

December 8, 2023

**GENERAL LETTER NO. 18-A2-4**

ISSUED BY: Bureau of Child Welfare and Community Services  
Division of Adult, Children, and Family Services

SUBJECT: Employees' Manual, Title 18, Chapter A(2), **CINA Intake**, Title Page, Contents I, 1-8, revised; 9 and 10, removed.

**Summary**

This chapter is revised to reflect Title 18 updates resulting from amendments to Iowa Code in the 2022 Legislative Session, including:

- The extension of safe haven to 90 days
- New and modified definitions (including a requirement that Denial of Critical Care and Dangerous Substance occurred within five years of a report to the department to be considered abuse)
- New code citation for CINA definitions
- The removal of the written report requirement for mandatory reporters
- The extension of MDTs to be used throughout department service cases
- Language around removals, placement priority, and relative notice,
- Safety plans
- Adding massage therapists as mandatory reporters
- Updating duties performed by physician assistants
- Some minor conforming changes
- Update style and formatting throughout

**Effective Date**

Immediately.

**Material Superseded**

Remove the following pages from Employees' Manual, Title 18, Chapter A(2), and destroy them:

<u>Page</u>	<u>Date</u>
Title Page	July 10, 2020
Contents I	July 10, 2020
1-8	July 10, 2020
9 and 10	July 10, 2020

**Additional Information**

Refer questions about this general letter to your area service administrator.

# CINA Intake

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## **CINA Intake Policy, Procedures, and Practice Guidance**

### **Authority to Conduct CINA Assessment Intake**

Legal reference: Iowa Code Section 232.81

**Policy statement:** Any person may file a complaint with the agency designated by the court to perform intake duties alleging a child is a “child in need of assistance” (CINA).

### **Receiving a Request for CINA Assessment**

The Department of Health and Human Services (HHS) shall receive requests for CINA assessment services. Engage with the caller by providing a thorough and courteous interview when responding to a caller who is requesting CINA services.

NOTE: To ensure thoroughness, refer to the [RC-0076, CPS and CINA Intake Decision Tree](#).

1. When a caller contacts the Department regarding a child who may need services, the call will be handled as a CINA intake.
2. When a caller contacts the Department to report suspected child abuse, but the concerns do not meet the legal definition of a child abuse allegation, the report shall be rejected as described in [18-A\(1\), Rejecting a Report of Suspected Child Abuse](#). Rejected child abuse intakes must be evaluated to determine whether the information reported constitutes a complaint that a child is a child in need of assistance.
3. Explain the following to the referral source for the CINA assessment services request:
  - HHS may provide services to children and families under two circumstances:
    - When an abuse report is founded or confirmed with high risk.
    - When a court order for services is issued.
  - If the information received during the intake call indicates that the child or family may be eligible for CINA services, a parent, guardian, or custodian of the child will be offered an application for CINA assessment services.
  - There is not a code or rule basis for confidentiality of reporter on a service referral (i.e., CINA assessment).

NOTE: It is not necessary to determine the type of referral source for a CINA intake. No one is mandated to make a referral for CINA assessment services.

### **Gathering Intake Information for a CINA Assessment**

1. Carefully ask questions to determine if the request meets criteria to become accepted as a CINA assessment referral. Obtain as much of the following information as possible from the requester:
  - **Child:** Name, home address, phone number, current location or residence, date of birth, age, physical condition, name of school or child care.
  - **Parents:** Name, home address, phone number, current location or residence.
  - **Caretaker** (if other than parent): Name, address, phone number, current location or residence.
  - **Other children:** Name, dates of birth, age, and condition of other children in the same household.
  - **Others in the household:** Name, age, and relationship of other adults in the same household.
  - **Description:** Condition of child, the nature of the child's needs and behaviors; parent or caretaker's perception and response to the child's needs and behaviors, and details of the concerns for the child.
  - **Collaterals:** Name, home address, phone number, relationship to the child, and how they are knowledgeable about the child's circumstances.
  - **Reporter:** Name, home address, phone number, relationship to the child, and how they are knowledgeable about the concerns being reported.

