CONNECTIONS

Step-by-Step Guide:

Training for CPS Workers

CONNECTIONS Training Project
SUNY Training Strategies Group

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# CONNECTIONS Step-by-Step Guide: Training for CPS Workers

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Welcome and Participant Information

As a Child Protective Services worker, you are taking on a vital role. Child welfare practice in New York State strives to achieve the following five outcomes for children and families:

- Children are safe.
- Families are preserved.
- Children are adopted when their birth family cannot be preserved.
- Children leaving care at the age of majority can live independently.
- Children and youth develop normally.

You, the worker, are the primary instrument employed by the child welfare system to achieve these outcomes. You will use CONNECTIONS, New York’s child welfare information system, to record and document your efforts to achieve these outcomes.

The Content of this Guide

This guide leads you through the functions in CONNECTIONS that you’ll use to accomplish CPS casework documentation activities. It contains step-by-step instructions for accomplishing necessary tasks in CONNECTIONS, introductory remarks that provide a work context for these tasks, CPS Case Recording Guidelines and hints on how to carry out these tasks efficiently and effectively.

This guide also covers general computer skills and navigation in CONNECTIONS and a module on how to access additional information and help on using CONNECTIONS.

The last section of this guide contains hands-on practice exercises for you to use with the Training Database to reinforce your CONNECTIONS skills. These exercises cover key CONNECTIONS activities you will perform as a CPS worker.

Note:
Any visible identifying data in this guide is simulated.
Features of this Guide

Three features of this guide help you quickly identify the information you need:

- **Tips**, set apart in margin boxes, provide information to help you carry out CONNECTIONS tasks efficiently and effectively. Icons in the boxes help focus your attention on the following kinds of tips:

  - Helpful tips
  - NYC Only content
  - Things to watch out for

- **CPS Case Recording Guidelines** contain step-by-step instructions for meeting qualitative standards. These are based on OCFS policy and are presented to assist you in documenting casework.

We hope you find this to be a useful aid in your CPS work!
Using the Training Database with this Guide

You can use this guide as a resource for your daily work in CONNECTIONS. We suggest that you use this guide while working directly in CONNECTIONS Production or in the Training Database.

What is the Training Database?

The Training Database provides a safe environment for you to learn and practice CONNECTIONS skills using simulated case data. The SUNY Training Strategies Group acts as the custodian for the Training Database sign-on IDs. These ID numbers are referred to as Desktop User (DU) numbers and Instructor Led (IL) numbers. Sign-on numbers begin with either DU or IL, and are followed by four digits.

The Training Database has the look and feel of the CONNECTIONS system currently in production. When you sign on to the Training Database using a DU number, you will see a simulated environment displaying the Assigned Workload of a fictitious worker, Darryl Wilson. Darryl Wilson has been assigned seven stages of service, including five Child Protective Service (CPS) stages. These stages have been created specifically for training purposes. In the New York City training labs, you will use IL numbers, which display the Assigned Workload for a fictitious worker named Jamie Miller.

When you sign on as Darryl Wilson or Jamie Miller, you have the ability to complete the tasks necessary to maintain and progress each stage of service. As a CPS worker, you have the ability to accept or reject an Intake stage of service, progress the Intake to the Investigation stage, and perform all tasks necessary to complete an investigation. The Training Database also has common functions, such as Person Search, Resource Search, and a Staff To-Do List.

When using the Training Database you are considered a “Super User.” This means you may have access to windows that you won’t have back at the office. For example, Darryl Wilson has the ability to access the workload of his supervisor, Sally May. Jamie Miller has the ability to access the workload of his supervisor, Cassie Landers. You may approve work submitted by Darryl Wilson by opening Sally May’s Staff To-Do List and completing related approval tasks. Opening Cassie Landers’ Staff To-Do List and completing the related approval tasks approves the work submitted by Jamie Miller.

Information is deleted when the computer system is refreshed each night; any material that you enter into the system is available to you only until the end of that day.
Logging On to Your PC

The CONNECTIONS application can be accessed only by designated individuals on computers that are set up to run the application.

