child abuse or neglect report are contained within OAC rule 5101:2-36-08.

Final Screening Decision & Pathway Assignment

The screening decision determines which children and families will receive further assessment and/or investigation by the PCSA. A screening decision is based on the information received from the referent and the history of the family with CPS and public information. The screener should request any known information from the referent regarding the following:

- Active safety threats
- Child vulnerabilities
- Protective Capacities
- Risk Contributors

Gathering information from the referent during the screening process regarding the safety and risk of the child is crucial in completing an accurate screening decision. Optimally, the screening decision is based on thorough and credible information gathered by the screener. The information obtained is used to determine the screening decision and the immediacy of need for initiation (response time).

The PCSA shall complete the screening decision based on the information received from the referent/reporter and the child protective services records regarding the principals of the report. {OAC 5101:2-36-01(l)} These case records may provide historical information regarding previous injuries resulting from abuse, or conditions of neglect that may significantly impact the screening decision.

A supervisor, or designee, should be involved in the final screening decision to provide consistent screening decisions. Screening supervisors, or other staff reviewing screening decisions should ensure implicit biases are not occurring when determining whether to screen in or screen out a referral. These biases can unintentionally occur and affect judgments and decisions, resulting in referrals not being screened appropriately.

The use of Information and Referral reports should only be used when no other intake category or intake type applies. Per OAC 5101:2-1-01, "Information and/or referral" is an intake category in which information is provided to any person to assist in locating or using available and appropriate resources or both.

Screening Guidelines for Pathway Assignment

Pathway Assignment

A screened in report of child abuse and/or neglect shall be assigned to either an Alternative Response or Traditional Response Pathway for assessment/investigation. {Reference Screening Pathway Assignment in the next section}

ORC 2151.429

(A) The differential response approach, as defined in section 2151.011 of the Revised Code, pursued by a public children services agency shall include two response pathways, the Traditional Response Pathway, and the Alternative Response Pathway. ODJFS shall adopt rules pursuant to RC Chapter 119. setting forth the procedures and criteria for PCSAs to assign and reassign response pathways.

(B) The agency shall use the **Traditional Response** for the following types of screened in reports:

- (1) Physical abuse resulting in serious injury or that creates a serious and immediate risk to a child's health and safety.
- (2) Sexual abuse.
- (3) Child fatality.
- (4) Reports requiring a specialized assessment as identified in OAC 5101:2-36-04.
- (5) Reports requiring a third-party assessment/investigation as identified in OAC 5101:2-36-08.

(C) For all other child abuse and neglect screened in reports, an **Alternative Response** shall be the **preferred response**, whenever appropriate and in accordance with rules adopted by the department.

OAC 5101:2-36-01 (L)

The PCSA shall assign the following types of reports of child abuse and/or neglect to the **Traditional Response Pathway**:

- (1) Reports containing allegations that could result in charges of felony child endangering.
 - (2) Physical abuse resulting in serious injury or that creates a serious and immediate risk to a child's health and safety.
 - (3) Reports containing allegations that could result in charges of criminal sexual conduct.
 - (4) Reports containing allegations of the sexual abuse of a child or an abused child who is also a victim of sexual abuse.
 - (5) Reports containing allegations that could result in charges of homicide.
 - (6) Reports requiring a specialized assessment as identified in rule 5101:2-36-04 of the Administrative Code.
 - (7) Reports requiring a third-party investigative procedure as identified in rule 5101:2-36-08 of the Administrative Code.
 - (8) Reports containing allegations regarding a suspicious child fatality.
- Serious injury/serious risk considerations for Traditional Response Pathway (examples of, not limited to):**
- Shaken baby, near fatality, inflicted injury causing hospitalization, broken bone, burns, head trauma, internal injuries, exposure of manufacturing drugs, infants displaying withdraw symptoms from drug exposure.

Discretionary Reasons for Alternative Response Ineligibility:

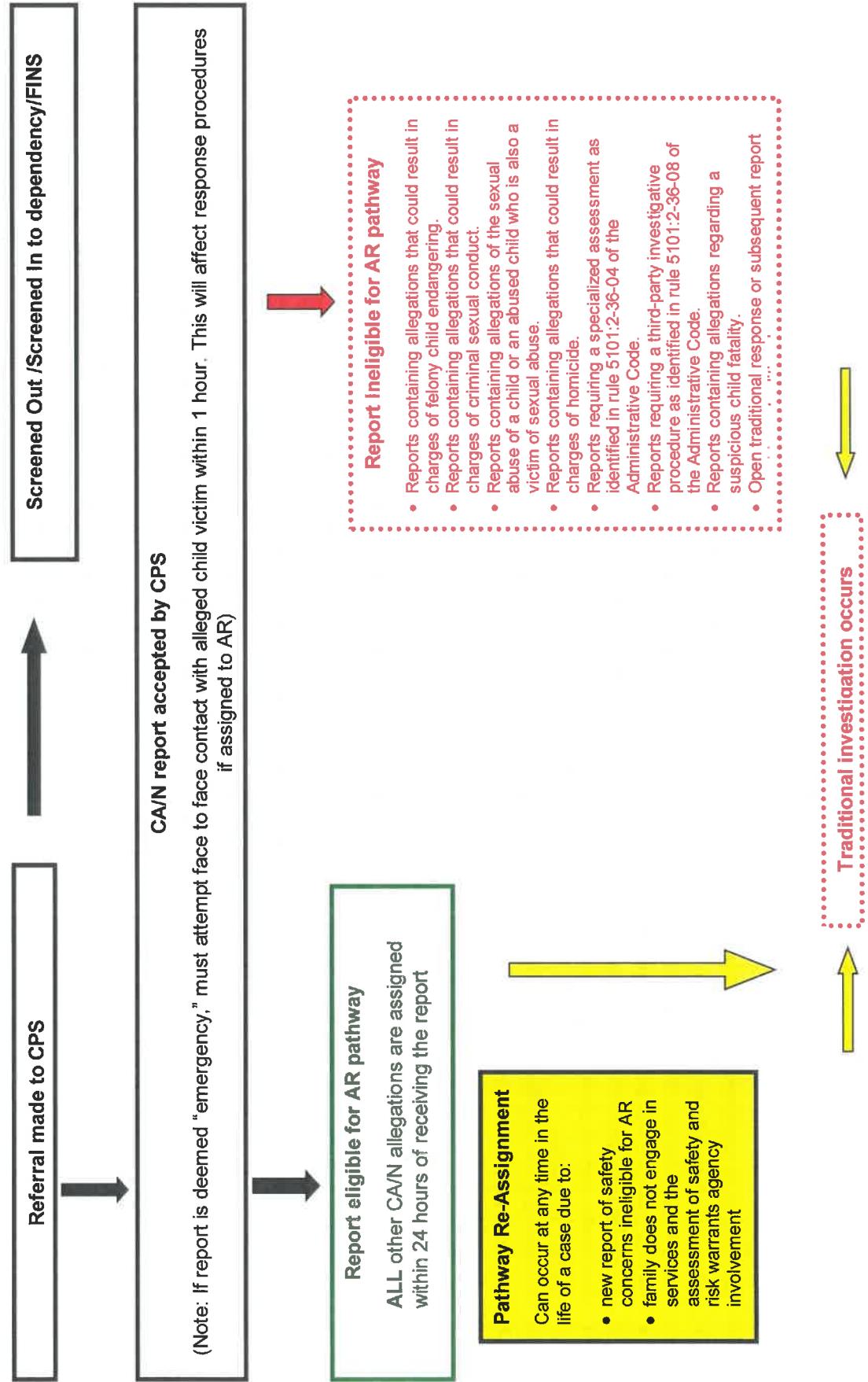
****Note: These reasons are based on County discretion whether a family qualifies for the Alternative Response Pathway and does not necessarily mean the report is ineligible.**

- Domestic Violence/Intimate Partner Violence (IPV)
- Frequency, similarity, or recency of past reports
- Other local policy (specify in screening decision comments)
- Parent/legal guardian has declined services in the past
- Parent/legal guardian unable/unwilling to achieve child safety
- Past maltreatment concerns not resolved at previous case closing
- Positive toxicology
- Previous child harm offenses charged against the alleged perpetrator
- Serious drug involvement
- Staffing considerations/workload

Pathway Assignment for Subsequent Reports to Open Cases

- If there is an open Traditional case and a new report of child abuse and/or neglect is screened in the report cannot be assigned to the Alternative Response Pathway.
- If there is an open Alternative Response case and a new report of child abuse and/or neglect is screened in, the report can be assigned to the Alternative Response Pathway, unless the reported allegations meet mandatory Traditional Pathway criteria or criteria for a Dependency or a FINS report.

Pathway Assignment Flowchart



Making the Screening Decision

This section provides references to Ohio Revised Code and Ohio Administrative Code Rules specific to each category. Information to consider for each category is included to assist with consistency in screening decisions across Ohio's Child Welfare Agencies. Screen In and Screen Out examples are provided for each category.

SCREENING GUIDELINES FOR CHILD PHYSICAL ABUSE

Investigations of physical abuse reports shall be categorized to include **Intra-Familial Assessments/Investigations, Specialized Assessments/Investigations and/or Stranger Danger**.

- **Intra-Familial Investigations** of physical abuse include an alleged perpetrator who:
 - Is a member of the alleged child victim's family.
 - Is known to the family or child and has had access to the alleged child victim, whether or not the access was known or authorized by the child's parent, guardian, or custodian (*regardless of continued access, the service needs of the child and family should be considered*).
 - Is involved in daily or regular care for the alleged child victim, excluding a person responsible for the care of a child in an out-of-home care setting.
- Examples of an **Intra-Familial Alleged Perpetrator** of physical abuse are mother, father, stepparent, paramour (living in the home) of the parent/caretaker, an uncle, kinship provider, neighbor, an unlicensed daycare provider, etc.
- **Specialized Assessment/Investigations** includes an Alleged Perpetrator of physical abuse who meets the definition of an Out-of-Home care setting; are responsible for the physical care/custody and control of a child; and/or has access to a child by virtue of his/her employment/affiliation to an institution. An example of a Specialized Assessment/Investigation Alleged Perpetrator includes a teacher, boy/girl scout leader, day camp counselor, licensed foster parent, licensed daycare provider, etc. *This does not include kinship*.
 - "Out-of-Home Care Setting" is a detention facility, shelter facility, foster home, pre-finalized adoptive placement, certified foster home, approved foster care, organization, certified organization, child day-care center, type A family day-care home, type B family day-care home, group home, institution, state institution, residential care facility, residential camp, day camp, hospital, medical clinic, children's residential center, public or nonpublic school, or respite home that is responsible for the care, physical custody or control of a child.
- **Stranger Danger Investigations** of physical abuse include an Alleged Perpetrator who was unknown to the alleged child victim and the alleged child victim's family prior to the incident(s).
 - A PCSA shall conduct a Stranger Danger Investigation in response to a child abuse report alleging a criminal act against a child of assault as defined under Chapter 2903.

The term "caretaker" is used throughout the Screening Guidelines outside of the definition in Ohio Revised Code (ORC). Within this document "caretaker" is used to represent; parent, guardian, custodian, and/or adult.

***Examples provided within the Screening Guidelines Handbook are not all inclusive. If more than one referral type is present, the totality of the circumstances should be used in the consideration of a screen in. If necessary, consult legal advisor.**

Physical Abuse

Physical Abuse is comprised into the following areas:

- Physical Abuse/Injury
- Corporal Punishment
- Endangered Child
- Substance Use (including CARA referrals)
- Ingestion
- Mental Injury/Emotional Maltreatment
- Trafficking in Persons

Physical Abuse/Injury

Related ORC and OAC Rules and Definitions:

Exhibits evidence of any physical or mental injury or death, inflicted other than by accidental means, or an injury or death which is at variance with the history given of it. (ORC 2151.031; OAC 5101:2-1-01(B)(2)(c)).

*Except a child exhibiting evidence of corporal punishment or other physical disciplinary measure by a parent, guardian, custodian, person having custody or control or person in loco parentis of a child, if the measure is not prohibited by Chapter 2919.22 (see below).

Child is endangered, except that the court need not find any person has been convicted of the offense in order to find that a child is an abused child. (ORC 2151.031)

Keep in Mind:

When making screening decisions about Physical Injury, these considerations can help determine the threat of serious injury or death:

- Age of child

<ul style="list-style-type: none"> • Size of child • Development of child • Medical needs of child <p>✓ Consideration for a referral to the local Children's Advocacy Center (CAC) should be considered for all Trafficking in Persons allegations regardless of whether the referral is screened in or screened out.</p>	<p>NOTE: There is no time limit established in statute or rule specific to the timeframe of when the alleged physical abuse occurred.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: center; background-color: #d9e1f2;">Physical Abuse/injury Examples</th></tr> <tr> <th style="text-align: center; background-color: #d9e1f2;">Screen In</th><th style="text-align: center; background-color: #d9e1f2;">Screen Out</th><th style="text-align: center; background-color: #d9e1f2;"></th></tr> </thead> <tbody> <tr> <td style="vertical-align: top;"> <ul style="list-style-type: none"> • Child deceased as result of suspected inflicted injury, regardless of whether there are other children in the home. • Serious suspected inflicted injuries and/or multiple injuries to any area of the body. • Suspected inflicted injury resulting in cuts, bruises, or abrasions. (except Corporal Punishment, see below). • Punching, hitting, or kicking a child in the head, torso or other sensitive area in a manner that could potentially cause serious injury even if there is no obvious external injury visible. • Other acts of physical violence that could result in serious harm or injury even if there is not obvious external injury visible (i.e., Suffocation, choking, electric shock, threat of harm with a weapon, throwing objects at a child). </td><td style="vertical-align: top;"> <ul style="list-style-type: none"> • Injury resulting from an accident (may need to refer to Neglect Guidelines). • Superficial welts and scratches on the arms or legs that do not require medical treatment (unless bruising is widespread). • Caretaker is attempting to keep the child safe and an injury results from the act of protection (i.e., a caretaker grabs a child's arm to keep them from running into the street and leaves bruising). • Suspected injury that results from sibling altercation (may need to refer to Neglect Guidelines regarding supervision). </td><td style="vertical-align: top; text-align: right;"> <p>*Additional questions should be asked to ensure injury is consistent with age of other sibling and ability to inflict reported injury.</p> </td></tr> <tr> <td style="vertical-align: top;"> <ul style="list-style-type: none"> • Serious injury, resulting in cuts, bruises, or abrasions, not consistent with the explanation or the child's disclosure of how the injury occurred. (This doesn't necessarily mean a minor mark on the arm that a child has given an inconsistent story about should be screened in). </td><td style="vertical-align: top;"></td><td style="vertical-align: top;"></td></tr> </tbody> </table>	Physical Abuse/injury Examples			Screen In	Screen Out		<ul style="list-style-type: none"> • Child deceased as result of suspected inflicted injury, regardless of whether there are other children in the home. • Serious suspected inflicted injuries and/or multiple injuries to any area of the body. • Suspected inflicted injury resulting in cuts, bruises, or abrasions. (except Corporal Punishment, see below). • Punching, hitting, or kicking a child in the head, torso or other sensitive area in a manner that could potentially cause serious injury even if there is no obvious external injury visible. • Other acts of physical violence that could result in serious harm or injury even if there is not obvious external injury visible (i.e., Suffocation, choking, electric shock, threat of harm with a weapon, throwing objects at a child). 	<ul style="list-style-type: none"> • Injury resulting from an accident (may need to refer to Neglect Guidelines). • Superficial welts and scratches on the arms or legs that do not require medical treatment (unless bruising is widespread). • Caretaker is attempting to keep the child safe and an injury results from the act of protection (i.e., a caretaker grabs a child's arm to keep them from running into the street and leaves bruising). • Suspected injury that results from sibling altercation (may need to refer to Neglect Guidelines regarding supervision). 	<p>*Additional questions should be asked to ensure injury is consistent with age of other sibling and ability to inflict reported injury.</p>	<ul style="list-style-type: none"> • Serious injury, resulting in cuts, bruises, or abrasions, not consistent with the explanation or the child's disclosure of how the injury occurred. (This doesn't necessarily mean a minor mark on the arm that a child has given an inconsistent story about should be screened in). 		
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<ul style="list-style-type: none"> • Widespread bruising/injuries as a result of suspected maltreatment/abuse. • Serious injury in various stages of healing (i.e., scars and bruises, or new and healing fractures) as a result of maltreatment/abuse. Note: bruises cannot be reliably aged based on appearance. • Suspected Shaken Baby Syndrome/Abusive Head Trauma. • Shaking a toddler or infant. 	<p>Corporal Punishment</p> <p>Corporal Punishment: Related ORC and OAC Rules and Definitions: Exhibits evidence of any physical or mental injury or death, inflicted other than by accidental means, or an injury or death which is at variance with the history given of it. (ORC 2151.031; OAC 5101.2-1-01(B)(2)(c)) *Except a child exhibiting evidence of corporal punishment or other physical disciplinary measure by a parent, guardian, custodian, person having custody or control or person in loco parentis of a child, if the measure is not prohibited by Chapter 2919.22</p>				
<p>Keep in Mind: ORC outlines that when corporal punishment is involved, the threshold for determining if a child is endangered is whether or not the child is at substantial risk of serious physical harm, NOT the presence of injury.</p>	<p>Corporal Punishment Examples</p> <table border="1"> <thead> <tr> <th style="background-color: #ADD8E6;">Screen In</th> <th style="background-color: #ADD8E6;">Screen Out</th> </tr> </thead> <tbody> <tr> <td> <ul style="list-style-type: none"> • Excessive physical discipline would include discipline that is: <ul style="list-style-type: none"> ○ Inappropriate to the age and/or development of the child. ○ Inconsistent, arbitrary, and designed not to educate. ○ The result of unreasonable expectations or demands on the child. ○ The caretaker loses control during discipline. • Injury to vulnerable or sensitive areas of the body (i.e., head, face, chest, torso, abdomen, eyes, genitalia). </td> <td> <ul style="list-style-type: none"> • Corporal punishment to a child over one year resulting in minor injury to a non-sensitive area of the body (i.e., legs and/or arms) that does not require medical treatment. • Child smacked in the face as a result of corporal punishment and there is no injury. • Temporary redness as a result of corporal punishment. </td></tr> </tbody> </table>	Screen In	Screen Out	<ul style="list-style-type: none"> • Excessive physical discipline would include discipline that is: <ul style="list-style-type: none"> ○ Inappropriate to the age and/or development of the child. ○ Inconsistent, arbitrary, and designed not to educate. ○ The result of unreasonable expectations or demands on the child. ○ The caretaker loses control during discipline. • Injury to vulnerable or sensitive areas of the body (i.e., head, face, chest, torso, abdomen, eyes, genitalia). 	<ul style="list-style-type: none"> • Corporal punishment to a child over one year resulting in minor injury to a non-sensitive area of the body (i.e., legs and/or arms) that does not require medical treatment. • Child smacked in the face as a result of corporal punishment and there is no injury. • Temporary redness as a result of corporal punishment.
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	<ul style="list-style-type: none"> Bruises to torso (which includes chest, abdomen, back, buttocks, and genitals), ears, or neck in a child under four years of age. Frenulum/oral injuries or bruising in non-mobile infants. Bruises to the eyelids, angle of the jaw, fleshy cheek in infants and toddlers. Corporal punishment of an infant (child under the age of one year). 	<ul style="list-style-type: none"> Superficial welts and scratches on the arms or legs that do not require medical treatment (unless bruising is widespread). Corporal punishment occurred but child's skin and skeletal structure are free of bruises, cuts, burns and fractures. Child is disciplined by washing their mouth with soap without digestion and/or illness. A drop of hot sauce put into the child's mouth, but child is allowed to spit it out and it is not painful or toxic to the child.
Endangered Child		
	<p>Related ORC and OAC Rules and Definitions:</p> <p>Parent, guardian, custodian, person having custody and control or person <i>in locos parentis</i> of a child creates a substantial risk to the health or safety, by violating a duty of care, protection, or support (see ORC 2919.22).</p> <p>That Person:</p> <ol style="list-style-type: none"> Abused a child. Tortured or cruelly abused a child. Administered corporal punishment or other physical disciplinary measure, or physically restrained the child in a cruel manner or for a prolonged period of time, which punishment, discipline, or restraint is excessive under the circumstances and creates a substantial risk of serious harm to a child. Repeatedly administered unwarranted disciplinary measures to a child, when there is substantial risk that such conduct, if continued, will seriously impair, or retard the child's mental health or development. 	
	Endangered Child Examples	
	Screen In	Screen Out
	<ul style="list-style-type: none"> Confines child to small, dark, or isolated space in lieu of providing supervision and care (i.e., child locked in cage, child locked in basement, child locked in shed, child locked in closet). Ties, restrains or duct tapes a child to prevent the child from leaving, moving, or talking. 	<ul style="list-style-type: none"> Child in playpen, car seat, highchair, or bedroom for prolonged periods of time or without supervision (refer to Neglect Guidelines). Caretaker uses age-appropriate devices to contain children in public spaces. Teenager or pre-teen left in car who is capable of removing themselves from the situation.