NOTE: If there is reason to believe that child abuse exists, treat the call as a child protective intake.
2. Check Department and other system records (See 18-A(1), [Conducting System Checks](#)).
3. Complete form [470-0607, Child Protective Services Intake](#) for every intake allegation received by the Department when a CINA assessment request is made, regardless of whether the report contains all necessary information to become a case. Document system checks on the intake.

### **Evaluating Intake Information for a CINA Assessment**

Legal reference: Iowa Code Sections 232.87 and 232.71B(19)

**Policy statement:** The Centralized Service Intake Unit (CSIU) shall evaluate the credibility of the facts and circumstances alleged and the information gathered to determine if the concerns constitute an allegation of a CINA as statutorily defined.

Advantages of thoroughly evaluating the CINA intake information include:

- Improved safety for children,
- More complete information at the outset for the assigned worker, and
- Improved public awareness of the Department's roles and responsibilities.

### **Use of Completed Assessments and Rejected Intake Information**

For the greatest protection of children, all available and pertinent HHS records must be reviewed to determine whether a report of suspected child abuse becomes accepted for assessment or a rejected intake.

Intake staff and CPWs must review and consider all information known to the Department, including information maintained in the completed assessments as well as rejected intakes (regardless of whether the information was received during the most recent referral) to ensure a comprehensive thought process to the intake decision.

Not only will accessing the information contained in the HHS records assist with the intake decision, but it will also assist with any assessment accepted. Use the available information to protect children as follows:

- **Intake workers** will retrieve, analyze, and assess the information contained in completed assessments and rejected intakes to determine:
  - Whether or not the allegation has been previously assessed, and
  - Whether or not previously rejected information, combined with the current allegation, meets the legal threshold for acceptance.

Include all previous assessments and rejected intake history on the intake form.

- **Assessment workers** will use the information contained in completed assessments and rejected intakes to be alert to possible other concerns.

Do not specifically reference rejected intakes on the assessment summary. This is because intakes have more limited legal access than the child abuse assessment report.

Document fulfillment of the duty to review and consider the HHS records in the assessment summary by including a statement such as, “Worker has reviewed all available records as required.”

### **Making the CINA Assessment Intake Decision**

Legal reference: Iowa Code Section 232.96A

**Policy statement:** A CINA assessment intake may be accepted if allegations fall within the definition of a child in need of assistance.

See the [RC-0077, CINA Guidance Tool](#) for information regarding the statutory basis for CINA assessments.

- Determine if the CINA intake meets the requirements for a CINA assessment by determining if there is a reasonable belief that one of the following situations exists:
  - The child is in need of medical treatment to cure or alleviate or prevent serious physical injury or illness, and the child’s parent, guardian, or custodian is unable to provide such treatment.

- The child has been the subject of or a party to sexual activities for hire or has posed for a live display or pictorial reproduction that is designed to appeal to the prurient interest, is patently offensive, lacks serious literary, scientific, political, or artistic value; and the child's caretaker has not had knowledge of, encouraged, or permitted these acts.
- The child is without a parent, guardian, or other custodian because the parent is deceased.
- The child's parent, guardian, or custodian for good cause desires to be relieved of the child's care and custody.
- The child for good cause desires to have the child's parents relieved of the child's care and custody.
- The child is in need of treatment to cure or alleviate chemical dependency and the child's parent, guardian, or custodian is unable to provide this treatment.
- The mental capacity or condition of the child's parent or guardian results in the child not receiving adequate care.
- An adult member of the household in which a child resides, who is not a caretaker, does any of the following and the child's caretaker has not had knowledge of, encouraged, or permitted these acts:
  - unlawfully uses, possesses, manufactures, cultivates, or distributes a dangerous substance in the presence of a child; or
  - knowingly allows such use, possession, manufacture, cultivation, or distribution by another person in the presence of a child;
  - possesses a product with the intent to use the product as a precursor or an intermediary to a dangerous substance in the presence of a child; or
  - unlawfully uses, possesses, manufactures, cultivates, or distributes a dangerous substance, as defined in Iowa Code Section 232.96A, in a child's home, on the premises, or in a motor vehicle located on the premises.
- The child is **imminently likely** to be abused or neglected. This may include, but is not limited to, a child born into a family in which:
  - The court has previously adjudicated another child to be a child in need of assistance due to abuse;
  - The court has terminated parental rights to a child; or
  - The parent has relinquished rights with respect to a child due to child abuse.