Once you have completed logging on to Windows, the step-by-step instructions in the next section will show you how to access CONNECTIONS.

Step-by-Step: Logging on to Your Computer

1. Press the Ctrl + Alt + Delete keys on your keyboard at the same time. A Confidentiality warning displays.

2. Click on the OK button in response to the Confidentiality warning. The Log On window displays. Make sure that your domain (HSEN) is listed correctly in the log on dialog box.

3. Enter your user name and password and click on the OK button. Your local desktop displays.
Accessing CONNECTIONS

The CONNECTIONS application is made available to users in three different ways:

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<tr>
<th><strong>Production Database</strong></th>
<th>The Production Database contains “live” data. This is the database that all workers use to record information in CONNECTIONS.</th>
</tr>
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<tr>
<td><strong>Training Database</strong></td>
<td>The Training Database contains simulated data and allows you to practice functions necessary for your casework activities while you are participating in a training class. It mirrors the functionality of the Production Database. See “What is the Training Database” on page 3 for more information.</td>
</tr>
<tr>
<td><strong>Preview Application</strong></td>
<td>The Preview Application contains a “snapshot” of actual case data. Information entered into the Preview application does not carry over to the Production database. The Preview Application provides the opportunity to preview changes and enhancements planned for the CONNECTIONS system. The Preview Application is available for a limited time when changes to the system are made. You will receive special notice when the Preview application becomes available.</td>
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To distinguish between the Training Database and the Preview application, keep in mind that the Training Database contains simulated data, while the Preview application is a “snapshot” of actual case data. The Training Database allows you to practice functions necessary for your casework activities. Information entered into the Preview application does not carry over to the Production database.

Using the CONNECTIONS Production Database, you can access your Assigned Workload from any CONNECTIONS workstation throughout New York State. All you need is a valid User ID and password to gain access to your workload. All users in your agency must be following established OCFS/OFT password standards (See Appendix I for the Security Guidelines). Here are some ways to keep your password protected:

**Make it difficult**
Select a password that is easy for you to remember, but difficult for others to guess. Don’t be stingy—make your password as long as possible (at least 8 characters and up to a maximum of 13 characters), in order to help reduce the likelihood of allowing someone to guess it. You cannot use all or part of your logon ID in your password, nor can you reuse any of your last 13 passwords.

**Mix it up**
Your OCFS password must contain at least one uppercase letter, one lowercase letter and one number. CONNECTIONS users must never use symbols in their passwords.

**Keep it to yourself**
Don’t share your password with others. Never display your password; if you need to write it down, don’t keep the information at your desk or anywhere it can be easily seen by others.

**Embrace change**
You must change your password periodically—at least once every 90 days. If you think your password has been compromised, change it immediately. (Don’t forget to report the situation to your LAN/Security Administrator as soon as possible!)
**Be yourself**
Use *only* your logon ID and password; *never* use a current or former co-worker’s ID or password.

**Let your fingers do the walking**
*Never* store passwords in macros or automatic log-on features. Enter your password manually every time.

If the **AutoComplete** window displays during the logon process, select the **Don’t offer to remember any more passwords** checkbox and click on the **No** button.
Step-by-Step:
Launching CONNECTIONS (Production)

1. From your local desktop, double-click the **CONNECTIONS and other Citrix Applications** icon. The **CONNECTIONS and other Citrix Applications** window displays, containing icons of applications that are available to you based on your NT logon.

2. Double-click on the **CONNECTIONS Desktop 95 Percent** icon. The Citrix desktop displays and your Citrix session begins.

3. Double-click on the **Connections** icon. The **CONNECTIONS Toolbar** displays.

**CONNECTIONS** resides on centralized Citrix servers. Once you begin a “Citrix session,” the Citrix desktop displays, covering your local desktop and remaining open for the length of your Citrix session. The Citrix desktop also has an easily recognizable background.