<ul style="list-style-type: none"> • Subjects' child to severe weather conditions as a means of punishment or discipline. • Child is left in car and is unable to remove themselves from the situation and the temperature or weather condition could cause injury or harm. Factors to be considered determining this include length of time, age and development of child and child responsibility. • Child has a way of getting near or in contact with weapons or guns and this access creates a threat of harm to the child or others. • Child is at substantial risk of physical harm as a result of the prolonged effects of activity and/or ritualistic maltreatment by caretaker (i.e., child forced to run until they pass out). 	<ul style="list-style-type: none"> • Toddler or infant in car unsupervised (refer to Neglect Guidelines). • Child has access to a gun, but child has been taught and understands gun safety. The child's age, development and mental health status should be considered. • Child has access to a gun or weapon but there is no ammunition available. <p>Substance Use</p> <p>Related ORC and OAC Rules and Definitions: Federal law requires that positive toxicology on a newborn and/or exhibiting physical indicators of withdrawal be reported. (PL 114-198) Comprehensive Addiction and Recovery Act (CARA)</p> <p>Infant is defined as 12 months or younger per CARA.</p> <p>Abuse of an illegal or legal substance during pregnancy is physical abuse as defined by: ORC 2151.031 Abused child defined: "Abused child" includes any child who: D) Because of the acts of his parents, guardian, or custodian, suffers physical or mental injury that harms or threatens to harm the child's health or welfare.</p> <p>ORC 2151.031 supports OAC 5101:2-36-01:</p> <p>(F)(1)(a) Physical abuse, in accordance with section 2151.031 of the Revised Code, and any report alleging either of the following: (i) An infant identified as affected by legal or illegal substance abuse or withdrawal symptoms resulting from prenatal or postnatal substance exposure pursuant to rule 5101:2-1-01 of the Administrative Code. (ii) An infant diagnosed with fetal alcohol spectrum disorder.</p> <p>OAC 5101:2-36-01 (G) When a PCSA receives referral information the PCSA shall attempt to gather the following regarding the plan of safe care, which is defined in rule 5101:2-1-01 of the OAC: (1) the name(s) and address(es) of all of the following: (a) The child (b) The parent, guardian(s), or custodian(s)(c). All</p>
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household members (2) Identify the caregiver(s) for the infant (3) A description of the interaction between the mother/caregiver and infant (4) The name of the hospital or medical facility where the infant is receiving treatment (5) Any known medical information on the parent(s), guardian(s), caregiver(s), infants or household members (6) Information regarding any known legal or illegal substance abuse, which includes the history of legal or illegal substance abuse by parent(s), guardian(s), caregiver(s), and household members (7) Information regarding support systems for the parent(s), guardian(s), caregiver(s), or household members (8) Information on the managed care plan and insurance information.

OAC 5101:2-36-01 (H) The PCSA shall not screen out any referral categorized in paragraph (F)(1)(a) of this rule if: (1) The plan of safe care information listed in paragraph (G) of this rule is not obtained. (2) The plan of safe care has not been developed. (3) The plan of safe care is not adequate to address the safety of the infant.

Substance Use Examples	
This section is specific to CARA (infants, under the age of 12 months who have been exposed to and/or affected by an illegal/legal substance)	Screen Out
	<ul style="list-style-type: none"> • Newborn has a positive toxicology result for an illegal substance, non-prescribed substance and/or misused prescribed controlled substance. • Newborn with clinical signs or symptoms of drug withdrawal as a result of prenatal exposure to an illegal substance, non-prescribed substance and/or misused prescribed controlled substance. • Mother of newborn tests positive for an illegal substance, non-prescribed substance and/or misused prescribed controlled substance. • If the above justification is used to screen out a referral, the information from the referent must: <ul style="list-style-type: none"> ◦ Document a detailed and adequate plan of safe care which addresses the withdrawal symptoms from prenatal or postnatal substance exposure for the infant. ◦ The plan of safe care should detail information for infant, mother and any other caretaker who resides in the home who is impacted by substance misuse. • Newborn diagnosis of Fetal Alcohol Spectrum Disorder. • Validation of prescription is not obtained for which the infant tested positive for. • There is NOT a documented and adequate plan of safe care in place at time of discharge from the delivering medical facility. <p>NOTE: If the Plan of Safe Care is NOT detailed and does NOT address substance treatment services, medical care, behavioral health care or any other necessary</p>

<p>For more information regarding CARA refer to the following link: https://ifskb.com/sacwis/index.php/cpspolicy/178-cara-community-kit/861-cara-community-kit</p> <p>For more information regarding CARA refer to the following link: https://ifskb.com/sacwis/index.php/cpspolicy/178-cara-community-kit/861-cara-community-kit</p>	<p>service for the infant, mother, and any family members, the referral MUST BE SCREENED IN.</p> <p>For more information regarding CARA refer to the following link: https://ifskb.com/sacwis/index.php/cpspolicy/178-cara-community-kit/861-cara-community-kit</p>
Substance Use Ingestion Examples	
Screen In	
Screen Out	
<ul style="list-style-type: none"> • Forcing a child to eat a non-food item or food in an excessive amount that might be painful or toxic. • Child is over-medicated resulting in death or injury. • Over the counter medication given inappropriately which creates a threat of harm (i.e., giving an infant an adult Tylenol, giving young children a sleeping aid at level adults use to make them sleep). • Caretaker gives child medication prescribed for another child, which could result in harm. • Caretaker inappropriately gives psychotropic medication such as lithium which could cause harm to the child. • Caretaker provides excessive amounts of alcohol to child causing impairment, toxicity and/or resulting in potential harm or death. • Caretaker providing illegal substances to a child. • Caretaker and child using illegal substance together. 	<ul style="list-style-type: none"> • Caretaker rubs a touch of whiskey on a teething child's gums. • Caretaker requires a child to try a food the child claims they dislike.

Mental Injury/Emotional Maltreatment		
Mental Injury/Emotional Maltreatment Examples		
Screen In	Screen Out	Screen Out
<ul style="list-style-type: none"> Caretaker threatens child with extreme or vague, but sinister punishment (i.e., torture tactics, dismemberment, threatens to kill pet, etc.). Caretaker shaves a child's head in order to humiliate, punish or cause emotional harm to a child. Caretaker kills a child's pet as a means to torture, humiliate or cause emotional harm to a child. Caretaker encourages child to engage in criminal/delinquent behavior. Child displays indicators of mental injury as a result of the prolonged effects of activity, threats of torture and/or ritualistic maltreatment by caretaker. Suspicion of mental injury of a child may include multiple or a combination of stress related behaviors as a result of caretaker harm or threat of harm such as bedwetting, nightmares, cowering, etc. Caretaker is constantly belittling the child in a way that is likely to result in mental injury or emotional trauma. 	<ul style="list-style-type: none"> Caretaker is loud and may yell at the child, but the child does not demonstrate fear or mental injury. Disciplines child by yelling without threat of harm to child. Child is exhibiting a mental health issue, not the result of the caretaker's behavior. Caretaker exposes child to an isolated, frightening activity or distressful event with no likelihood of mental injury or emotional trauma and there is no intent to harm, humiliate or cause fear. Caretaker shaves a child's head to treat severe and recurring head lice. 	

Related ORC and OAC Rules and Definitions:
Because of acts of his parents, guardian, or custodian, suffers physical or mental injury that harms or threatens to harm the child's health or welfare (ORC 2151.031).

*Mental injury results in harm of a child due to the acts of the parent, guardian, or custodian. A child exhibits behavioral, cognitive and/or emotional concerns indicative of a possible mental disorder (diagnosis not required at receipt of referral).

Trafficking in Persons and Compelling Prostitution

Related ORC and OAC Rules and Definitions:

ORC 2905.32

(A) No person shall knowingly recruit, lure, entice, isolate, harbor, transport, provide, obtain, or maintain, or knowingly attempt to recruit, lure, entice, isolate, harbor, transport, provide, obtain, or maintain, another person if any of the following applies:

(1) The offender knows that the other person will be subjected to involuntary servitude or be compelled to engage in sexual activity for hire, engage in a performance that is obscene, sexually oriented, or nudity oriented, or be a model or participant in the production of material that is obscene, sexually oriented, or nudity oriented.

(2) The other person is less than eighteen years of age or is a person with a developmental disability whom the offender knows or has reasonable cause to believe is a person with a developmental disability, and either the offender knows that the other person will be subjected to involuntary servitude or the offender's knowing recruitment, luring, enticement, isolation, harboring, transportation, provision, obtaining, or maintenance of the other person or knowing attempt to recruit, lure, entice, isolate, harbor, transport, provide, obtain, or maintain the other person is for any of the following purposes:

- (a) To engage in sexual activity for hire.
- (b) To engage in a performance for hire that is obscene, sexually oriented, or nudity oriented.
- (c) To be a model or participant for hire in the production of material that is obscene, sexually oriented, or nudity oriented.

ORC 2907.21

(A) No person shall knowingly do any of the following:

(1) Compel another to engage in sexual activity for hire;

(2) Induce, procure, encourage, solicit, request, or otherwise facilitate either of the following:

(a) A minor to engage in sexual activity for hire, whether or not the offender knows the age of the minor;

(b) A person the offender believes to be a minor to engage in sexual activity for hire, whether or not the person is a minor.

(3)(a) Pay or agree to pay a minor, either directly or through the minor's agent, so that the minor will engage in sexual activity, whether or not the offender knows the age of the minor;

(b) Pay or agree to pay a person the offender believes to be a minor, either directly or through the person's agent, so that the person will engage in sexual activity, whether or not the person is a minor.

(4)(a) Pay a minor, either directly or through the minor's agent, for the minor having engaged in sexual activity pursuant to a prior agreement, whether or not the offender knows the age of the minor;

(b) Pay a person the offender believes to be a minor, either directly or through the person's agent, for the person having engaged in sexual activity pursuant to a prior agreement, whether or not the person is a minor.

(5)(a) Allow a minor to engage in sexual activity for hire if the person allowing the child to engage in sexual activity for hire is the parent, guardian, custodian, person having custody or control, or person in loco parentis of the minor;

(b) Allow a person the offender believes to be a minor to engage in sexual activity for hire if the person allowing the person to engage in sexual activity for hire is the parent, guardian, custodian, person having custody or control, or person in loco parentis of the person the offender believes to be a minor, whether or not the person is a minor.

Trafficking in Persons and Compelling Prostitution Examples	
Screen In	Screen Out
<ul style="list-style-type: none">Child is subjected to forced labor (including labor in illicit industries such as drug trafficking) and/or commercial sex.Child is "branded" (through tattooing or other means) for the purpose of or in relation to subjecting the child to forced labor (including labor in illicit industries such as drug trafficking) and/or commercial sex.	<ul style="list-style-type: none">Child is subjected to non-excessive corporal punishment to increase compliance with appropriate household chores.

SEXUAL ABUSE

Investigations of sexual abuse reports shall be categorized to include **Intra-Familial Investigations, Specialized Assessment/Investigations and/or Stranger Danger.**

- **Intra-Familial Investigations** of sexual abuse include an alleged perpetrator who:
 - Is a member of the alleged child victim's family.
 - Is known to the family or child and has had access to the alleged child victim, whether or not the access was known or authorized by the child's parent, guardian, or custodian (*regardless of continued access, the service needs of the child and family should be considered.*)
 - Is involved in daily or regular care for the alleged child victim, excluding a person responsible for the care of a child in an out-of-home care setting.
- Examples of an Intra-Familial Alleged Perpetrator of sexual abuse are mother, father, stepparent, paramour (living in the home) of the parent/caretaker, an uncle, kinship provider, neighbor, an unlicensed daycare provider, etc.
- **Specialized Assessment/Investigations** includes an Alleged Perpetrator of sexual abuse who meets the definition of an Out-of-Home care setting; are responsible for the physical care/custody and control of a child; and/or has access to a child by virtue of his/her employment/affiliation to an institution. An example of a Specialized Assessment/Investigation Alleged Perpetrator includes a teacher, boy/girl scout leader, day camp counselor, licensed foster parent, licensed daycare provider, etc. *this does not include kinship.*
 - "Out-of-Home Care Setting" is a detention facility, shelter facility, foster home, pre-finalized adoptive placement, certified foster home, approved foster care, organization, certified organization, child day-care center, type A family day-care home, type B family day-care home, group home, institution, state institution, residential facility, residential care facility, residential camp, day camp, hospital, medical clinic, children's residential center, public or nonpublic school, or respite home that is responsible for the care, physical custody or control of a child.
- **Stranger Danger** Investigations of sexual abuse include an Alleged Perpetrator who was unknown to the alleged child victim and the alleged child victim's family prior to the incident(s).
 - A PCSA shall conduct a Stranger Danger Investigation in response to a child abuse report alleging a criminal act against a child of assault or sexual activity as defined under ORC Chapter 2907.

To identify a child as an Alleged Perpetrator, the PCSA shall consider:

- The child's capacity to determine right and wrong and the consequences of his/her actions.
- The age of the child.
- Any developmental disabilities (OAC 5101:2-1-01 (B)(100); ORC 5123.01).
- If a pattern of behaviors is present and/or if extenuating circumstances exist.

*A child under the age of ten shall not be named as an Alleged Perpetrator unless the agency determines otherwise based on the severity of the allegations and/or history. The PCSA may consider serving a child under the age of ten or a child over the age of ten who does meet the above criteria to be named as an Alleged Perpetrator, as a victim of suspected sexual abuse with an Unknown Perpetrator.

Consider the following when making a Screening Decision:

- What was the response of parent to the alleged allegations?
- Was medical treatment sought for the ACV and if not, what were the circumstances?
- Were mental health services sought for the ACV and if not, what were the circumstances?
- Does a cross referral to Law Enforcement need to be made?
- Is the family currently involved in services?
- Should a referral to the local Children's Advocacy Center (CAC) be made?

Considerations for Sexual Activity Between Young Children of Similar Age:

- Opening two separate cases for each individual ACV with an Unknown AP; each ACV is named as a collateral and/or other involved child (OIC) on the reciprocal intake.
- Opening only on the "aggressor" as the ACV with an Unknown AP (consider the behavior/knowledge of the ACV).
- Parent(s) response to the information.
- Emotional response.
- Does the ACV have the cognitive ability to consent {website: www.DODD.ohio.gov}.

*Examples provided are not all inclusive. If more than one referral type is present, the totality of the circumstances should be used in the consideration of a screen in. If necessary, consult legal advisor.

Sexual Abuse

The term "caretaker" is used throughout the Screening Guidelines outside of the definition in Ohio Revised Code (ORC). Within this document "caretaker" is used to represent; parent, guardian, custodian, and/or adult.

Sexual Abuse has the following areas to consider:

- Sexual Abuse of a Child
 - Sexting/Social Media
 - Trafficking in Persons
- ✓ Consideration for cross reporting to law enforcement should be considered for all Sexual Abuse allegations regardless of whether the referral is screened in or screened out.
- ✓ Consideration for a referral to the local Children's Advocacy Center (CAC) should be considered for all Sexual Abuse allegations regardless of whether the referral is screened in or screened out.