NOTE: Reject CINA intakes for mental health needs of children when the parent is willing but unable to provide mental health services. In this situation, refer the family to the Medicaid children's mental health waiver.

- Obtain supervisory review and approval for accepting or rejecting the CINA assessment referral.

NOTE: *Notice of Intake Decision* is not required for a CINA intake.

- The supervisor assigns the CINA assessment referral within one business day.

The assigned assessment worker is required to initiate contact with the child and family within five business days of the intake date.

### **Rejected CPS Intake Accepted for CINA Assessment**

Legal reference: 441 IAC 175.21 and 175.24, Iowa Code Section 232.81 and 232.71B(19)

**Policy statement:** A CINA assessment must be accepted when the rejected report of suspected child abuse intake information indicates a reasonable believe that CINA criteria exists.

### **Rejected CINA Assessment Intakes**

Legal reference: 441 IAC 175.21 and 175.24, Iowa Code Sections 232.87 and 232.71B(19)

**Policy statement:** If the intake information does not contain information to determine whether the case meets criteria for referral for CINA assessment services, the CINA intake will be rejected.

When a CINA intake is rejected, the Department's involvement ends with provision of information on community resources being provided to the caller, if applicable to the circumstances reported. Rejected CINA intake information shall be maintained by the Department for three years from the date the report was rejected and shall then be destroyed.

## **Retention of CINA Assessment Intake Information**

All CINA intakes, whether rejected or accepted for assessment, are maintained on the STAR Intake module in JARVIS (see [RC-0143. JARVIS Reference](#)).

Intakes are retained so that the information contained within the intake record can be considered in future intake decisions and in future protective assessments.

### **Retaining Rejected CINA Assessment Intakes**

Retain CINA Assessment intakes rejected before March 1, 2010 (including any information provided by the reporter), for six months.

Retain CINA Assessment intakes rejected on or after March 1, 2010 (including any information provided by the reporter), for three years from the date of the decision to reject.

### **Retaining Accepted CINA Assessment Intakes**

Intakes accepted for CINA Assessment are considered service information and are retained for five years from the date of intake or five years from the date of closure of the service record, whichever occurs later.



## **Notice of CINA Assessment Intake Decisions**

There are no notifications for CINA Assessment intakes.

You may share information with the referral source if the source of the referral is the parent.

You may share information with a referral source who is not the parent only if the parent has signed a release of information.

- Either the referral source or Department staff may obtain the release of information.
- Before sharing information with a referral source who is not the parent, you must:
  - Have possession of the release of information, and
  - Ensure that the release adequately authorizes the specific information to be shared.

## **Jurisdiction of Accepted CINA Assessments**

Legal reference: Iowa Code Sections 232.61 and 232.72

**Policy statement:** The county of residence of the child is the county responsible for the CINA assessment.

Assign primary responsibility for completing the CINA assessment to the unit serving the county where the child's home is located.

## **Response Time for CINA Assessments**

Legal reference: 441 IAC 175.24, Iowa Code Section 232.71B(19)

**Policy statement:** The supervisor shall assign reports accepted for CINA assessment within one business day. The assigned worker shall make contact with the child and family within 5 business days of the intake and shall complete the assessment summary in 20 business days.

## **Abandonment of a Child**

Legal reference: Iowa Code Chapter 232.96A

**Policy statement:** An immediate response is required when a parent, guardian, or other custodian has abandoned or deserted the child.

Intake staff will gather and document information on referral calls regarding children who are abandoned. An immediate response is required when the child's parent, guardian, or other custodian is absent.