If you access the Citrix desktop via the **Connections Desktop** icon on the **Connections and Other Applications** window, the Citrix session begins and the **CONNECTIONS Toolbar** displays. If you access the Citrix desktop via the **CONNECTIONS Training** icon on the **Connections and Other Applications** window, you are required to log on a second time.

The **Task Bar** at the bottom of the Citrix desktop provides a method of organizing the application windows that you have open in Citrix. You can have more than one window open on your desktop at a time. Minimize a window by clicking on the **Minimize** button ( ). The minimized window displays as a button on the Task Bar. This makes room for other windows you need to use at that moment. To re-open an application, click on its button on the Task Bar; the application displays as the active window, placing it “on top of” any other open windows.

Clicking on the **Start** button (in the lower left corner of the Citrix desktop) displays the **Start** menu, which provides access to the **Citrix Log Off** procedure (see page 9 for details on this procedure).

---

Step-by-Step:
Launching CONNECTIONS (Training Database)

1. From your local desktop, double-click the **Connections and other Citrix Applications** icon. The **Connections and other Citrix Applications** window displays, containing icons of applications that are available to you based on your NT logon.

2. Double-click the **Connections Training Desktop 95%** icon. A **Confidentiality Warning** message displays.

3. Click on the **OK** button in response to the Confidentiality Warning. The **Log On to Windows - <Name>** dialog box displays. The **name will vary depending on the server that is being accessed.**
4. Enter a training user name (DU or IL#) in the User name field.
A special User ID is required to access the Training Database. This special User ID is referred to as a Desktop User (DU) number [Upstate trainings only] or an Instructor Led (IL) number [NYC trainings only].

5. Enter Train123 in the Password field.
This field is case sensitive.

6. Click on the drop-down arrow for the Log on to field and select HSEN as the domain.

7. Click on the OK button.
The Citrix desktop displays and your Citrix session begins.

When the CONNECTIONS Training Database has launched successfully, the CONNECTIONS Toolbar displays. In the title bar, the DU number you entered displays as the fictional worker Darryl Wilson with the same ending digits, not counting zeroes (e.g., DU0123 displays as Wilson123, Darryl). If you entered an IL number, the title bar displays the name of the fictional worker Jamie Miller.

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**Step-by-Step: Launching CONNECTIONS (Preview Application)**

1. From your local desktop, double-click on the Connections and other Citrix Applications icon.
The Connections and other Citrix Applications window displays, containing icons of applications that are available to you based on your NT logon.

2. Double-click on the Connections Preview icon.
A Confidentiality Warning message displays.

3. Click on the OK button in response to the Confidentiality Warning.
The Citrix desktop displays and your Citrix session begins.

4. Double-click the Connections Preview icon.
When the CONNECTIONS Preview Application has launched successfully, the CONNECTIONS Toolbar displays. The title bar reads: Preview CONNECTIONS Toolbar - <Your Name>.

---

If you incorrectly enter the domain or your password, the following message displays:
“The system could not log you on. Make sure your User name and domain are correct, then type your password again. Letters in passwords must be typed using the correct case. Make sure that Caps Lock is not accidentally on.”

Re-enter your password and click on the OK button.

The following error message may display when attempting to switch between the Production Database and the Preview or Training Applications:
“You already have a session open in CONNECTIONS.”

In order to disconnect from a session (and avoid the error message), you must click on the Citrix Start menu at the lower right corner of your Citrix desktop and select Log Off #######... This will disconnect your current session and allow you to open a new session.
Closing CONNECTIONS and Logging off Your PC

When you have finished your work in CONNECTIONS, you should close both CONNECTIONS and your Citrix session. This is best done as a two-step process: first close CONNECTIONS, then log off of Citrix. Doing so (as opposed to logging off of Citrix while CONNECTIONS is still open) reduces the likelihood of problems occurring during the log off procedure.

At the end of your work day, it is important to log off your PC; if you completely shut down (turn off) your computer, it will not be able to receive any updates that may occur overnight. Leaving the computer logged off (but with the power still on) will enable it to receive these updates.