Related ORC and OAC Rules and Definitions:

Rape

Engaging in sexual conduct with another who is less than thirteen years of age, whether or not the offender knows the age of the other person; engaging in sexual conduct with another when the offender purposely compels the other person to submit by force or threat of force; impairing the other's judgement or control by administering any drug, intoxicant or controlled substance by force, threat of force or deception. (ORC 2907.02)

Sexual Conduct means vaginal intercourse between a male and female; anal intercourse, fellatio, and cunnilingus between persons regardless of sex; and, without privilege to do so, the insertion, however slight, of any part of the body or any instrument, apparatus, or other object into the vaginal or anal cavity of another. Penetration, however slight, is sufficient to complete vaginal or anal intercourse. (ORC 2907.01)

Sexual Battery

Engaging in sexual conduct with another when the offender coerces the other person to submit by any means that would prevent resistance by a person of ordinary resolution; the offender is the other person's natural or adoptive parent, stepparent, guardian, custodian, or person in loco parentis; the offender is a teacher, administrator, coach, or other person in authority employed by a school. (ORC 2907.03)

*See above for definition of sexual conduct

Unlawful Sexual Conduct with a Minor

Person who is eighteen or older engaging in sexual conduct with another, who is not the spouse of the offender, and the offender knows the other person is thirteen years of age or older, but less than sixteen years of age or the offender is reckless in that regard, (ORC 2907.04)

Gross Sexual Imposition

Person having sexual contact with another, not the spouse of the offender; causing another to have sexual contact with the offender; or cause two or more other persons to have sexual contact when any of the following apply:

1. The offender purposely compels the other person, or one of the other persons to submit by force or threat of force.
 2. For the purpose of preventing resistance, the offender substantially impairs the judgement or control of the other person or of one of the other persons by administering any drug, intoxicant or controlled substance to the other person surreptitiously or by force, threat of force or deception.
 3. The offender knows that the judgement or control of the other person or of one of the other persons is substantially impaired as a result of the influence of any drug or intoxicant administered to the other person with the other person's consent for the purpose of medical or dental examination, treatment, or surgery.
 4. The other person, or one of the other persons, is less than thirteen years of age, whether or not the offender knows the age of that person.
 5. The ability of the other person to resist or consent or the ability of one of the other persons to resist or consent is substantially impaired because of a mental or physical condition, and the offender knows or has reasonable cause to believe that the ability to resist or consent of the other person or of one of the other persons is substantially impaired because of a mental or physical condition.
- Knowingly touching the genitalia of another, when the touching is not through clothing, the other person is less than twelve years old, whether or not the offender knows the age of that person, and the touching is done with the intent to abuse, humiliate, harass, degrade, or arouse or gratify the sexual desire of any person. (ORC 2907.05)

Sexual Imposition means having sexual contact with another, cause another to have sexual contact with the offender; or cause two or more other persons to have sexual contact when the other person, or one of the other persons, is thirteen years or age or older but less than sixteen years of age, whether or not the offender knows the age of such person, and the offender is at least eighteen years of age and four or more years older than such other person. (RC 2907.06(A)(4))

Sexual Contact means any touching of an erogenous zone of another, including without limitation the thigh, genitals, buttocks, pubic region, or, if the person is a female, a breast, for the purpose of sexually arousing or gratifying either person. (ORC 2907.01)

Disseminating Material Harmful to a Juvenile

No person shall recklessly do any of the following:

1. Sell, deliver, furnish, disseminate, provide, exhibit, rent or present to a juvenile any material or performance that is obscene or harmful to juveniles;
2. Offer or agree to sell, deliver, furnish, disseminate, provide, exhibit rent or present to a juvenile any material or performance that is obscene or harmful to juveniles;

3. Allow any juvenile to review or peruse any material or view any live performance that is harmful to juveniles
(ORC 2907.31)

Illegal Use of Minor in Nudity-Oriented Material or Performance

- A. No person shall photograph any minor who is not the person's child or ward in a state of nudity, or create, direct, produce or transfer any material or performance that shows the minor in a state of nudity, unless both of the following apply:
1. The material or performance is, or is to be, sold, disseminated, displayed, possessed, controlled, brought or caused to be brought into this state, or presented for a bona fide artistic, medical, scientific, educational, religious, governmental, judicial or other proper purpose, by or to a physician, psychologist, sociologist, scientist, teacher, person pursuing bona fide studies or research, librarian, clergyman, prosecutor, judge, or other person having a proper interest in the material or performance;
 2. The minor's parents, guardians, or custodian consents in writing to the photographing of the minor, to the use of the minor in the material or performance, or to the transfer of the material to the specific manner in which the material or performance is to be used;
- B. No person shall consent to the photographing of the person's minor child or ward, or photograph of person's minor child or ward, in a state of nudity or consent to the use of the person's minor child or ward in a state of nudity in any material or performance, or use or transfer a material or performance of that nature, unless the material or performance, is sold, disseminated, displayed, possessed, controlled, brought or caused to be brought into this state, or presented for a bona fide artistic, medical, scientific, educational, religious, governmental, judicial or other proper purpose, by or to a physician, psychologist, sociologist, scientist, teacher, person pursuing bona fide studies or research, librarian, clergyman, prosecutor, judge, or other person having proper interest in the material or performance
(ORC 2907.323) *

*For explicit materials produced or exchanged for something of value, see screening guidance regarding trafficking in persons.

Screen In	Sexual Abuse of a Child Sexual Abuse Examples	Screen Out
<ul style="list-style-type: none"> • Child under the age of eighteen, engaged in sexual activity with any intra-familial individual (i.e., sexual activity between siblings- full, half, step) regardless of force or coercion. <ul style="list-style-type: none"> ○ When a report alleges that there is no longer ongoing contact with the AP, PCSA should consider the service needs of the child victim and family. 	<ul style="list-style-type: none"> • Child sixteen years and older engaging in consensual contact with a non-related person(s) over the age of sixteen. 	<ul style="list-style-type: none"> • Child fifteen years old engaging in consensual sexual activity with an adult eighteen years of age.

<ul style="list-style-type: none"> ○ Any criterion of a sexually abused child that occurs with the AP being a caretaker of the child or an individual whose role and/or relationship with the child indicates coercion. ○ Anogenital injury, physical findings, or lab results (i.e., diagnosis of a Sexually Transmitted Disease) suspicious for sexual abuse in prepubertal children. ● Sexual activity between any child thirteen to fifteen years of age and any person(s) more than four years older in age. 	<ul style="list-style-type: none"> ● Sexual activities are discussed in presence of child with no intent to engage or entice child. ● Child finds/views pornographic material in the home without consent of the caretaker(s) and the caretaker(s) are taking steps to prevent recurrence. ● Child inadvertently observes sexual activity and caretaker takes steps to prevent a recurrence (no intent).
	<ul style="list-style-type: none"> ● Sexual behaviors that may be considered normal and age-appropriate: <ul style="list-style-type: none"> ○ Masturbation in private ○ Masturbating in a place that may not be appropriate but can be redirected to stop ○ Playing doctor between similar age children ○ Mutual disrobing or exploration of the body without force or coercion when developmentally appropriate ● A forcible sexual act between similar aged, developmentally similar minors (i.e., date rape).
	<ul style="list-style-type: none"> ● For the purpose of sexual gratification/exploitation, which can include but is not limited to the following: <ul style="list-style-type: none"> ○ Engages a child in touching adult's genitals ○ Touching child's genitals for reasons other than hygiene ○ Adult masturbates in presence of child ○ Adult engaging child in act of masturbation ○ Adult rubbing genitals against child's genital-rectal area, inner thigh, or buttocks ○ Making no effort to prevent child from observing sexual behavior ○ Disseminating or showing a child photographs, video and/or any pornographic material ○ Allowing/forcing child to view pornographic material ○ Photography, videotaping and/or viewing the child without clothing or partially clothed for sexual gratification ○ Allowing child to be photographed, videotaped and/or viewed without clothing or partially clothed for sexual gratification ○ Enticing, tricking and/or forcing a child into sexual play ● Convicted sexual offender has contact with child AND there is a suspicion of sexual contact.

	<ul style="list-style-type: none"> A suspicion of sexual contact may include a child exhibiting multiple or a combination of abnormal sexual behaviors and/or inappropriate sexual knowledge. 	
		Sexting/Social Media Examples
		Sexting/Social Media
		Screen In
	<ul style="list-style-type: none"> Adult known to the child and/or family requesting sexually explicit materials and/or communication from a child. Adult known to the child and/or family sending sexually explicit materials and/or communication to a child. Individual that is four years older than a minor child, requesting and/or sending sexually explicit materials and/or communication. 	<ul style="list-style-type: none"> Adult unknown to the child and/or family requesting sexually explicit materials and/or communication from a child. Adult unknown to the child and/or family sending sexually explicit materials and/or communication to a child. Child sending another similar aged child sexually explicit material and/or communication. Child receives sexually explicit materials and/or communication and sends out to other people.
		Screen Out
		Trafficking in Persons and Compelling Prostitution
		Related ORC and OAC Rules and Definitions:
		<p>ORC 2905.32</p> <p>(A) No person shall knowingly recruit, lure, entice, isolate, harbor, transport, provide, obtain, or maintain, or knowingly attempt to recruit, lure, entice, isolate, harbor, transport, provide, obtain, or maintain, another person if any of the following applies:</p> <p>(1) The offender knows that the other person will be subjected to involuntary servitude or be compelled to engage in sexual activity for hire, engage in a performance that is obscene sexually oriented, or nudity oriented, or be a model or participant in the production of material that is obscene, sexually oriented, or nudity oriented.</p> <p>(2) The other person is less than eighteen years of age or is a person with a developmental disability whom the offender knows or has reasonable cause to believe is a person with a developmental disability, and either the offender knows that the other person will be subjected to involuntary servitude or the offender's knowing recruitment, luring, enticement, isolation, harboring, transportation, provision, obtaining, or maintenance of the other person or knowing attempt to recruit, lure, entice, isolate, harbor, transport, provide, obtain, or maintain the other person is for any of the following purposes:</p> <p>(a) To engage in sexual activity for hire.</p> <p>(b) To engage in a performance for hire that is obscene, sexually oriented, or nudity oriented.</p>

(c) To be a model or participant for hire in the production of material that is obscene, sexually oriented, or nudity oriented.

ORC 2907.21

(A) No person shall knowingly do any of the following:

(1) Compel another to engage in sexual activity for hire;

(2) Induce, procure, encourage, solicit, request, or otherwise facilitate either of the following:

(a) A minor to engage in sexual activity for hire, whether or not the offender knows the age of the minor;

(b) A person the offender believes to be a minor to engage in sexual activity for hire, whether or not the person is a minor.

(3)(a) Pay or agree to pay a minor, either directly or through the minor's agent, so that the minor will engage in sexual activity, whether or not the offender knows the age of the minor;

(b) Pay or agree to pay a person the offender believes to be a minor, either directly or through the person's agent, so that the person will engage in sexual activity, whether or not the person is a minor.

(4)(a) Pay a minor, either directly or through the minor's agent, for the minor having engaged in sexual activity pursuant to a prior agreement, whether or not the offender knows the age of the minor;

(b) Pay a person the offender believes to be a minor, either directly or through the person's agent, for the person having engaged in sexual activity pursuant to a prior agreement, whether or not the person is a minor.

(5)(a) Allow a minor to engage in sexual activity for hire if the person allowing the child to engage in sexual activity for hire is the parent, guardian, custodian, person having custody or control, or person in loco parentis of the minor;

(b) Allow a person the offender believes to be a minor to engage in sexual activity for hire if the person allowing the person to engage in sexual activity for hire is the parent, guardian, custodian, person having custody or control, or person in loco parentis of the person the offender believes to be a minor, whether or not the person is a minor.*

*If a child is being sexually exploited via a third party (meaning someone is compelling their engagement in commercial sex), the third party should be identified as an Alleged Perpetrator, whether known or unknown (ORC 2907.21, ORC 2905.32)

*If an individual is purchasing sex from a child, that person should be identified as an Alleged Perpetrator, whether known or unknown (ORC 2907.21, ORC 2905.32)

Trafficking in Persons and Compelling Prostitution Examples		Screen Out
Screen In	Screen Out	
Report to law enforcement	<ul style="list-style-type: none">Child exchanges explicit acts or materials with same-aged peers for non-commercial/survival purposes.	

- Child is subjected to any of the above ORC 2905.32 and ORC 2907.21) by a known adult for commercial purposes, meaning child, caretaker, or a third party receives anything of value in exchange for explicit acts or materials, such as:
 - A caretaker is facilitating/allowing the sexual abuse of a child in exchange for money, drugs, housing, or anything of value.
 - A friend or romantic partner is facilitating/allowing the sexual abuse of a child in exchange for money, drugs, or anything of value.
- Child is engaged in “survival sex” with known adults, in which child exchanges explicit acts or materials with others in order to meet child’s needs.
- Child is engaged in commercial sex with known adults, regardless of whether a third party is compelling child to engage.
- Child is involved in the creation of sexually explicit materials (with or without the presence of force, fraud, or coercion) produced or disseminated in exchange for something of value.
- Child is subjected to/compelled to engage in:
 - sexual activity for hire, or engage in a performance that is obscene, or
 - sexually oriented, or nudity oriented, or be a model or participant in the production of material that is obscene, sexually oriented, or nudity oriented.

SCREENING GUIDELINES FOR CHILD NEGLECT

Investigations of reports of neglect shall be categorized to include: an **Intra-Familial Investigations** and **Specialized Assessment/Investigations**.

Intra-Familial Investigations of neglect include an alleged perpetrator who:

- Is a member of the alleged child victim's family.
- Is known to the family or child and has had access to the alleged child victim, whether or not the access was known or authorized by the child's parent, guardian, or custodian (*regardless of continued access, the service needs of the child and family should be considered*).
- Is involved in daily or regular care for the alleged child victim, excluding a person responsible for the care of a child in an out-of-home care setting.

Examples of an Intra-Familial Alleged Perpetrator of neglect are mother, father, stepparent, paramour (living in the home) of the parent/caretaker, an uncle, kinship provider, neighbor, an unlicensed daycare provider, etc.

Specialized Assessment/Investigations includes an Alleged Perpetrator of neglect who meets the definition of an Out-of-Home care setting; are responsible for the physical care/custody and control of a child; and/or has access to a child by virtue of his/her employment/affiliation to an institution. An example of a Specialized Assessment/Investigation Alleged Perpetrator includes a teacher, Boy/Girl Scout leader, day camp counselor, licensed foster parent, licensed daycare provider, etc. *this does not include kinship*).

- "Out-of-Home Care Setting" is a detention facility, shelter facility, foster home, pre-finalized adoptive placement, certified foster home, approved foster care, organization, certified organization, child day-care center, type A family day-care home, type B family day-care home, group home, institution, state institution, residential facility, residential care facility, residential camp, day camp, hospital, medical clinic, children's residential center, public or nonpublic school, or respite home that is responsible for the care, physical custody or control of a child.

*Examples provided are not all inclusive. If more than one referral type is present, the totality of the circumstances should be used in the consideration of a screen in. If necessary, consult legal advisor.

Neglect

The term "caretaker" is used throughout the Screening Guidelines outside of the definition in Ohio Revised Code (ORC). Within this document "caretaker" is used to represent; parent, guardian, custodian, and/or adult.

Neglect has the following areas to consider:

- Failure to Provide Basic Needs
- Lack of Utilities
- Homelessness
- Lack of Supervision
- Dirty of Unsafe Home
- Child's Poor Hygiene
- Insects or Rodents
- Substance Use/Drug Activity
- Child Substance Abuse
- Educational Neglect
- Failure to Thrive (non-organic)
- Medical Neglect
- Infant Safe Sleep

Failure to Provide Basic Needs

Related ORC and OAC Rules and Definitions:

Child who is abandoned by the child's parent, guardian, or custodian (ORC 2151.03)

- To constitute abandonment, a parent must willfully leave a child with the intention of causing perpetual separation. A child is presumed abandoned when the parent has failed to visit or maintain contact with the child for more than ninety days, regardless of whether the parent resumes contact with the child after that period of ninety days. (ORC 2151.011(C))

Child who lacks adequate parental care because of the faults or habits of the child's caretaker (ORC 2151.03)

- Adequate parental care is the provision of adequate food, clothing, and shelter to ensure the child's health and physical safety and the provision of specialized services warranted by the child's physical or mental needs. (ORC 2151.011)

- Because of the omission of the child's caretaker, the child suffers physical or mental injury that harms or threatens to harm the child's health or welfare. (ORC 2151.03)
- “Mental Injury” is any behavioral, cognitive, emotional, or mental disorder in a child caused by an act or omission endangering a child and is committed by the parent or other person responsible for the child’s care (ORC 2151.011).
- *See conditions of an endangered child in description of an abused child.

Failure to Provide Basic Needs Examples	
Screen In	Screen Out
<ul style="list-style-type: none"> Child is deceased as a result of caretaker negligence, regardless of whether there are other children in the home Caretaker leaves child with an inappropriate caretaker or no caretaker. Caretaker can no longer provide for child's basic needs and parent's whereabouts are unknown. Caretaker refuses to make alternate arrangements for child at caretaker's request. Caretaker fails to provide child with food, shelter, or clothing. Caretaker tells child not to return home and has not arranged for another to meet child's needs. 	<ul style="list-style-type: none"> Caretaker leaves child in the care of willing and appropriate relative or kin. Child left with non-custodial parent beyond court ordered visitation. Child living with a non-custodial adult and their needs are being met, including school and medical; caretaker is willing to continue caring for the child (refer dependency guidelines for re-homing criteria). Caretaker allows child to reside with another who is providing for the child's basic needs. Caretaker provides food and child refuses to eat.
Lack of Utilities Examples	Screen Out
<ul style="list-style-type: none"> Lack of utilities without access to alternative provisions which cause a threat of serious harm to child, as a result of the faults or habits of caretaker (i.e., lack of electricity for an infant who requires an apnea monitor; no access to water for personal hygiene; no heat source in winter). 	<ul style="list-style-type: none"> Lack of utilities with access to alternative provisions and no threat of serious harm exists (i.e., no water in the home, but parent brings water into the home or utilizes neighbor's facilities).