Accept a CPS intake if abuse is alleged. Accept a CINA assessment intake if the referral meets any of the CINA assessment criteria. Two CINA criteria address abandonment:

- Iowa Code 232.96A(1): Whose parent, guardian, or other custodian has abandoned or deserted the child.

- Iowa Code 232.96A(17): Who is a newborn infant whose parent has voluntarily released custody of the child in accordance with Iowa Code chapter 233, the Newborn Safe Haven Act.

The assigned worker for an abandoned infant (or safe haven infant) shall:

- Immediately notify the juvenile court and the county attorney to seek an ex parte removal order for placement, in accordance with Iowa Code Section 232.78. (Note: A peace officer, juvenile court officer, physician or physician assistant treating the child may keep the child in custody if there is imminent danger to the child's life or health.)
- Secure medical evaluation of child.
- Provide a written summary of information to the juvenile court and the county attorney within 24 hours.

If the call is received during business hours, the intake supervisor will notify the service supervisor for assignment of a CPW or SWCM.

If the call is received outside of normal business hours, the intake supervisor will notify the assessment supervisor for assignment of a CPW or SWCM.

### **Safe Haven**

Legal reference: Iowa Code Chapter 233

**Policy statement:** If an infant 90 days of age or younger is abandoned at an institutional health facility or by authorizing another person to relinquish physical custody on the parent's behalf, the Department shall respond as required under the Newborn Safe Haven Act. If the child has been abused, the Department worker shall make a report of suspected child abuse.

The Newborn Safe Haven Act provides procedures for a parent, or another person who has the parent's authorization, to leave an infant who is, or appears to be, 90 days of age or younger at a hospital or health care facility without fear of prosecution for abandonment. A parent may also contact a 911 service and relinquish physical custody to the 911 responder without expressing an intent to again assume physical custody and not fear prosecution for abandonment.

See the Safe Haven page on the Department's website: <https://hhs.iowa.gov/safe-haven>

The Newborn Safe Haven Act requires the Department to assume the care, control, and custody of an infant from the person on duty at a hospital or health care facility where physical custody of the infant was relinquished.

See Department of Health and Human Services Responsibilities reference document: <https://hhs.iowa.gov/media/116/download?inline>

The hospital or health care facility or first responder is required to call the Department's child abuse hotline when they have taken physical custody of an infant. Intake staff will immediately notify a child protection worker of the situation so that they may:

- Request an ex parte order from the juvenile court ordering the Department to take custody of the infant, in accordance with the requirements of Iowa Code Section 232.78,
- Secure a foster home for the infant,
- Notify the juvenile court and the county attorney of the action taken and the circumstances surrounding the action,
- Upon receiving the order, take physical custody of the infant,
- Seek a medical determination that the infant is healthy and able to be placed in a home setting (if the infant has not already been examined by a medical professional at the hospital or health care facility they were relinquished to),
- Within 24 hours of taking custody of the infant, the Department must notify the juvenile court and the county attorney in the county where the infant was relinquished in writing of the action taken by the Department and the circumstances surrounding the action.

The role of the county attorney for a safe haven infant includes:

- Filing a CINA petition and a petition for Termination of Parental Rights.
  - A hearing on a CINA petition filed pursuant to Iowa Code chapter 233 shall be held at the earliest practicable time.
  - A hearing on the Termination of Parental Rights petition shall be held no later than thirty days after the day the physical custody of the infant was relinquished unless the juvenile court continues the hearing beyond the thirty days for good cause.
    - Before holding a termination of parental rights hearing, notice shall be provided as described in Iowa Code Section 600A.6, subsection 5.
    - Reasonable efforts made in regard to the infant shall be limited to the efforts made to finalize a permanency plan in a timely manner.
- Providing notice of the petition to:
  - Any known parent.
  - Person authorized to relinquish custody of the infant.
  - The employee of the safe haven who took custody of the child.
  - Any putative father registered with the state registry.
  - Others in accordance with the provisions of the law.

If there is any reason to believe the infant may be a Native American, the appropriate officials should also be notified pursuant to the federal Indian Child Welfare Act, 25 U.S.C. § 1905-1963.