The step-by-step instructions below will assist you in closing CONNECTIONS and logging off of your PC.

### Step-by-Step:
Closing CONNECTIONS and Logging Off Your PC

1. Click on the **File** menu (represented by the Globe icon [ ![Globe icon](image)] in the upper left corner of the CONNECTIONS Toolbar) and select **Close**. You may need to use the vertical scroll bar to scroll up on the desktop to reveal the Globe icon (File menu) on the CONNECTIONS Toolbar.
2. Click on the **Start** button in the lower left corner of the Citrix desktop and select **Log Off <User name>** from the resulting menu. **The Log Off dialog box displays.**
3. Click on the **Yes** button. **This does not log off your machine; it only ends your session with the Citrix server.** Your local desktop displays.
4. Close all applications still open on your local desktop.
5. Click on the **Start** button. **The Start menu displays.**
6. Click on the **Log off <user name>** command. **The Shutdown Windows dialog box displays. If necessary, click on the drop-down arrow and select Log off <user name>.**
7. Click on the **OK** button.
CONNECTIONS Security

In order to protect the confidentiality and integrity of case data, access to information in CONNECTIONS is carefully controlled. A number of factors determine the information you can view or maintain in CONNECTIONS, including your job function, the cases to which you are assigned and your Business Function Profile (BFP).

All CONNECTIONS users receive security profiles which determine the windows or types of information they can open and view, as well as which windows they can modify or “maintain.” In CONNECTIONS, each person’s security profile is called a Business Function Profile (BFP). Each worker has only one BFP. Each BFP is comprised of one or more Business Functions, which in turn are comprised of one or more Security Attributes (see the graphic below).

Your Business Function Profile (and therefore your access to information on CONNECTIONS) is based on the tasks you are responsible for performing and the level of access to records needed to complete those tasks. Your BFP may contain multiple business functions based on your responsibilities. It is restricted to what is necessary for the normal performance of your job responsibilities; this is accomplished by the assignment of a unique User ID to each CONNECTIONS worker. The User ID and Password are the “keys” to access certain agency information. Your User ID and password are also a form of identification; they link you to actions in the system. You are responsible for actions taken with your User ID and password; it is up to you to protect your password to prevent unauthorized access or misuse of information.

Security coordinators at the local district and voluntary agency level assign appropriate Business Functions to each staff person in their offices, creating an individual Business Function Profile for each worker. A few examples of Business Functions that might be included in a local district CPS worker’s BFP are “View Under Investigation,” “View Indicated” and “View Unfounded.” Workers with the “Unit Summary Access” Business Function in their respective BFPs are able to review the Assigned Workloads of the staff members in their units. (Typically, this Business Function would be included in the BFP of a Unit Approver.)
Keep in mind that your Security Coordinator may need to monitor workers' activity on the system. Do not have any expectation of privacy in the information stored in or sent through the OCFS network (including e-mail), as your Security Coordinator and OCFS/OFT reserve the right to monitor or search any system at all times. You are notified of this each time you log into the network; a warning message displays.

You must understand your role and responsibilities regarding the security of CONNECTIONS information. You have an obligation to protect and preserve all information in a consistent and reliable manner. As a CONNECTIONS user, you are responsible for ensuring that appropriate physical, logical and procedural controls (such as locking your keyboard when you are away from your computer) are in place to preserve the confidentiality, integrity, availability and privacy of CONNECTIONS information. Information must be protected and classified based on security best practices as defined in the International Security Standard ISO/IEC 17799, *A Code of Practice for Information Security Management*.

As you use CONNECTIONS, you may see buttons and menus which are gray instead of black. The gray color indicates that this function is disabled and, therefore, not available to you.

Features are sometimes disabled based on your BFP. For example, the UNIT button on the CONNECTIONS Toolbar is disabled for workers, since this function is available only to supervisors. If there is information in the system that you need to access in order to complete your work, but that information is not available to you, talk to your supervisor.