Homelessness		Homelessness Examples	Screen Out
Screen In	Screen Out	Screen In	Screen Out
<ul style="list-style-type: none"> Homelessness and basic needs are not met. Homelessness as a result of the faults and habits of the caretaker (i.e., substance abuse). 	<ul style="list-style-type: none"> Homeless however, basic needs being met by an alternate source. 		
Lack of Supervision	Lack of Supervision Examples	Screen In	Screen Out
		<ul style="list-style-type: none"> Factors to be considered in determining the need for supervision: age; development and maturity level of child; special needs of the child; unruly or delinquent behaviors of the child; mental health issues of the child; child's current environment; child's awareness of safety issues and ability to institute knowledge; responsibility for siblings or younger children. Harm or potential harm exists because of being left alone or without monitoring. Child out in community unsupervised or supervised by inappropriate caretaker and a threat of serious harm exists. Young child playing with dangerous objects or in dangerous places without intervention. Infants/toddlers in home or car without direct supervision. Caretaker encourages or fails to intervene in sexual activity of a child as outlined in the Sexual Abuse Guidelines. 	<ul style="list-style-type: none"> Child understands safety issues and has access to resources (i.e., an adult by phone, neighbor, etc. when left alone). Amount of time child is left is appropriate to child's age and development and child is not fearful.

	Dirty or Unsafe Home Examples	Screen In	Screen Out
• Caretaker is knowledgeable of and fails to intervene or allows unsupervised contact between an alleged perpetrator of indicated or substantiated sexual abuse and/or a convicted sexual offender and his/her victim.		<ul style="list-style-type: none"> Based on child's age and developmental status, home content presents health or safety hazard (i.e., clutter or debris are present to the point that it prevents entrance to or exit from dwelling; exposed wiring within reach of child; uncovered holes in exterior doors, windows; unstable physical structure; fire hazard [combustible material near furnace]; excessive garbage or rotted food that threatens health; human/animal waste accessible in living quarters; bugs and/or rodents that pose a health and safety hazard; improper disposal of human waste). Factors to be considered when determining if intervention is needed when a child has access to weapons/ammunition (i.e., knives, guns, sharps); age; development and maturity level of child; special needs of child; unruly or delinquent behaviors of the child; mental health issues of the child; child's current environment; child's awareness of safety issues and ability to institute knowledge. 	<ul style="list-style-type: none"> Dirty home without hazards or safety issues. Clutter of dirty clothes, newspapers, boxes, etc. that does not interfere with entrance to and exit from the home. Caretaker takes the appropriate steps to secure weapons/ammunition.
		Child's Poor Hygiene Examples	Screen In
			<ul style="list-style-type: none"> Child's emotional and/or physical health is being impacted by this issue (i.e., bleeding, painful rash, skin condition, loss of teeth or hair, chronic tooth pain) and caretaker makes no attempt to address this issue. Child has poor hygiene, absent a health risk. Child has dirty clothes. Child has access and chooses not to wear clean clothing.

<ul style="list-style-type: none"> Child is bullied, isolated, or made fun of due to poor hygiene and caretaker makes no attempt to rectify the situation. 					
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	<ul style="list-style-type: none"> Caretaker is unaware of child's substance abuse. 				
Educational Neglect					
<p>Related ORC and OAC Rules and Definitions: Child whose caretaker neglect the child or refuses to provide proper or necessary subsistence, education, medical or surgical care or treatment, or other care necessary for the child's health, morals, or well-being. (ORC 2151.03)</p> <p>*Compulsory School Age is a child between six and eighteen years of age for the purpose of ORC sections 3321.01 to 3321.13. A child under six years of age who has been enrolled in kindergarten also shall be considered "of compulsory school age" for the purpose of ORC sections 3321.01 to 3321.13 unless at any time the child's caretaker, at the caretaker's discretion and in consultation with the child's teacher and principal, formally withdraws the child from kindergarten. The compulsory school age of a child shall not commence until the beginning of the term of such schools, or other time in the school year fixed by the rules of the board of the district in which the child resides. (ORC 3321.01)</p> <p>*Habitual Truant means any child of compulsory school age who is absent without legitimate excuse for absence from the public school the child is supposed to attend for thirty or more consecutive hours, forty-two or more hours in one school month, or seventy- two or more hours in a school year. (ORC 2151.011)</p>	<p>Educational Neglect Examples</p> <table border="1"> <thead> <tr> <th>Screen In</th> <th>Screen Out</th> </tr> </thead> <tbody> <tr> <td> <ul style="list-style-type: none"> Truancy officer and/or school staff have made reasonable efforts to engage caretaker in resolving enrollment/attendance issues with no resolution. Truancy officer refers concerns to Juvenile Court and the court requests agency involvement. Caretaker consistently has older sibling stay home from school to care for younger children. Due to faults/habits of the caretaker, the child has missed school to the extent that academic progress is impeded. </td> <td> <ul style="list-style-type: none"> Community truancy officer and/or school staff engages caretaker for resolution. Five-year-old child not attending kindergarten. Child repeatedly misses school due to ongoing medical issues with verification of medical treatment. Caretaker is home schooling child. Teenager repeatedly truant, however caretaker attempts to intervene or has no knowledge of truancy. </td> </tr> </tbody> </table>	Screen In	Screen Out	<ul style="list-style-type: none"> Truancy officer and/or school staff have made reasonable efforts to engage caretaker in resolving enrollment/attendance issues with no resolution. Truancy officer refers concerns to Juvenile Court and the court requests agency involvement. Caretaker consistently has older sibling stay home from school to care for younger children. Due to faults/habits of the caretaker, the child has missed school to the extent that academic progress is impeded. 	<ul style="list-style-type: none"> Community truancy officer and/or school staff engages caretaker for resolution. Five-year-old child not attending kindergarten. Child repeatedly misses school due to ongoing medical issues with verification of medical treatment. Caretaker is home schooling child. Teenager repeatedly truant, however caretaker attempts to intervene or has no knowledge of truancy.
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	<ul style="list-style-type: none"> • Caretaker not participating in child's IEP and/or parent/teacher conferences. • Child is sent home or cannot return to school due to the school's policy.
	<p style="text-align: center;">Failure to Thrive (non-organic) Examples</p>
	<p style="text-align: center;">Screen In</p> <ul style="list-style-type: none"> • Child is diagnosed, or medical professional has suspicion of failure to thrive for non-organic reasons. • Child is diagnosed as organic failure to thrive, and caretaker is not willing or able to seek or follow through with medical treatment. • Caretaker is not providing adequate sustenance, care, etc. to sustain life, weight gain and/or growth.
	<p style="text-align: center;">Screen Out</p> <ul style="list-style-type: none"> • Child is diagnosed as failure to thrive (organic) and caretaker is seeking medical care.
	<p style="text-align: center;">Medical Neglect Examples</p>
	<p style="text-align: center;">Screen In</p> <ul style="list-style-type: none"> • Caretaker uses for self and/or sells child's prescription and does not provide it to the child. • Failure to obtain or follow through with medical/mental health treatment that has an impact on the child's life functioning. • Failure to provide or unreasonable delay in seeking medical care for a condition that could cause permanent disability if not treated. • Failure to provide emergency medical care for a potential life-threatening condition, illness, or injury. • Failure to seek medical, psychological and/or psychiatric care for child who is verbalizing or making gestures that are attempts to
	<p style="text-align: center;">Screen Out</p> <ul style="list-style-type: none"> • Refusal and/or failure of medical treatment does not impact the child's health and safety; this could include decisions based on religious beliefs. • Child has minor symptoms that are not life threatening; this could include decisions based on religious beliefs. • Child has terminal illness/disease and caretaker chooses not to utilize and/or continue extraordinary medical treatment based on moral/religious beliefs. • Failure to attend well child check-ups. • Caretaker chooses not to immunize child.

<ul style="list-style-type: none"> cause serious harm to him/herself (i.e., self-mutilation, eating disorder, suicidal threat). Caretaker acts against medical advice for a life-threatening condition or without seeking a second opinion. 	<ul style="list-style-type: none"> Caretaker chooses not to administer medical or mental health medication that does not have an impact on the child's life functioning. Caretaker seeks medical or psychological care for child's suicide attempt.
Related ORC and OAC Rules and Definitions: Per ORC 3701.66 and 3701.67: PCAs are required to distribute infant safe sleep education materials when the agency has initial contact with an infant's parent, guardian, or other person responsible for the infant.	
NOTE: It is important to take into consideration cultural norms, values, and beliefs when screening infant safe sleep as co-sleeping is permissible and a parental decision.	
Infant Safe Sleep Examples	
Screen In	
<ul style="list-style-type: none"> Caretaker is co-sleeping with an infant while impaired. Unsafe sleeping environment results in death or serious harm. 	<ul style="list-style-type: none"> Infant sleeps in the same room as caretaker, but in his/her own crib. Infant sleeping alone on their back, and in a crib (a.k.a., ABC).
Trafficking in Persons and Compelling Prostitution	
Related ORC and OAC Rules and Definitions:	
ORC 2905.32	
(A) No person shall knowingly recruit, lure, entice, isolate, harbor, transport, provide, obtain, or maintain, or knowingly attempt to recruit, lure, entice, isolate, harbor, transport, provide, obtain, or maintain, another person if any of the following applies:	
(1) The offender knows that the other person will be subjected to involuntary servitude or be compelled to engage in sexual activity for hire, engage in a performance that is obscene, sexually oriented, or nudity oriented, or be a model or participant in the production of material that is obscene, sexually oriented, or nudity oriented.	
(2) The other person is less than eighteen years of age or is a person with a developmental disability whom the offender knows or has reasonable cause to believe is a person with a developmental disability, and either the offender knows that the other person will be subjected to involuntary servitude or the offender's knowing recruitment, luring, enticement, isolation, harboring, transportation, provision, obtaining, or maintenance of the other person or knowing attempt to recruit, lure, entice, isolate, harbor, transport, provide, obtain, or maintain the other person for any of the following purposes:	
(a) To engage in sexual activity for hire; (b) To engage in a performance for hire that is obscene, sexually oriented, or nudity oriented; (c) To be a model or participant for hire in the production of material that is obscene, sexually oriented, or nudity oriented.	

ORC 2907.21

- (A) No person shall knowingly do any of the following:
- (1) Compel another to engage in sexual activity for hire;
 - (2) Induce, procure, encourage, solicit, request, or otherwise facilitate either of the following:
 - (a) A minor to engage in sexual activity for hire, whether or not the offender knows the age of the minor;
 - (b) A person the offender believes to be a minor to engage in sexual activity for hire, whether or not the person is a minor.
 - (3)(a) Pay or agree to pay a minor, either directly or through the minor will engage in sexual activity, whether or not the offender knows the age of the minor;
 - (b) Pay or agree to pay a person the offender believes to be a minor, either directly or through the person's agent, so that the person will engage in sexual activity, whether or not the person is a minor.
 - (4)(a) Pay a minor, either directly or through the minor's agent, for the minor having engaged in sexual activity pursuant to a prior agreement, whether or not the offender knows the age of the minor;
 - (b) Pay a person the offender believes to be a minor, either directly or through the person's agent, for the person having engaged in sexual activity pursuant to a prior agreement, whether or not the person is a minor.
- (5)(a) Allow a minor to engage in sexual activity for hire if the person allowing the child to engage in sexual activity for hire is the parent, guardian, custodian, person having custody or control, or person in loco parentis of the minor;
- (b) Allow a person the offender believes to be a minor to engage in sexual activity for hire if the person allowing the person to engage in sexual activity for hire is the parent, guardian, custodian, person having custody or control, or person in loco parentis of the person the offender believes to be a minor, whether or not the person is a minor.

Trafficking in Persons and Compelling Prostitution Examples

Screen In	Screen Out
<ul style="list-style-type: none">• Caretaker is aware child is subjected to forced labor and/or sex trafficking (including survival sex and child engaging in commercial sex without apparent compulsion) and fails to report this information to appropriate authorities or attempt to keep child safe from exploitation.• Caretaker is aware child is involved in the creation of sexually explicit materials (with or without the presence of force, fraud, or coercion) produced or disseminated in exchange for something of value and fails to report this information to appropriate authorities or attempt to keep child safe from exploitation.	<ul style="list-style-type: none">• Caretaker has no knowledge that child is being exploited.

SCREENING GUIDELINES FOR DOMESTIC VIOLENCE/INTIMATE PARTNER VIOLENCE

Investigations of domestic violence (DV)/Intimate Partner Violence (IPV) reports shall be categorized to include **Intra-Familial investigations or Specialized Assessment/Investigations**.

1. **Intra-Familial Investigations** of DV/IPV include an alleged perpetrator who:
 - Is a member of the alleged child victim's family or household.
 - Is known to the family or child and has had access to the alleged child victim, whether or not the access was known or authorized by the child's parent, guardian, or custodian (*regardless of continued access, the service needs of the child and family should be considered*).
 - Is involved in daily or regular care for the alleged child victim, excluding a person responsible for the care of a child in an out-of-home care setting.Examples of an Intra-Familial Alleged Perpetrator of DV/IPV are mother, father, stepparent, paramour of the parent/caretaker, an uncle, kinship provider, neighbor, an unlicensed daycare provider, etc.

2. **Specialized Assessment/Investigations** of DV/IPV include an alleged perpetrator who meets the definition of an Out-of-Home care setting, is responsible for the physical care/custody and control of a child; and the placement is in a family-like setting (foster home, pre-adoptive home, group home with house parents).

Careful consideration should be given when determining roles of family members on the initial intake to reflect the alleged aggressor/batterer as the alleged perpetrator(s)/adult subject of the report.

When making screening decisions about screening in reports in which law enforcement made an arrest for DV, please ensure it adheres to the criteria outlined in this guide. In these circumstances, the screening decision should be made based on the narrative of a police report versus the actual charge prompting the arrest. If the narrative does not provide adequate information, it may be necessary to contact the reporting officer for additional detail to inform the screening decision.

The following should be considered when historical allegations meet the screen in examples:

- The alleged perpetrator has no current access to the child and/or family and no current safety threat.
- Regardless of continued access, the service needs of the child and family should be considered.

Domestic Violence/Intimate Partner Violence

The term "caretaker" is used throughout the Screening Guidelines outside of the definition in Ohio Revised Code (ORC). Within this document "caretaker" is used to represent; parent, guardian, custodian, and/or adult.

Domestic Violence (DV)/Intimate Partner Violence (IPV) has the following areas to consider:

- Physical Abuse
- Neglect
- Emotional Maltreatment

Related ORC and OAC Rules and Definitions:

Crime of Domestic Violence (ORC 2919.25)

- A. No person shall knowingly cause or attempt to cause physical harm to a family or household member.
- B. No person shall recklessly cause serious physical harm to a family or household member.
- C. No person, by threat of force, shall knowingly cause a family or household member to believe that the offender will cause imminent physical harm to the family or household member.
- Family or household member means any of the following who is residing or has resided with the offender: A spouse, a person living as a spouse, or a former spouse of the offender; parent, a foster parent or a child of the offender, or another person related by consanguinity or affinity to the offender; a parent or a child of a spouse, person living as a spouse, or former spouse of the offender, or another person related by consanguinity or affinity to a spouse, person living as a spouse, or former spouse of the offender; the natural parent of any child of whom the offender is the other natural parent or is the putative other natural parent.
- Person living as a spouse means a person who is living or has lived with the offender in a common law marital relationship, who otherwise is cohabiting with the offender, or who otherwise has cohabited with the offender within five years prior to the date of the alleged commission of the act in question.

Physical Abuse DV/IPV			
Physical Abuse DV/IPV Examples			
Screen In	Screen Out	Screen In	Screen Out
<ul style="list-style-type: none"> Child received injury as a result of incident of DV/IPV. Child witnessed an incident of DV/IPV. Consideration of intensity of incident and potential for serious harm should be taken into account. Refer to neglect or emotional maltreatment guidelines for further consideration. Weapon or threat of a weapon involved in incident of DV/IPV 	<ul style="list-style-type: none"> Verbal argument Child is not present for incident and is not aware of the incident or aware of injury sustained from incident. If the child is aware or the DV/IPV is interfering with the child's basic needs refer to neglect or emotional maltreatment guidelines for consideration. 	<ul style="list-style-type: none"> Neglect DV/IPV 	
<p>Related ORC and OAC Rules and Definitions:</p> <p>A DV/IPV incident(s) are considered physical abuse when the incident could have or has resulted in physical harm to a child.</p> <p>For ORC, see Physical Abuse Screening Guidelines</p>			
Neglect DV/IPV Examples			
Screen In	Screen Out	Screen In	Screen Out
<ul style="list-style-type: none"> Alleged perpetrator/batterer prohibits the survivor from transporting the child to school, medical appointments or accessing financial means to provide food or hygiene items for the child and is not providing these needs as well. 	<ul style="list-style-type: none"> Verbal arguments and/or isolated DV/IPV incident in which children were not present and no impact on caretaker's ability to meet child's basic needs. 		

Emotional Maltreatment DV/IPV Examples	
Screen In	Screen Out
<ul style="list-style-type: none"> • Survivor's injury interferes with his/her ability to provide for the basic needs and daily care of the child and the alleged perpetrator/batterer is not providing these needs as well. • Pattern of DV/IPV in the household interferes with the caretakers' ability to meet child's physical, emotional and safety needs. 	<p>Note: Allegations in which the child's basic needs are being met by either the survivor or the batterer, refer to emotional maltreatment guidelines for consideration.</p> <ul style="list-style-type: none"> • Verbal argument • Child is not present for DV/IPV incident and is not aware of the incident or aware of injury sustained from incident. • Threat of killing family member or pet during the DV/IPV incident

SCREENING GUIDELINES FOR SPECIALIZED ASSESSMENT (OUT-OF-HOME CARE) REPORTS OF CHILD ABUSE & NEGLECT

An **Out-of-Home Care Setting** is a detention facility, shelter facility, foster home, pre-finalized adoptive placement, certified foster home, approved foster care, organization, certified organization, child day-care center, type A family day-care home, type B family day-care home, group home, institution, state institution, residential facility, residential camp, day camp, hospital, medical clinic, therapeutic wilderness camp, children's residential center, public or nonpublic school, or respite home that is responsible for the care, physical custody, or control of a child. (OAC 5101:2-1-01)

Out-of-Home Care means detention facilities, shelter facilities, certified children's crisis care facilities, certified foster homes, placement in a prospective adoptive home prior to the issuance of a final decree of adoption, organizations, certified organizations, child day-care centers, type A family day-care homes, type B family day-care homes, child care provided by in-home aides, group home providers, group homes, institutions, state institutions, residential facilities, residential care facilities, residential camps, day camps, private, nonprofit therapeutic wilderness camps, public schools, chartered nonpublic schools, educational service centers, hospitals, and medical clinics that are responsible for the care, physical custody, or control of children. ORC 2151.011 (28)

- **Organization** means any institution, public, semipublic, or private and any private association, society, or agency located or operating in the state, incorporated or unincorporated, having among its functions the furnishing of protective services or care for children, or the placement of children in certified foster homes or elsewhere.

A **Specialized Assessment/Investigation** includes an alleged perpetrator who meets the definition of an Out-of-Home care setting; are responsible for the physical care/custody and control of a child; and/or has access to a child by virtue of his/her employment/affiliation to an organization. (OAC 5101:2-36-04)

- Is a person responsible for the alleged child victim's care in an out-of-home setting as defined above;
- Has access to the child by virtue of his/her employment by or affiliation with an organization; or
- Has access to the child through (AP or child's) placement in an Out-of-Home care setting.

Examples: teacher, boy/girl scout leader, day camp counselor, foster parent, daycare provider, private music teacher, sports coach, etc.

Timelines for Out-of-Home Care (OHC) Notifications:

- OAC 5101:2-36-01 (J), Intake and Screening Procedures for Child Abuse, Neglect, Dependency and Family in Need of Services Reports; and Information and/or Referral Intakes. If the PCSA screens out a referral of abuse or neglect and a principal of the report is a person responsible for the child's care in an out-of-home care setting pursuant to rule 5101:2-1-01 of the Administrative Code, the PCSA shall notify licensing and supervising authorities, as appropriate, no later than four working days from the date of the screening decision to share information.

- OAC 5101:2-36-04 (L), PCSA Requirements for Conducting a Specialized Assessment/Investigation, paragraph. If the PCSA conducts a specialized assessment/investigation, the PCSA shall:
 - (1) Within twenty-four hours of the screening decision contact the out-of-home care setting administrative officer, director, or other chief administrative officer, or if the administrative officer, director, or other chief administrative officer is alleged to be the perpetrator, the board of directors, county commissioners, or law enforcement as applicable in order to:
 - (a) Share information regarding the report.
 - (b) Discuss what actions have been taken to protect the alleged child victim.
 - (c) Provide information about the assessment/investigation activities that will follow.

Cross-Referring Reports:

- 5101:2-36-12 (D), PCSA requirement for cross-referring reports of child abuse and/or neglect. The PCSA shall contact the following licensing and supervising authorities, as applicable, no later than the next working day from the date the referral was screened in to share information pursuant to rules 5101:2-33-21 and 5101:2-36-04 of the Ohio Administrative Code:
 - (1) The Ohio Department of Developmental Disabilities (ODDD) Division of Developmental Centers Quality Assurance if the report involves a developmental center managed by ODDD; or the office of licensure if the report involves a foster or group home licensed by ODDD
 - (2) The local county board of developmental disabilities (DD) if the report involves any program managed by the county board of DD.
 - (3) The local board of alcohol, drug addiction, and mental health and the Ohio department of mental health and addiction services (ODMHAS) if the report involves a residential care facility licensed by ODMHAS.
 - (4) The Ohio department of youth services' (ODYS) chief inspector if the report involves an institution or facility for delinquent children managed by ODYS; or the juvenile judge and ODYS' division of parole, courts, and community services if the report involves a detention or rehabilitation facility managed by a juvenile court and approved by ODYS.
 - (5) The superintendent of the local schools or the Ohio department of education's (ODE) legal counsel if the report involves the school for the deaf or blind or early education programs managed by ODE.
 - (6) The Ohio department of job and family services (ODJFS), foster care licensing, if the report involves a foster home, group home or children's residential facility licensed by ODJFS.
 - (7) The ODJFS, child care licensing, if the report involves a childcare center (more than twelve children) which is or should be licensed by ODJFS.
 - (8) The local county department of job and family services (CDJFS) if the report involves an in-home aide who is certified by the CDJFS or a type B.

Additional Guidance:

- Intra-Familial vs. OHC with a foster/adoptive parent: if foster parent is an AP for both their own child(ren) and foster child(ren), then two separate intake reports should be created; one as an Intra-Familial report and the other as an OHC/Specialized Assessment.
- Having access to a child/ACV through the organization or OHC setting that established their relationship, then it is an OHC report/Specialized Assessment.
- Information and Referral/Rule Violation is NOT an allegation of abuse and/or neglect. If there is an allegation of abuse and/or neglect that does not warrant an investigation, then the allegation is a screen out. A rule violation may need to be separately conducted by the licensing authority.
- If a child, between the age of 18 and 21, is in PCSA custody, all reports of maltreatment with them as the ACV should be considered for investigation.
- If there are allegations of maltreatment from a prior foster care placement, the intake report should be created under the prior foster care placement.
- Therapeutic Wilderness Camps
 - Private, nonprofit therapeutic "wilderness camp" means a structured, alternative residential setting for children who are experiencing emotional, behavioral, moral, social, or learning difficulties at home or at school in which all of the following are the case:
 1. The children spend the majority of their time, including overnight, either outdoors or in a primitive structure.
 2. The children have been placed by their parents or another relative having custody.
 3. The camp accepts no public funds for use in its operations. {ORC 5103.02 (F) (1-3)}
 - Review ORC 5103.50-5103.55 and OAC 5101:2-9-40
- Examples of the use of a Specialized Assessment vs. Intra-familial Investigation/Assessment:
 1. Former foster child connects with former foster parent's adult son out in community and engages in sexual activity. (Intra-familial: was known to the child and had access when the child placed with the foster parent)
 2. Current foster child connects with current foster parent's adult son out in community and engages in sexual activity. (Specialized Assessment: is known to the child and has access through the current foster care placement)
 3. Child attends private lessons (i.e., dance, tutoring, music, gymnastics, horseback riding, etc.) and maltreatment occurs by instructor. (Intra-familial: known to the child/family and has access to the child)

***Examples provided are not all inclusive. If more than one referral type is present, the totality of the circumstances should be used in the consideration of a screen in. If necessary, consult legal advisor.**

Specialized Assessment (Out-Of-Home Care) Reports of Child Abuse & Neglect

The term "caretaker" is used throughout the Screening Guidelines outside of the definition in Ohio Revised Code (ORC). Within this document "caretaker" is used to represent; parent, guardian, custodian, and/or adult.

Out-of-Home Care Reports of Child Abuse & Neglect has the following areas to consider:

- Physical Injury
- Punishment
- Neglect

Physical Injury (Out-of-Home Care)

Related ORC and OAC Rules and Definitions:

Child is subjected to Out-of-Home care child abuse. (ORC 2151.031)
*Physical Restraint means a therapeutic holding technique(s) with the intent to minimize or prevent harm when the child has lost control of his or her actions in such a way as to threaten harm to self or others. Physical restraint shall not be used as a planned intervention until after other less restrictive procedures or measures have been explored and found to be inappropriate. At no time shall physical restraint be used as punishment or for staff convenience. (OAC 5101:2-1-01(220))

*Out-of-Home Care Child Abuse means any of the following when committed by a person responsible for the care of a child in Out-of-Home care:

1. Engaging in sexual activity with a child in the person's care.
2. Denial to a child, as a means of punishment, of proper or necessary subsistence, education, medical care, or other care necessary for a child's health.
3. Use of restraint procedures on a child that causes injury or pain.
4. Administration of prescription drugs or psychotropic medication to the child without the written approval and ongoing supervision of a licensed physician.
5. Commission of any act, other than by accidental means, that results in any injury to or death of the child in Out-of-Home care or commission of any act by accidental means that results in an injury to or death of a child in an Out-of-Home care and that is at variance with the history given of the injury or death. (ORC 2151.011 (B)(29))

Physical Injury (Out-of-Home Care) Examples	
Screen In	Screen Out
<p>Please refer to the Abuse Screening Guidelines</p> <p>**Allegations should be considered regardless of whether the ACV is residing in the OHC setting when the allegation occurred.</p> <p>*Notification to the OHC Licensing Entity (see above)</p> <ul style="list-style-type: none"> Restraint of a child that causes injury or pain, with consideration of the following: <ul style="list-style-type: none"> Age, size, and development of child Appropriate restraint Child contributing to injury/pain (struggle) Requires medical treatment specifically due to the injury from the restraint <u>Examples:</u> Broken bones, fractures, injuries to the face, neck, head, and sensitive areas of the body, choking or restriction to breathing. Prone Restraint (face down). Providing prescription drugs or psychotropic medication to the child without the written approval and ongoing supervision of a licensed physician. Over/under medicating a child. 	<p>Please refer to the Abuse Screening Guidelines</p> <p>**Allegations should be considered regardless of whether the ACV is residing in the OHC setting when the allegation occurred.</p> <p>*Notification to the OHC Licensing Entity (see above)</p> <ul style="list-style-type: none"> Restraint of a child that does not cause pain or injury, with consideration of the following: <ul style="list-style-type: none"> Medical attention provided as part of a protocol for restraints, but no medical treatment required Minor injuries resulting under reasonable circumstances given Age, size, and development of child Level of resistance Securing a safe environment (i.e., attempting to injure another child or adult) Actions taken by the responsible adult to prevent risk of serious self-inflicted injury (i.e., child jumping out of a window, child running into the street) Medication given to a child without custodian (aka, caretaker PCSA) consent, knowledge, or approval.

Punishment (Out-of-Home Care)	
Punishment (Out-of-Home Care) Examples	
Screen In	Screen Out
<ul style="list-style-type: none"> Denial of proper and necessary food and water. Refusal to send child to school. Failure to seek and/or prevent medical treatment for injury or illness as means of punishment. 	<ul style="list-style-type: none"> Child refuses to eat provided meal, take prescribed medication and/or attend school. Failure to provide snacks. Limiting child's liquid intake in the evening hours due to issues related to bed wetting.
Neglect (Out-of-Home Care)	
<p>Related ORC and OAC Rules and Definitions:</p> <p>Child is subjected to Out-of-Home care child neglect.</p> <p>ORC 2151.011(B)(30)</p> <p>*Out-of-Home Care Child Neglect means any of the following when committed by a person responsible for the care of a child in Out-of-Home care:</p> <ul style="list-style-type: none"> Failure to provide reasonable supervision according to the standards of care appropriate to the age, mental and physical condition, or other special needs of the child. Failure to provide reasonable supervision according to the standards of care appropriate to the age, mental and physical condition, or other special needs of the child, that results in sexual or physical abuse of the child by any person. Failure to develop a process for all of the following: <ul style="list-style-type: none"> Administration of prescription drugs or psychotropic drugs for the child Assuring that the instructions of the licensed physician who prescribed a drug for the child are followed Reporting to the licensed physician who prescribed the drug all unfavorable or dangerous side effects from the use of the drug Failure to provide proper or necessary subsistence, education, medical care, or other individualized care necessary for the health or well-being of the child. Confinement of the child to a locked room without monitoring by staff. Failure to provide ongoing security for all prescription and nonprescription medication. Isolation of a child for a period of time when there is substantial risk that the isolation, if continued, will impair, or retard the mental health or physical well-being of the child. 	

Neglect (Out-of-Home Care) Examples	
Screen In	Screen Out
<p>**Please refer to the Neglect Screening Guidelines.</p> <p>**Allegations should be considered regardless of whether the ACV is residing in the OHC setting when the allegation occurred.</p> <ul style="list-style-type: none"> • Locking child in confined space (i.e., room, basement, garage, closet, dog cage, etc.). • Restricting child's mobility through excessive means (i.e., chaining/tying child to bed, duct taping child). • Failure to provide reasonable supervision based upon the placement circumstances. • Failure to provide for basic needs of the child, proper and necessary food and water, refusal to send to school, failure to seek and/or prevent medical treatment for injury or illness. • Failure to follow custodial agency directives regarding physical and/or mental health treatment and/or medication. • Administration of prescription drugs or psychotropic medication to the child without the written approval and ongoing supervision of a licensed physician. 	<p>**Please refer to the Neglect Screening Guidelines.</p> <p>**Allegations should be considered regardless of whether the ACV is residing in the OHC setting when the allegation occurred.</p> <ul style="list-style-type: none"> • Child is segregated with appropriate supervision. • Child denied snack. • Child refused to eat provided meals, take prescribed medication and/or attend school.

Child Dependency

NOTE: Dependency is not intended to be a "catch all" to streamline the categorization of referral information received.

The term "caretaker" is used throughout the Screening Guidelines outside of the definition in Ohio Revised Code (ORC). Within this document "caretaker" is used to represent; parent, guardian, custodian, and/or adult.

Related ORC and OAC Rules and Definitions:

Child who is homeless or destitute or without adequate parental care, through no fault of the child's parents, guardian, or custodian (ORC 2151.04(A))
Child who lacks adequate parental care by reason of the mental or physical condition of the child's parents, guardian, or custodian (ORC 2151.04(B))
▪ "Adequate parental care" is the provision of adequate food, clothing, and shelter to ensure the child's health and physical safety and the provision of specialized services warranted by the child's physical or mental needs (ORC 2151.011)
Child whose condition or environment is such as to warrant the state, in the interests of the child, in assuming the child's guardianship (ORC 2151.04(C)).

A child to whom, both of the following apply:

1. Is residing in a household in which a parent, guardian, custodian, or other member of the household committed an act that was the basis for an adjudication that a sibling of the child or any other child who resides in the household is an abused, neglected, or dependent child and
2. Is in danger of being abused or neglected by that parent, guardian, custodian, or member of the household, because of the circumstances surrounding the abuse, neglect or dependency of the sibling or other child and the other conditions of the household (ORC 2151.04(D)).

Child Dependency Examples	Screen In	Screen Out
	<ul style="list-style-type: none">• Caretaker overwhelmed with and/or incapable of providing for child's basic needs due to issues including, but not limited to: family experiencing a house fire, caretaker laid off from employment, etc.	<ul style="list-style-type: none">• Caretaker incapacitated, incarcerated (absent a CA/N allegation) or death; however, arrangements have been made for an appropriate caretaker for the child.
	<ul style="list-style-type: none">• Caretaker overwhelmed with and/or incapable of providing for the extreme special needs of the child.	<ul style="list-style-type: none">• Caretaker evicted from home with alternate arrangements for housing (i.e., shelter, a friend or family member's household).
	<ul style="list-style-type: none">• Caretaker does not have the mental or physical capacity to provide appropriate care for the child.	<ul style="list-style-type: none">• Caretaker experiences financial hardship; however, child's basic needs are met.

<ul style="list-style-type: none"> • Caretaker incapacitated due to hospitalization, seeking drug treatment or mental illness and no other available, appropriate caretaker. • Caretaker incarcerated and no other available, appropriate caretaker. • Death of a caretaker and no other available, appropriate caretaker. • Birth of a new child on an ongoing case, especially with court involvement. 	<p>Note:</p> <ul style="list-style-type: none"> • If there are allegations of drug use/abuse by caretaker, consider Abuse or Neglect criteria. • If caretaker is overwhelmed and calling in to seek services, consider FINS.
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Family In Need of Services

ORC Definitions and/or OAC Rule Requirements	Screen in Examples
Permanent Surrender	Screen in Examples
<p>The parents, guardian or other persons having custody of a child may enter into an agreement with a public children services agency (PCSA) or private child placing agency (PCPA) to voluntarily surrender a child into the permanent custody of an agency when there is mutual agreement that a permanent surrender would be in the best interests of the child. (ORC 2151.011(B)(32), ORC 5103.15(B), OAC 5101:2-42-09)</p>	<ul style="list-style-type: none"> The parent/guardian/custodian requests to voluntarily surrender a child into the agency's permanent custody and the agency believes this to be in the child's best interest.
Safe Haven/Deserted Child	Screen in Examples
<p>Deserted child is a child not older than thirty days, whose parent has voluntarily delivered the child to an emergency medical service worker, peace officer, hospital employee or a newborn safety incubator without expressing an intent to return for the child and who has no apparent signs of abuse or neglect.</p> <p>OAC 5101:2-36-06:</p>	<ul style="list-style-type: none"> Infant, fewer than thirty-one days old, left with hospital staff, law enforcement officer and/or EMS staff by a parent with no plan for return to care for the child. <p>**For further instructions, please see Safe Haven FAQ**</p>

A public children services agency (PCSA) shall conduct a deserted child assessment/investigation if all of the following apply to the child subject of the report:

1. The child is fewer than thirty-one days old.
2. The child was voluntarily left by the child's parent in the care of an emergency medical service worker, peace officer or hospital employee by the child's parent(s).
3. The child was left, and the child's parent(s) did not express an intention to return for the child.

(OAC 5101:2-1-01; 5101:2-36-06)

ORC Definitions and/or OAC Rule Requirements	Stranger Danger	Screen in Examples
<p>Per the PCSAs County Memorandum of Understanding and/or a request by law enforcement, when a PCSA receives a report alleging a criminal act against a child of assault or sexual activity involving stranger danger, the PCSA shall:</p> <ul style="list-style-type: none"> • Establish police jurisdiction and refer the report to the appropriate law enforcement authority within twenty-four hours of receipt of the report. • Attempt a face-to-face or telephone contact within twenty-four hours of receipt of the report with a principal or collateral source to ensure that the child is safe and attempt a face-to-face contact with the alleged child victim as soon as possible. • Conduct a safety assessment of all children residing in the home of the alleged perpetrator upon the request of law enforcement. • The PCSA shall attempt face-to-face interviews with the alleged child victim's parents/caretakers. • Assess the safety of the alleged child victim by determining the access of the alleged perpetrator to the alleged child victim. • Assess the parents, caretakers or guardian's ability and willingness to protect the child. <p>(OAC 5101:2-36-05)</p>		<ul style="list-style-type: none"> • Law enforcement reports and requests PCSA assistance as a child was physically or sexually assaulted by an alleged perpetrator, who is not a family member, has no sanctioned or continued access and is not involved in daily or regular care of the child and had no relationship to the alleged child victim prior to the act. • Taxi/Uber driver with no established relationship physically/sexually assaults a child. <p>Screen Out Examples: At PCSA's discretion, screen out and refer to law enforcement.</p>
Post Finalization Adoption Service	Post Finalization Adoption Service	Screen in Examples
ORC Definitions and/or OAC Rule Requirements	Services provided or arranged by the PCSA, PCPA or PNA to support, maintain and assist an adopted child, adoptive family, or birth parent any time after finalization of an adoption.	<ul style="list-style-type: none"> • Adoptive parent requests agency services to address issues related to the post-finalization adoption process.
Courtesy Supervision	Courtesy Supervision	Screen in Examples
ORC Definitions and/or OAC Rule Requirements	Interstate Compact for Placement of Children (ICPC): When the sending agency is a public agency, it may enter into an agreement with an authorized public or private agency in the receiving state providing for the performance	<ul style="list-style-type: none"> • An ICPC request to monitor parties to the case.

<p>of one or more services by the latter as agent for the sending agency. (ORC 5103.20, 2151.56)</p>	<p>This does not include in-state PCSA requests; refer to FINS/Required Non-LEAD PCSA interview.</p>
<p>ORC Definitions and/or OAC Rule Requirements</p> <p>When the lead PCSA requests a sister PCSA assist with conducting assessment/investigation activities related to principles of the case who may reside in the non-lead, non-contiguous county. (OAC 5101:2-36-10)</p>	<p>Required Non-Lead PCSA Interviews</p> <p>Screen in Examples</p> <ul style="list-style-type: none"> The lead PCSA requests a non-contiguous PCSA to conduct an interview/assessment of a principle of a screened in report residing in a non-contiguous county.
<p>ORC Definitions and/or OAC Rule Requirements</p> <p>When the lead PCSA requests a sister PCSA assist with conducting assessment activities related to principles of the case who may reside in the non-lead, non-contiguous county. (OAC 5101:2-36-10)</p>	<p>Alternative Response Required Non-Lead PCSA Contacts</p> <p>Screen in Examples</p> <ul style="list-style-type: none"> The lead PCSA requests a non-contiguous PCSA to conduct an assessment of a principle of a screened in report residing in a non-contiguous county.
<p>ORC Definitions and/or OAC Rule Requirements</p> <p>When the correctional facility notifies those postnatal services will be needed, the lead PCSA shall be the PCSA in the county in which the woman was a resident at the time of incarceration, or if not an Ohio resident, the PCSA in the county in which the woman was charged or sentenced.</p> <p>PCSA are responsible for investigating and recommending a mother's placement arrangements or arranging placements for infants born to women who are incarcerated in correctional facilities.</p>	<p>Postnatal Placement Services to Infants of Incarcerated Mother</p> <p>Screen in Examples</p> <ul style="list-style-type: none"> Assessment and recommendation of placement arrangements for infant born to incarcerated mothers. <p>Instruction: If mother was homeless, then the county where the mother committed the crime is the responsible PCSA.</p>

ORC Definitions and/or OAC Rule Requirements	Preventative Services	Screen in Examples
<p>The PCSA shall make available supportive services to a child and his parent, guardian or custodian as the agency determines necessary. The PCSA shall make available supportive services to ensure reasonable efforts are made to: Prevent or eliminate the need for removal of a child from his own home. (ORC 5153.16)</p> <p>*Preventative Services means a type of family in need of services intake which describes services provided by the PCSA aimed at promoting awareness or preventing child abuse and neglect which have been requested by and provided to children and families who have no current allegations of child abuse, neglect, or dependency. (OAC 5101.2-1-01)</p>	<ul style="list-style-type: none"> ● Request from parent/guardian/custodian for parenting education, housing assistance, counseling, etc. ● Prenatal positive screening for an illegal substance within second and third trimester (no other children residing in the home). <p>Note: This is an optional program that some PCASAs offer, and others do not.</p>	
	<p>Unruly Delinquent</p> <p>ORC Definitions and/or OAC Rule Requirements</p> <p>"Unruly Child" includes any of the following: (A) Any child who does not submit to the reasonable control of the child's parents, teachers, guardian or custodian, by reason of being wayward or habitually disobedient; (B) any child who is an habitual truant from school; (C) any child who behaves in a manner as to injure or endanger the child's own health or morals or the health or morals of others; (D) any child who violates a law, other than division (C) of section 2907.39, division (A) of section 2923.211, division (C)(1) or (D) of section 2925.55 or section 2151.87 of the Revised code, that is applicable only to a child. (ORC 2151.022) (E) "Delinquent Child" includes any of the following: (1) any child, except a juvenile traffic offender, who violates any law of this state of the United States, or any ordinance of a political subdivision of the state, that would be an offense if committed by an adult; (2) any child who violates any lawful order of the court made under this chapter, including a child who violates a court order regarding the child's prior adjudication as an unruly child for being an habitual truant; (3) any child who violates any lawful order of the court made under Chapter 2151 of the Revised Code other than an order issued under section 2151.87</p>	<p>Screen in Examples</p> <ul style="list-style-type: none"> ● A court ordered home evaluation pertaining to an unruly/delinquency court case. ● Court orders PCSA intervention and/or custody of an unruly/delinquent child to PCSA. <p>Note: If there is an allegation of abuse and/or neglect then screen appropriately.</p>

<p>of the Revised Code; (4) any child who violates division (C) of section 2907.39, division (A) of section 2923.211, or division (C)(1) or (D) of section 2925.55 of the Revised Code (ORC 2151.02)</p> <p>On behalf of children in the county whom the public children services agency (PCSA) considers needing public care or protective services, the PCSA shall: Accept custody of children committed to the PCSA by a court exercising juvenile jurisdiction.</p> <p>(ORC 5153.16(A)(3))</p> <p>The child abuse and neglect memorandum of understanding is a document required to set forth the normal operating procedure to be employed by all concerned officials in the execution of their respective responsibilities, including section 2919.24 "Contributing to unruliness or delinquency of a child."</p> <p>(OAC 5101.2-33-26)</p>	<p>**The PCSA should refer to their MOU**</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; background-color: #cccccc;">ORC Definitions and/or OAC Rule Requirements</th><th style="text-align: center; background-color: #cccccc;">Child Fatality (non-child abuse/neglect)</th><th style="text-align: center; background-color: #cccccc;">Screen In Examples</th></tr> </thead> <tbody> <tr> <td style="vertical-align: top;"> <p>On receipt by a public children services agency (PCSA) of a request for the release of information about a child under eighteen years of age who was a resident of the county served by the agency at the time of death and whose death may have been caused by abuse, neglect or other criminal conduct, the director of the agency immediately shall confer with the prosecuting attorney of the county; the director shall disclose the following information concerning a deceased child: Services provided to or purchased for the child or to which the child was referred by a PCSA; PCSA or PCPA shall have written policies and procedures regarding actions to be taken when a child in its custody dies.</p> <p>(ORC 5153.171; 5153.172; OAC 5101:2-33-14, OAC 5101:2-42-89)</p> </td><td style="vertical-align: top;"> <p style="text-align: center;">Child Fatality (non-child abuse/neglect)</p> </td><td style="vertical-align: top;"> <ul style="list-style-type: none"> • Per agency policy, Memorandum of Understanding, interagency requirements and/or a parent's request, PCSA provides services to a family in which a child has died as a result of natural causes/medical condition, case of sudden infant death syndrome and/or deferred rulings by the coroner. </td></tr> </tbody> </table>	ORC Definitions and/or OAC Rule Requirements	Child Fatality (non-child abuse/neglect)	Screen In Examples	<p>On receipt by a public children services agency (PCSA) of a request for the release of information about a child under eighteen years of age who was a resident of the county served by the agency at the time of death and whose death may have been caused by abuse, neglect or other criminal conduct, the director of the agency immediately shall confer with the prosecuting attorney of the county; the director shall disclose the following information concerning a deceased child: Services provided to or purchased for the child or to which the child was referred by a PCSA; PCSA or PCPA shall have written policies and procedures regarding actions to be taken when a child in its custody dies.</p> <p>(ORC 5153.171; 5153.172; OAC 5101:2-33-14, OAC 5101:2-42-89)</p>	<p style="text-align: center;">Child Fatality (non-child abuse/neglect)</p>	<ul style="list-style-type: none"> • Per agency policy, Memorandum of Understanding, interagency requirements and/or a parent's request, PCSA provides services to a family in which a child has died as a result of natural causes/medical condition, case of sudden infant death syndrome and/or deferred rulings by the coroner.
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Post Emancipation Reports

ORC Definitions and/or OAC Rule Requirements	Young Adult Services	Screen In Examples Screen In and Screen Out Examples
<p>Each PCSA shall, when requested, provide services and support to former foster care recipients, who emancipated from agency custody due to attaining eighteen years of age. A PCSA shall evaluate the strengths and needs of the young adult to determine the services to be offered. The services and supports are to complement the young adult's own efforts to achieve self-sufficiency, and shall be available until the young adult's twenty-first birthday (OAC 5101:2-42-19.2)</p>	<p>Screen In Examples:</p> <ul style="list-style-type: none">• Young adult who is 18 up to 21 years of age and an emancipated foster youth requesting agency services such as housing, utilities, education and financial.• Note: A youth who turns 21 cannot receive Emancipated Youth services and is not eligible for Emancipated Youth services. <p>Screen Out Examples:</p> <ul style="list-style-type: none">• Young adult can receive Emancipated Youth services through the County PCSA where they reside, it does not have to be through the County PCSA where the youth emancipated.	<p>Screen Out Examples:</p> <ul style="list-style-type: none">• Young adult is 21 years of age or older and is requesting services.• Youth emancipated, has children with their own open case and is requesting services such as housing, utilities, food, etc. All requested services should be addressed within the open case.

Information and Referral Reports

"Information and/or referral" means an intake category in which information is provided to any person to assist in locating or using available and appropriate resources or both. (OAC 5101:2-1-01 (163))

An Information and Referral report is not to be used for the following:

- Abuse and/or neglect allegations
- Referral source's intent to report maltreatment concerns

Information and/or Referral Types and Examples

All referral information categorized as information and/or referral pursuant to 5101:2-36-01 (F)(4) shall be recorded in SACWIS. The PCSA shall identify which of the following activities was completed by the PCSA.

Directed/advised to contact non-PCSA service provider within the county

- Caller requested a phone number for Community Action, Child Support, Child Care, etc.

Directed/advised to contact non-PCSA service provider outside the county

- Caller requested phone number for Children Services, Community Action, Child Support, etc. in another county

Provided information only/no referral of maltreatment made

- Parent asking about how to obtain custody of his/her child
- Age a child can be home alone and/or babysit

Additional information received on an open case that is not alleging abuse or neglect of a child

- Child did not return home from school back to their foster placement (see: OAC 5101:2-42-88)
- Provide Information to agency (i.e., medication changes/permission to administer, child moved from a cottage)
- Provider calling to report mother did not attend drug treatment

Note: This information may be entered as an activity log for an open case. {OAC 5101:2-36-01 (K)}

Licensing Rule Violation

A Rule Violation is not an allegation of abuse and/or neglect. If there are allegations of abuse and/or neglect, the allegations should be categorized as such and given a screening decision by the PCSA. If there is an allegation of abuse and/or neglect that does not warrant an investigation, then the allegation(s) are screened out and referred to the appropriate licensing authority.

The use of Rule Violation only pertains to Ohio Department of Job and Family Services (ODJFS) licensed providers (Adoptive/Foster Home and Residential) for non-child abuse/neglect concerns.

Examples:

- Locks on doors
- Staff ratios
- Failure to notify on criminal charges
- Family member changes within foster homes
- Medication (storage)

A Licensing Rule Violation intake report is not to accompany a report of abuse and/or neglect regarding an ODJFS provider, regardless of the screening decision.

Practice Tips and Information

Cross Referrals:

- When an intake is screened in for a specialized investigation/assessment:
 - The PCSA shall contact the following licensing and supervising authorities, as applicable, no later than the next working day from the date the referral was screened in to share information pursuant to rules 5101:2-33-21 and 5101:2-36-04 of the Administrative Code:
 - The Ohio department of developmental disabilities (ODDD) division of developmental centers quality assurance if the report involves a developmental center managed by DODD; or the office of licensure if the report involves a foster or group home licensed by DODD.
 - The local county board of developmental disabilities (DD) if the report involves any program managed by the county board of DD.
 - The local board of alcohol, drug addiction, and mental health and the Ohio department of mental health and addiction services (OMHAS) if the report involves a residential care facility licensed by OMHAS.
 - The Ohio department of youth services' (ODYS) chief inspector if the report involves an institution or facility for delinquent children managed by ODYS; or the juvenile judge and ODYS' division of parole, courts, and community services if the report involves a detention or rehabilitation facility managed by a juvenile court and approved by ODYS.
 - The superintendent of the local schools or the Ohio department of education's (ODE) legal counsel if the report involves the school for the deaf or blind or early education programs managed by ODE.
 - The Ohio department of job and family services (ODJFS), foster care licensing, if the report involves a foster home, group home or children's residential facility certified by ODJFS.
 - The ODJFS, childcare licensing, if the report involves a childcare center (more than twelve children) which is or should be licensed by ODJFS.
 - The local county department of job and family services (CDJFS) if the report involves a type A or type B family childcare home which is or should be licensed by CDJFS or an in-home aide who is certified by the CDJFS or a type B.
 - When a referral of abuse/neglect is screened out, and a principal of the report is a person responsible for the child's care in an out-of-home care setting, the PCSA shall notify licensing and supervising authorities, as appropriate, no later than four working days from the date of the screening decision to share information.

Required Law Enforcement Notifications:

PCSA are required to notify the appropriate law enforcement agency:

1. No later than seven calendar days after screening in all reports of abuse unless an arrest is made at the time of the report that results in the appropriate law enforcement agency being contacted concerning the possible child abuse.
2. No later than seven calendar days after screening in reports of neglect if the PCSA enacts a safety plan (in-home safety plan, out-of-home safety plan, or legally authorized removal) due to neglect during that timeframe unless an arrest is made at the time of the report that results in the appropriate law enforcement agency being contacted concerning the possible child neglect. Best practice would support notification of law enforcement when a safety plan is enacted after the first seven calendar days.

It is recommended PCSAs use the "Law Enforcement Notification" letter in SACWIS to fulfill this requirement. If your PCSA does not use this letter, the cross-referral to law enforcement is to be documented in SACWIS. The "Law Enforcement Request for Assistance" letter is also available for use as needed.

Mandated Reporter Notifications:

PCSA are required to send notifications to the mandated reporter if the mandated reporter provides their name and contact information when making the report regardless of the mandated reporter's request to receive or opt out of receiving the notification. The mandated reporter can choose whether they prefer to receive the notification via letter or electronically. The PCSA must send the following notifications:

1. Initial notification no later than seven calendar days after the screening decision that provides the status of the agency's assessment/investigation into the report, who the mandated reporter can contact for further information, and a description of the mandated reporter's rights.
2. An outcome notification for screened in reports informing that the agency has closed or transferred the assessment/investigation for ongoing services no later than seven calendar days after the assessment/investigation is completed.

It is highly recommended PCSAs use the mandated reporter letters in SACWIS as they include all required information. If your PCSA does not use the mandated reporter letters in SACWIS, see Activity Log coding instructions beginning on page 3 of this document.

Referring Allegations of Abuse/Neglect to Another PCSA:

- Take the information – do not tell reporter to call the other PCSA and end the call
- Document who was spoken to
- Receiving PCSA to copy intake and give formal screening decision

Unknown Family and/or Unknown Address:

- When it is an unknown family with a provided address and the allegations provided warrant a screened in report:
 - Screen in the report with the unknown participant(s).

- After determining the identities of the unknown participants, merge the unknown profiles with the known profiles in SACWIS.
- When it is a known family with an unknown address and the allegations provided warrant a screened in report:
 - Screen in the report with the unknown address.
- When it is an unknown family with an unknown address and the allegations provided warrant a screened in report:
 - Screen in the report with the unknown participant(s) and unknown address to complete due diligence in identifying and locating the child and/or family.

Specialized Assessments:

- Intake reports should be flagged as a specialized assessment when one or more of the following are applicable for the alleged perpetrator:
 - Is a person responsible for the alleged child victim's care in an out-of-home care setting as defined by OAC and ORC
 - Has access to the alleged child victim by virtue of their employment by or affiliation to an organization as defined by ORC
 - Has access to the alleged child victim through the child's placement in an out-of-home care setting.

Examples:

- Foster child is abused by foster parent's minor/adult child or relative who lives in the foster home.
- Foster child is abused by foster parent's adult/minor child or relative who does not live in the home.
- Foster child is abused by foster parent's neighbor or friend.
- Foster child is abused by another foster child in their placement or respite home.

Third Party Involvement:

- The PCSA will request third party involvement for any assessment/investigation where there is potential conflict of interest because of one or more of the following is a *principal of the report:*
 - Any employee of an organization or facility that is licensed or certified by ODJFS or another state agency AND supervised by the PCSA.
 - A foster caregiver, pre-finalized adoptive parent, adoptive parent, relative, or kinship provider who is recommended, approved, or supervised by the PCSA.
 - A Type B family childcare home or Type A family childcare home licensed by ODJFS when the CDJFS has assumed the powers and duties of the county children services function.
 - Any employee, or agency of ODJFS or the PCSA.
 - Any authorized person representing ODJFS or the PCSA who provides services for payment or as a volunteer.
 - A foster caregiver or an employee of an organization or facility licensed or certified by ODJFS, and the alleged child victim is in the custody of or receiving services from the PCSA that accepted the report.
 - Any time a PCSA determines that a conflict of interest exists.

Fatality and Near Fatality Intakes:

- An intake should be flagged as a fatality if a child is deceased, regardless of cause or suspicion of abuse/neglect.
 - If there are allegations of abuse and/or neglect that led to a child fatality, and there are no other children residing in the home, this would warrant a screened in report for assessment/investigation.
- An intake should be flagged as a near fatality if a child is in serious or critical condition, as certified by a physician, due to an act of abuse or neglect.

Safe Haven:

- An intake should be considered a Safe Haven and categorized as a Family in Need of Services, Safe Haven/Deserted Child when:
 - The child is less than 31 days old and;
 - The child was left by the parent(s) with no intention to return for the child and;
 - The child was left in the care of an emergency medical service worker, peace officer or hospital employee.
 - If identifying information for the parent(s) is received as part of the Safe Haven process, this information should not be included in the intake report, nor should the parent(s) be listed as an intake participant.
 - If after the referral is received and parental information is entered into the intake report, and it is later determined that this is a Safe Haven situation, then the parental information is to be removed via SACWIS help desk (data fix).
 - An intake should not be considered a Safe Haven and should be categorized as child abuse/neglect when:
 - The child's condition reasonably indicates abuse and/or neglect, which includes withdrawal symptoms.
 - The child was left by someone other than their parent(s).
 - It is determined that the child may be more than 30 days old.
 - The child was left with someone other than an emergency medical service worker, peace officer or hospital employee.
 - If there are indications of child abuse and/or neglect, the parents' right to anonymity and immunity is forfeited and their information should be included in the intake report.



Mike DeWine, Governor
State of Ohio

Matt Damschroder, Director
Ohio Department of Job and Family Services

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MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding ("MOU") by and between the Board of Clark County Commissioners, 3130 East Main Street, Springfield, Ohio 45503 ("Board") on behalf of the Clark County Department of Job & Family Services, 1345 Lagonda Avenue, Springfield, Ohio 45503 ("Clark County DJFS"), and Champaign County Department of Job and Family Services, 1512 South US Highway 68, Suite N100, Urbana, Ohio 43078 ("Champaign County DJFS").

The undersigned hereby enter into this MOU and agree to the following terms:

1. **RESPONSIBILITIES OF CLARK COUNTY DJFS:** Subject to the terms and conditions set forth in this MOU, Clark County DJFS agrees to be responsible for the following:
 - Scheduling Caseworkers to provide after-hours coverage for alternating two-week periods with Champaign County DJFS and other times as possible if requested by Champaign County for Champaign County DJFS cases which are referred to the agency between 4:30 PM and 8:00 AM;
 - If during Clark County's coverage of Champaign County's after-hours calls, there is a need for a forensic sexual abuse interview(s) or a forensic severe physical abuse interview(s), these specific interview(s) will be carried out by Champaign County staff. Clark County on call coverage person may be called out to assist in safety plan and other case activities associated with the matter, except the interview.
 - Organizing Caseworker schedules to ensure that staff are not scheduled to provide after-hours coverage on the same days in both Counties;
 - Caseworkers scheduled to perform after-hours coverage for Champaign County will follow the Champaign County On-Call Practices which are included in Appendix I;
 - Clark County DJFS Caseworkers will record all time spent providing on-call and call-out after-hours coverage, along with any mileage reimbursement or parking costs incurred;
 - Caseworkers will be compensated pursuant to the Clark County After-Hours On-Call policy which is included as Appendix II; and
 - If discipline is required, Clark County DJFS Supervisors will be responsible for disciplining caseworkers according to Clark County DJFS policies.
2. **RESPONSIBILITIES OF CHAMPAIGN COUNTY DJFS:** Subject to the terms and conditions set forth in this MOU, Champaign County DJFS agrees to be responsible for the following:
 - Providing an orientation training for Clark County DJFS Caseworkers;
 - Provide the 911 application for all Clark County Caseworkers scheduled to provide After-Hours coverage;
 - Reimbursing Clark County DJFS for all expenses incurred, including salary expenses, fringe benefits, OPERS contributions, mileage reimbursement, and parking costs incurred.
3. **MOU PERIOD:** This MOU will be effective from January 1, 2023 to December 31, 2024, inclusive, unless otherwise terminated.
4. **COST AND REIMBURSEMENT:** Champaign County DJFS shall reimburse Clark County DJFS for all costs associated with Clark County DJFS Caseworkers working on-call rotations for Champaign County DJFS for after-hours services. Clark County DJFS shall invoice Champaign County DJFS on a monthly basis, within 45 days of the end of each month. Champaign County DJFS shall issue payment within 30 days of receipt of the invoice.
5. **EMPLOYEE RATES:** Once quarterly, as part of its invoice, Clark County DJFS shall provide Champaign County with the current hourly rates for each employee included in this agreement. Parties agree that any wage changes due to Clark County Commission Resolution or contractual provision of the Collective Bargaining contract pertinent to Clark

County staff may be made without a modification of this MOU. Clark County Job and Family Services shall provide Champaign County a notice of any rate changes thirty (30) days prior to the date such rate changes take effect.

6. **TYPE OF PAY:** Any time worked by a Clark County DJFS employee under the terms of this MOU must be paid as overtime and cannot be paid in compensatory time or flex time.

ON-CALL OVERTIME CALCULATION: Clark County employees who are on call and part of the Collective Bargaining agreement shall receive compensation based upon the Collective Bargaining Agreement. Effective January 1, 2023, these rates are two (2) hours of overtime for each 8-hour shift that they are on-call. If the on-call shift falls on a holiday, the employee shall receive three (3) hours of overtime for each 8-hour shift that they are on-call. If a holiday is observed on Tuesday, Wednesday, or Thursday, the holiday time begins at 8:00 a.m. on the holiday, and continues until 8:00 a.m. the day after the holiday. If a holiday is observed on Friday or Monday, the holiday period begins at 8:00 a.m. on the day following the last regular business day prior to the holiday and continues until 8:00 a.m. on the next regular business day following the holiday. If an employee is called-in they shall receive the appropriate rate of pay – for regular after-hours, the rate of pay is 1 ½ times the regular rate of pay; for holiday time worked, the rate of pay is 1 ½ times the regular rate of pay, in addition to the holiday pay. Non Bargaining members will be paid in accordance with the County Personnel Manual: employees shall be compensated with one (1) hour of straight time for each 8 hour shift that they are on-call. If on-call duty falls on a holiday, the employee shall receive two (2) hours of straight time for each 8 hour shift that they are on-call. If the holiday is observed on Friday or Monday, the employee shall receive two (2) hours of straight time for each 8 hour shift that they are on-call on the weekend adjacent to the holiday.

7. **HOLIDAYS:** Clark County employees shall be paid the appropriate rate of pay for any hours worked in accordance with the Clark County Holiday Schedule, included in Appendix III.
8. **POTENTIAL CONFLICTS:** In the event that a Champaign County DJFS policy conflicts with a Clark County DJFS policy, the Clark County DJFS policy shall be controlling. Both policies are included in Appendices I and II, respectively.
9. **INDEPENDENT CONTRACTORS:** Clark County DJFS will act in performance of the MOU in an independent capacity, and not as an officer or employee or agent of Champaign County DJFS. Clark County insurance, provided through CORSA, will cover Clark County DJFS employees during the course of work performed under this MOU.
10. **RESPONSIBILITIES OF PARTIES:** Each party agrees to be responsible for any negligent acts or negligent omissions by or through itself or its agents, employees and contracted servants and each party further agrees to defend itself and themselves and pay any judgments and costs arising out of such negligent acts or negligent omissions, and nothing in this MOU shall impute or transfer any such responsibility from one to the other.
11. **NON-DISCRIMINATION:** Both parties agree:
 - That, in the hiring of employees for the performance of work under the MOU, no employer, by reason or race, color, religion, sex, age, disability, sexual orientation, military status(defined in ORC 4112.01), national origin or ancestry, shall discriminate against any citizen of this state in the employment of a person qualified and able to perform the work to which the MOU relates;
 - That no employer, or person acting on behalf of any employer, in any manner, shall discriminate against, intimidate, or retaliate against any employee hired for the performance of work under the MOU on account of race, color, religion, sex, age, disability, sexual orientation, or military status (defined in ORC 4112.01), national origin, or ancestry.
12. **DISCLOSURE OF INFORMATION:** Both parties are bound by state and federal laws and regulations requiring them to maintain the confidentiality, disclosure and safeguarding of certain personal information of those who will be served pursuant to the terms of this MOU. The parties agree to strictly comply with the applicable laws and regulations.

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Failure to do so shall be grounds for the immediate termination of the MOU. If necessary to carry out the provisions of this MOU, information concerning individual participants may be exchanged by the parties to the extent permitted by applicable federal and state laws and regulations. Disclosure of such information by a party in violation of any applicable state or federal law or regulation shall be grounds for immediate termination of the MOU by the other party.

Upon receiving any confidential information pursuant to this MOU, Champaign County DJFS shall not use the information for purposes other than those set out in this MOU. Champaign County DJFS shall be bound by relevant Ohio confidentiality laws and ODJFS rules. Disclosure of the information by Champaign County DJFS in a manner not authorized by the Ohio Revised Code or Administrative Code is a breach of this MOU and subject to penalties set forth in section 5101.99 of the Revised Code.

13. **ETHICS LAW:** By signing this MOU, both parties certify that they are currently in compliance with and will continue to adhere to the requirements of the Ohio Ethics Law as provided by Ohio Revised Code Sections 102.03 and 102.04.
14. **CIVIL RIGHTS:** Both parties agree that in the performance of this MOU there shall be no discrimination against any client or any employee because of race, color, sex, religion, national origin, sexual orientation, or any other factor specified in the Civil Rights Act of 1964 and subsequent amendments. Also included is the Americans with Disabilities Act. It is further agreed that both parties will fully comply with all applicable Federal and State laws regarding such discrimination and the right to and method of appeal will be made available to all persons served pursuant to the terms of this MOU.
15. **TERMINATION:** This MOU may be terminated by either party at any time upon thirty (30) days written notice.
16. **SEVERABILITY:** If any provision of this MOU is found to be invalid or unenforceable for any reason, the remaining provisions will continue in validity and enforceability. If a court finds that any provision of this MOU is invalid or unenforceable, but that by limiting such provision it would become valid and enforceable, then such provision will be deemed to be written, construed, and enforced as so limited.

MOU includes the following appendices:

- Appendix I** Champaign County On-Call Practices
- Appendix II** Clark County After-Hours On-Call Policies and Procedures
- Appendix III** Clark County 2023 Holiday Schedule

This MOU shall be effective as of January 1, 2023.

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CLARK COUNTY DEPARTMENT OF
JOB & FAMILY SERVICES

Virginia K. Martycz
Virginia K. Martycz, Ph.D., Director

5-4-2023
Date

CLARK COUNTY PROSECUTOR
Approved as to Form and Legal Sufficiency

By: BT
Beau Thompson
For Daniel P. Driscoll

05/05/2023
Date

CHAMPAIGN COUNTY DEPARTMENT OF
JOB & FAMILY SERVICES

Stacy Cox, msu
Stacy Cox, Director
3/29/23
Date

CHAMPAIGN COUNTY PROSECUTOR
Approved as to Form and Legal Sufficiency

By: KST
Kevin S. Talebi
04/25/2023
Date

BOARD OF CLARK COUNTY COMMISSIONERS

Jennifer M. Hutchinson
Jennifer M. Hutchinson, County Administrator

5/10/23
Date

N/A
Resolution

BOARD OF CHAMPAIGN COUNTY COMMISSIONERS

Timothy J. Cassidy
County Commissioner

5/2/2023
Date

APPENDIX I
CHAMPAIGN COUNTY ON CALL PRACTICES

General Logistics

- Workers are eligible to be on call after completion of the majority of CORE trainings (through the assessment/investigation training). Workers are required to also have Beyond the Silence or Finding Words forensic interview training prior to conducting any sexual abuse interview.
- Workers go on call from Friday at 4:30pm-the following Friday at 8:00am (note: workers are able to trade on call days and split up the days however they wish—management only cares that all after-hours slots are covered)
- Each worker has an I-phone with the Active 911 application. When they are on duty, they change their settings to on duty during the times they are on call.
- There is always a back-up on call supervisor that is also linked with the Active 911 application for notification of pages when they are on duty.
- Champaign County Dispatch Center pages through the Active 911 site at which time the on-call worker on duty and the on-call supervisor on duty receive the same page

On Call workers needs to have access to the following items during an on-call shift:

- Agency issued cell phone with Active 911 app and agency required security software
- Computer or Tablet with agency required security software for access to SACWIS and Justice Web
- Camera, Tablet, or other device that can take photos
- List of Emergency phone numbers and placement agency contacts
- Safety Plans
- Temporary Care Agreements
- Notice of Child Custody Action
- Individual Child Care Agreement (ICCA)

Once Paged (receipt and response)

- The on-call worker has 15 minutes to respond by returning the call to Champaign County Dispatch (937-653-3409) to get instructions on who they need to contact for further information
- The on-call worker then calls the person that requested that the on-call worker be paged to gather the information they are trying to report, which most commonly are one of the following:
 - A new CA/N referral;
 - A new APS referral;
 - Notification that a child in agency custody received a restraint or was involved in another type of incident;
 - Request for permission to treat a foster child;
 - Request for a substitute caregiver to administer a new medication (i.e. antibiotic);
 - Request or notification that a foster child needs to be placed in an alternative care setting;
- Once the on-call worker gathers the information above, the on-call worker calls the back-up supervisor for further instruction on action needed on the information received
- Below is an outline of the most common actions taken after hours and general steps involved:
 - **Screening of a CA/N referral:**
 - Intake to be written up in the SACWIS system no later than the next business day;
 - Screen Out-no further action taken
 - Screen In
 - **Responding to a Screened in CA/N report:**
 - If the report is an emergency the on-call worker is expected to respond to location of child within 60 minutes;
 - If the report is screened in as a non-emergency the case will then need to be initiated per OAC rule or sooner than identified in OAC based on the nature of the allegation
 - Depending on when the case is screened in the following could occur:
 1. On call worker attempts to assure safety of the child via a phone call with the

- caregiver (attempted phone call/VM for AR or completed phone call for TR)
2. On call worker makes attempt to assure safety of child through face to face contact (most generally this is done through contact at police department, agency or hospital setting, however, it could be a need for a home visit, which most generally involves law enforcement assistance after hours). Note: sometimes in sexual abuse cases an immediate response/forensic interview is not required due to CPS needs, however, immediate interview/response is needed due to evidence gathering needs of partners in law enforcement
 3. If screened in on the eve of a business day, initiation of non-emergency cases may wait for a response till the next business day by a Champaign County assigned worker

If any initiation occurs, Champaign County would need the on-call worker to enter activity logs in SACWIS for that initiation. It is the goal that these notes be entered the next business day, however, if this cannot occur, would want them entered no later than three business days from date the contact occurred

- o **Screening and Initiation of APS referral:**

- Back-up supervisor makes a screening decision on APS referral
- For ER cases agency has 24 hours to initiate (these are extremely rare and when they do occur may require a visit with the adult)
- For Non-ER screen ins, the agency has three business days to initiate—on call worker may be requested to make some phone calls to assist the adult or caregiver with their current situation—these situations are also rare

Most Common After-Hours In Field Duties:

Response to a Family home with Law Enforcement:

Sometimes local law enforcement is out at homes and finds concerns needing an immediate response by the agency (i.e. parental or caregiver overdose with kids present, deplorable home conditions, drug raid, domestic violence where children have been present and parent(s)/caregiver(s) are being arrested). Worker generally begins interviewing of necessary individuals for assessment of safety and works to develop a safety plan if necessary.

Unannounced Home Visit:

These are rare and generally occur when a case is screened in on after hours on a Friday or Saturday or very early on a Sunday and there is not a phone number for the family to initiate via phone. Depending on the nature of the allegation and time of day the visit needs to occur, CCDJFS can call law enforcement to seek a joint visit for worker safety reasons.

Sexual Abuse Interview:

Due to the immediate need to gather information related to the allegation of sexual abuse allegation (generally due to alleged perpetrator being in the home or immediate need of law enforcement to have such information for search warrant needs or potential need for child to have a medical exam due to alleged offense occurring within last 72 hours).

Generally, these interviews occur at Champaign County Department of Job and Family Services (CCDJFS). CCDJFS has an interview room with recording equipment. When these interviews occur at the agency, law enforcement generally is present. Worker is advised by back up supervisor, after conclusion of the interview of next steps needed to ensure safety of the child.

Initiation at Hospital (generally Nationwide Children's Hospital or Dayton Children's Medical Center):

The need for initiation of these types of cases during an after-hours shift is rare, however, they do happen. This type of response is generally the result of severe physical abuse of a child.

Contacts at the hospital include initiation and interviews of alleged child victim (if verbal and able), parents/caretakers and collaterals.

Generally, CCDJFS is accompanied by law enforcement.

Worker is advised by back up supervisor, after conclusion of interview of next steps needed to ensure safety of child.

Safety Planning:

If it is determined by the on-call worker/on call supervisor that a safety plan is needed the on call worker works with the family to develop either an in home or out of home safety plan. For out of home safety plans preliminary background checks need to occur for the persons living in the home in which the children will be going under the safety plan. This

includes SACWIS history and Justice Web criminal records checks. Often times, if feasible for the back-up supervisor, they will assist in doing these checks. The worker will then need to complete a safety audit of the physical address of the safety plan (note: there are times based on proximity of the home that this safety audit can wait until the next business day).

Child Placed in Foster Care:

If the child is unable to be safely maintained in the home or through an out of home safety plan, the back-up supervisor will then contact the Champaign County Prosecutor's Office to request that a call be made to the judge for an ex parte. If an ex parte is granted, the back-up supervisor will locate a foster home and the on call worker is responsible for placement of the child in that foster home. The on-call worker starts the ICCA by requesting the parent/previous caretaker necessary information related to the needs of the child. The on-call worker will also need to provide the parent with the notice of custody action to the parent (form that the worker will need to have access to).

The next working day the worker will need to complete the complaint/filing and attend the shelter care hearing for the child. CCDJFS generally does not receive notification of time of shelter care hearing until morning of the next business day.

Restraint/Incident Notification of Foster Child:

- On call worker takes all required information regarding the incident:
 - Nature of the incident (i.e. what caused the need for a restraint)
 - Date/Time/Location of incident
 - Length of restraint (if incident involves a restraint)
 - Impact Incident had on the child
 - Verification that placement agency will be sending the incident report to the assigned worker
- On call worker notifies parent (if applicable) that incident occurs.
- On call worker types SACWIS activity logs reflecting the information obtained and shared with parent (if applicable).

Permission to Treat Foster Child:

- On call worker gathers all information related to the need for the child to be treated (nature of the illness/injury, location of child, any potential adverse effects that could occur as a result of desired treatment being requested).
- On call worker notifies back-up supervisor to share information and gain permission or denial for requested treatment (anesthesia will require supervisor to gain permission from director).
- On call worker calls treatment facility back to provide permission or denial.
- On call worker notifies parent (if applicable) of child's illness/injury (unless extremely minor and this can wait till next business day).
- On call worker types SACWIS activity logs reflecting the information obtained and shared with parent (if applicable).

Request to Administer New Medication to a Foster Child:

- On call worker gathers all information related to the need for new medication.
- On call worker gathers the new medical or mental health information that lends to the need for the child to be administered a new medication.
- On call worker notifies back-up supervisor to share information to gain permission or denial for requested administration of new medication.
- On call worker provides out of home care provider (or medical facility if applicable) permission or denial for administration of new medication.
- On call worker types SACWIS activity logs reflecting information obtained and provided.

Request for Foster Child to be Placed in Alternative Care:

- On call worker gathers all the information on the reason for request for alternative care and the names/location/phone number of the proposed alternative care provider.
- On call worker calls back-up supervisor to gain permission or recommendations for a different alternative care provider.
- On call worker calls licensing agency/foster parent back to provide permission or recommendations to seek a different alternative care setting.
- If any parent/child visitation has been previously scheduled for the days/times child will be in alternative

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care, on call worker helps to work with the alternative care provider and family member for coordination of this visit.

APPENDIX II
CLARK COUNTY AFTER-HOURS ON-CALL POLICIES AND PROCEDURES

PURPOSE & SCOPE: This policy establishes the manner in which Clark County Family and Children Services (FCS) caseworkers, program specialists and supervisors ensure that emergency child abuse/neglect and dependency cases are responded to outside of normal business hours which are Monday through Friday between hours of 8:00am-4:30pm.

POLICY:

- I. Eligibility requirements to volunteer to participate in after-hours
 - A. Caseworkers must meet the following:
 1. Employed for at least one (1) year as a Social Service Worker II
 2. Must be current on primary job duties
 3. Must have regular attendance and no written reprimands or progressive discipline over the past twelve (12) months
 4. No discipline within the past twelve (12) month period
 5. Participate in after-hours initial referral and screening training
 - B. Supervisors must meet the following:
 1. Classified as a Social Service Supervisor I with successful completion of probation and participated as after-hour worker for at least one (1) year
 2. Must be current on primary job duties
 3. Must have regular attendance and no written reprimands or progressive discipline over the past twelve (12) months
 4. Participate in after-hours initial referral and screening training prior to working on after-hours
 5. Successfully completed a Child Advocacy Center (CAC) approved forensic interview training within first six (6) months, or as soon as available thereafter
- II. The after-hour worker (AHW)/after-hour supervisor (AHS) enters all referrals into Statewide Automated Child Welfare Information System (SACWIS)
- III. The AHW/AHS meets all required response times in accordance with 5101:2-36-03 (D):
 - A. The AHW/AHS shall initiate the screened in child abuse and/or neglect report as follows:
 1. For an emergency report, attempt a face-to-face contact with the alleged child victim within one hour from the time the referral was screened in, to assess child safety and interview the alleged child victim.
 2. For all other reports, attempt a face-to-face contact or complete a telephone contact within twenty-four hours from the time the referral was screened in, with a principal of the report or collateral source, who has knowledge of the alleged child victim's current condition, and can provide current information about the child's safety.
 3. If face-to-face contact with the alleged child victim was not attempted within the twenty-four hour timeframe an attempt of face-to-face contact with the alleged child victim shall be made within seventy-two hours from the time the report was screened in to assess child safety and interview the alleged child victim. (This includes Dependency and Family in Need of Services (FINS) cases)
- IV. The AHW/AHS records all shifts and activities in the after-hour's log located on the shared drive; Private/FCS/After hours folder/After-hours call log excel spreadsheet.
- V. The AHW is compensated for after-hours work pursuant to section 31.5 in the Collective Bargaining Agreement. The AHS is compensated for after-hours work pursuant to section 12-F of the Clark County Personnel Policy Manual.
- VI. AHW/AHS signs this policy acknowledging he/she has read and understands the responsibilities and duties of an AHW/AHS. Failure to follow any of the outlined procedures may result in discipline and/or removal from the after-hours rotation schedule.

PROCEDURES:

- I. Scheduling
 - A. The after-hour supervisor (AHS) prepares an after-hours schedule at least twice yearly or as needed based on attrition.
 - B. The pool of AH workers/supervisors opens yearly in June and can be assigned to the coverage calendar once required training is completed. The maximum number of individuals on AH rotation will be 12.
 1. If more than 12 workers are interested in after-hour rotation, seniority will determine the cutoff.
 - C. All FCS employees working after-hours must email the AHS as soon as they are aware of leave time, so long as the schedule has not been distributed.
 - D. The AHW and AHS are each on-call for a week at a time beginning Friday evenings at 4:30pm and ending Friday morning the following week at 8 a.m.
 1. The agency provides a phone designated as the AHS phone 937.605.5770. All AHWs are given the number to contact the AHS.
 2. At the end of the on-call assignment, the AHS will provide the phone to the next scheduled AHS.
 - a. The AHS makes every effort to ensure the next on-call supervisor receives the phone as scheduled.
 - b. If an unforeseen circumstance occurs and the AHS does not have the AHS phones, they are to contact the Clark County Sheriff's Office (CCSO) Dispatch at 937.328.2560 and the AHW to provide them with an alternative number prior to the beginning of scheduled on-call week.
 - E. The AHW/AHS shall ensure that they are available to receive calls from the AHW/AHS and the Sheriff's Department. The AHW/AHS shall ensure that the designated phone is charged and with him/her at all times during their assigned shift.
- II. After-Hours Shifts
 - A. The AHW/AHS works the entire shift (each shift consists of 8 hours, there are 16 shifts in a week's coverage).
 - B. If an AHW/AHS is unable to work the scheduled shift, the AHW/AHS finds a replacement to cover the entire shift.
 1. The AHW/AHS notifies the AHS, and CCSO via email with any schedule change and updates the calendar on the shared drive to reflect the change.
 2. If AHW/AHS changes schedule after normal business hours, he/she calls the on-call AHS phone at 937.605.5770 and the CCSO non-emergency number at 937.328.2560 to report the change.
 3. AHW is not permitted to work their scheduled after-hour shift if they utilize sick leave in the following manner:
 - a. Requests unscheduled sick leave by calling in for the day
 - b. Requests unscheduled sick leave to go home early
 - c. Once the AHW/AHS calls in requesting sick leave, then they must also contact the AHS to report the need for on-call coverage or report the person who accepted shift coverage
 - d. If the AHW is unable to arrange coverage for his/her scheduled shift, then AHS contacts another AHW to cover the shift based on highest seniority
 - e. After-hour workers who anticipate use of sick leave or vacation for an extended period of time, must notify the AHS as soon as practical
- III. Calls and Referrals
 - A. All calls must be responded to within 15 minutes
 1. In the event that CCSO dispatch does not receive a return call within the 15-minute response time, CCSO contacts the AHS, who attempts to contact the AHW. If the AHS does not make contact with the AHW, the AHS will then make contact with the referral source.
 - a. AHW/AHS that do not respond to Dispatch within 15 minutes of attempted contact will lose the after-hour compensation for that shift.

- b. For the remainder of the shift the on-call AHS contacts AHWs in the order of highest seniority to find coverage for the remainder of the shift.
 - c. The AHW/AHS that takes over the shift receives the shift compensation.
- B. After-Hour Calls on open ongoing or intake cases
- 1. The AHW attempts to contact the assigned worker. The AHWs each receive a list via email of the social service worker's home/personal phone numbers. These numbers are not to be shared with anyone.
 - a. The assigned worker has the option to address the concerns on their case.
 - b. If the assigned worker chooses not to address the after-hours call, the AHW addresses the concerns reported.
 - c. If needed, the AHW should attempt to contact the assigned worker's supervisor for guidance.
 - d. The AHW may need to accompany the assigned worker to assist with the situation.
- C. All referrals received are entered into SACWIS during the after-hours shift. If the AHW is unable to enter the information during his/her designated shift, the referral is entered into SACWIS in the following manner
- 1. When the next day is a non-business day the referral is to be entered by 1p.m.
 - 2. When the next day is a business day the referral is to be entered by 9a.m.
- D. When appropriate, It is the AHW's responsibility to rate the referral, initiate the investigation, and document the activities in SACWIS.
- E. The Clark County Sheriff's Office and Springfield Police Department are the only entities with authority to determine that a case is rated as a Rapid Response Case (See Rapid Response On-Call Policy). If other Law Enforcement Agencies (LEA) attempt to initiate a rapid response case, the agency's response will be at the discretion of the AHS.
- 1. When an AHS receives a call from a LEA with a rapid response request, the AHW contacts the AHS at 937.605.5770 and provides the contact information for the Officer.
 - 2. The Rapid Response worker is the lead worker for this type of case, but the AHW assists as needed.
 - 3. In the event, a Rapid Response worker is unable to respond, the AHS makes the determination of who responds to the Rapid Response.
- F. Reports with allegations against a foster parent must be entered as a referral
- 1. Reports of Information and Referral (I&R)
 - 2. Allegations of a Child Abuse/Neglect (CA/N) report against a foster parent require the AHW to call the AHS to review the information.
 - a. When the report is screened-in with the foster parent being the alleged perpetrator (AP), AHS must contact Deputy Director to determine if all foster youth in the custody of Clark County FCS must be removed immediately and placed in respite or on a visit.
 - b. When there are any other foster youth placed in the home by another Children's Services Agency that agency must be notified immediately.
- G. The AHW enters all permission to treat requests in the activity log of SACWIS and sends the worker an e-mail.
- 1. If the request is for surgery or psychotropic medication the AHW contact the AHS to handle the call.
- H. When the AHW receives a report that a Foster Child (FC) in Clark County FCS custody is missing or absent without leave (AWOL), the AHW follows the AWOL of child in FCS Custody Policy; FCS-CFCS-009

IV. Initiation of Reports

- A. Once the AHW determines that a response is needed either at the request of LEA or to meet required response times, the AHW must contact the AHS prior to making their response for safety concerns.
- 1. The AHW reports the following information to the AHS:
 - a. Referral information and SACWIS history.
 - b. AHW completes research on families/individuals prior to contacting the AHS.
 - c. The AHW provides the destination address and any new addresses the AHW attempts.
 - d. The time you return home safely.

- e. At no time should AHW solicit another worker to go with him/herself without the AHS's approval.
 - B. All Emergency Referrals require an attempted face-to-face contact with the alleged child victim (ACV) within one hour.
 - C. LEA must be contacted in all emergency situations.
 - D. Law Enforcement request requires the AHW to respond to a scene or headquarters within 45 minutes.
 - E. Investigation Initiation Times
 - 1. If a referral is screened in on Friday afternoon between 3:30 p.m. and 4:30 p.m. the assigned Emergency Coverage Worker initiates the investigation.
 - 2. If a referral is received and screened in after 4:30 p.m. on Friday through Sunday at 5 p.m., the AHW initiates the investigation.
 - 3. Over extended holidays the AHW initiates the investigation according to 5101:2-36-03
 - F. Responses that require an immediate CRT to be scheduled the next business day
 - 1. Children were placed in foster care;
 - 2. When LEA removes a child and requires that the child is placed in foster care,
 - 3. A drug positive baby being held in the hospital
 - 4. The next business day the AHW must email the following group by 8:00 a.m. making them aware of the need for a CRT
 - a. Screening supervisor;
 - b. Intake supervisor;
 - c. AR supervisors;
 - d. CRT facilitator;
 - e. Back-up CRT facilitator; and
 - f. Social Worker I responsible for scheduling CRT's.
 - G. The AHW completes the following if they make the response time:
 - 1. Researches the case and parties in SACWIS;
 - 2. Completes note in SACWIS;
 - 3. Completes a change slip if a child is placed in foster care or respite;
 - 4. Completes a CRT referral form and attend the staffing;
 - 5. Attends court if needed;
 - 6. Attends RED team; and
 - 7. Completes the safety plan and enters into SACWIS.
 - H. The AHW documents all case related calls in SACWIS.
 - I. The AHW records shift and activities in the After-Hours Call Log located on the shared drive.
- V. Compensation and timesheets
- A. The AHW records time on weekly timesheet as after-hour pay or after-hour comp
 - 1. Caseworkers will comply with Section 31.5 which states: employees who are on-call shall receive one (1) hour of overtime for each eight (8) hour shift that they are on-call. If the on-call falls on a holiday, the employee shall receive two (2) hours of overtime for each eight (8) hour shift that they are on-call. If the holiday is observed on Friday or Monday, the employee shall receive two (2) hours of overtime for each eight (8) hour shift that they are on-call on the weekend.
 - 2. Supervisors will comply with section 12-F of the Clark County Personnel Manual which states: supervisors who are on-call shall receive one (1) hour of overtime for each eight (8) hour shift that they are on-call. If the on-call falls on a holiday, the employee shall receive two (2) hours of overtime for each eight (8) hour shift that they are on-call. If the holiday is observed on Friday or Monday, the employee shall receive two (2) hours of overtime for each eight (8) hour shift that they are on-call on the weekend.
 - B. The AHW that must respond in-person begins recording his/her time when the AHW leaves his/her home until the time the worker returns. This is in addition to the one (1) hour compensation for being on-call.

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- C. The AHW claims phone time only if the accumulated time exceeds more than an hour during an eight (8) hour shift, the AHW documents this on the timesheet and enters the time of the last call that put them in accumulated time.
 - D. The AHW records the actual time they were called out as straight time on the day it occurred. The AHW decides to take the overtime or may flex with approval. The AHW only accrues overtime once forty (40) hours of regular work time is recorded.
 - E. The AHW receives mileage reimbursement only if the mileage is recorded on the Mileage Sheet and submitted within prescribed deadlines.
- VI. The AHW contacts the AHS at 937.605.5770 regarding any call that meets screening guidelines for an investigation or when the case is complicated or unclear. Should a situation arise where the AHS cannot be reached, the RRW contacts any of the supervisors listed on Appendix A, selecting the one that would best be able to assist in the situation.

Clark County Department of Job & Family Services
MOU with Champaign County Department of Job & Family Services

APPENDIX III
CLARK COUNTY 2022 HOLIDAY SCHEDULE

The Board of County Commissioners, in and for Clark County, Ohio, met this 28th day of September, 2022 in regular session, pursuant to adjournment, in accordance with Section 121.22 O.R.C. (Sunshine Law), with the following members present, viz:

Melanie F. Wilt

Lowell R. McGlothin

Sasha L. Rittenhouse

Resolution 2022-0723
COMO file

Acknowledge Legal Holidays for the Year 2023

Commissioner Rittenhouse moved, to acknowledge legal holidays for the year 2023, under the authority of Section 325.19(D) O.R.C., all County Offices may observe holidays as follows:

Monday	January 2, 2023	New Year's Day (Observed)
Monday	January 16	Martin Luther King Jr. Day
Monday	February 20	Presidents' Day
Monday	May 29	Memorial Day
Monday	June 19	Juneteenth
Tuesday	July 4	Independence Day
Monday	September 4	Labor Day
Monday	October 9	Columbus Day
Friday	November 10	Veterans' Day
Thursday	November 23	Thanksgiving Day
Friday	November 24	Day after Thanksgiving (Personal Day)
Monday	December 25	Christmas Eve (Observed)
Tuesday	December 26	Christmas Day (Observed)
Monday	January 1, 2024	New Year's Eve (Observed) (Personal Day)

Commissioner McGlothin seconded the motion and the roll being called for its passage, the vote resulted as follows:

Commissioner Rittenhouse, Yes; Commissioner McGlothin, Yes; Commissioner Wilt, Yes

I, Megan Burr, Clerk to the Board of County Commissioners, do hereby certify that the above is a true and correct copy of a motion as recorded in the Journal of the Clark County Commissioners, under the date of September 28, 2022.

Megan Burr

Megan Burr, Clerk

copy: County Auditor
County Administrator
Requesting Department(s)

Champaign County Commissioners

COMMISSIONERS
TIMOTHY D. CASSADY
STEVEN R. HESS
A. NINO VITALE



CLERK/ADMINISTRATOR
ANDREA MILICE

**1512 SOUTH U.S. HIGHWAY 68
SUITE A100
URBANA, OHIO 43078
(937) 484-1611**

**BOOKKEEPER/CLERK/RECEPTIONIST
NATALIE RANSDELL**

December 15, 2023

JOB AND FAMILY SERVICES – CHILD ABUSE AND NEGLECT MEMORANDUM OF UNDERSTANDING – 2023

THE BOARD OF COMMISSIONERS of Champaign County, Ohio met in regular session December 14, 2023, with the following present:

Tim Cassady
Steven Hess

WHEREAS, The Champaign County Department of Job and Family Services is required to prepare a memorandum of understanding signed by required signatories per ORC 2151.4220; and

WHEREAS, the memorandum of understanding is to be submitted to the County Commissioners for approval per ORC 2151.4222 that the memorandum meets sections 2151.4220 to 2151.4222 of the Revised Code; and

WHEREAS, the memorandum has been submitted to the Champaign County Board of Commissioners for review; now therefore,

BE IT RESOLVED, that during their regular meeting held on December 14, 2023, the Champaign County Board of Commissioners have approved the Champaign County Child Abuse and Neglect Memorandum of Understanding.

I, Natalie Ransdell, Clerk of the Board of Commissioners, certify this to be a true and correct statement as taken from the minutes of the Commissioners' Journal, Volume 65, under the date of December 14, 2023.

A handwritten signature in blue ink that reads "Natalie Ransdell".

Natalie Ransdell, Clerk
Champaign County Board of Commissioners
Champaign County, Ohio

cc: CCDJFS