If you are working on a stage and cannot view or modify information that relates to your job responsibilities, you should review your BFP with your supervisor to make sure the Business Functions included in your BFP are adequate for the work you are doing.

A special Business Function, “View Security Profile,” allows you to review your BFP in CONNECTIONS to see the business functions assigned to you. If your BFP indicates that you do not have security access for a task you need to complete, speak with your supervisor and your office’s security coordinator.

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**Step-by-Step:**

**Viewing Your Business Function Profile**


2. Click on the View Staff Security command. *The Staff Search Criteria window displays.*

3. Type your first and last names into the appropriate fields.

4. Click on the Search button. *The Staff List displays.*

5. Click on your name to select it from the Staff List.
6 Click on the **OK** button. *The Staff Security window displays. The Business Function list box in this window contains the business functions that have been assigned to you.*

7 The Business Functions assigned to you are identified with red check marks. Use the vertical scroll bar inside the Business Function list box to view the entire list.

8 To close the *Staff Security* window, click on the **Cancel** button.
Module 1: CONNECTIONS and the Child Welfare System

An understanding of CONNECTIONS’ role in New York State’s child welfare system helps provide context for the work you perform as a CPS worker. This first module introduces you to the history of the CONNECTIONS system, its role in the state’s child welfare system, basic concepts used in CONNECTIONS, and how CONNECTIONS ensures the confidentiality of records.

By the end of this module, you will be able to:

- define what CONNECTIONS is;
- describe how CONNECTIONS supports the child welfare system in New York State;
- differentiate between cases, stages and tasks in CONNECTIONS; and
- identify how CONNECTIONS ensures the confidentiality of records.
What is the CONNECTIONS System?

CONNECTIONS is a child welfare computer system that allows for documentation of information about families and children in New York State. The CONNECTIONS system is part of a Federal initiative called the Statewide Automated Child Welfare Information System (SACWIS). In 1993, the Federal government provided financial incentives for states to develop statewide automated child welfare processes in an effort to provide more efficient and effective administration of programs and Federal reporting. CONNECTIONS is the name of the statewide automated data management system for child welfare in New York State. Many other states have similar systems with other names.

CONNECTIONS is designed to create a single, statewide, integrated system for the collection and recording of child protective, preventive, foster care and adoption service information. The CONNECTIONS system will eventually interface with and/or replace the existing New York State “legacy” systems—the Welfare Management System (WMS), the Child Care Review Service (CCRS) and the Benefits Issuance Control System (BICS).

CONNECTIONS has been implemented in a series of packages, called Releases. Release 3 is the latest production release. Smaller updates to the system are rolled out as a Build.

How CONNECTIONS Supports the Child Welfare System

No matter what our roles may be in the child welfare system, each of us shares and contributes to the mission of child welfare: to ensure safety and permanence for children. To achieve this mission, child welfare practice must remain focused on the five child welfare outcomes:

- Safety of children
- Family preservation/reunification
- Adoption when the birth family cannot be preserved
- Independent living with a permanency resource
- Normal child and youth development

CONNECTIONS supports child welfare’s mission and achievement of the five child welfare outcomes by providing a way to manage information related to work with children and families, and to save that information for future reference. You need to document your efforts in order to facilitate the management of your caseload. Documentation provides a historical record of information to others involved in the case, including supervisors, subsequent workers, lawyers, Family Court, etc. It provides concrete information about a case and the persons involved. Information in the system is also used to conduct the required background checks needed to clear staff for work with children and families.
Understanding Cases, Stages and Tasks in CONNECTIONS

CONNECTIONS organizes information about a family or individual situation into cases and stages. A CPS case is a collection of one or more reports of abuse, maltreatment, or services provided that require casework activity. A stage is a grouping of casework activities related to a particular time frame, case status, or casework action within the context of the overall case.

Six stages are currently implemented in CONNECTIONS:

- Intake (INT)
- Investigation (INV)
- Family Services Intake (FSI)
- Family Services Stage (FSS)
- Foster/Adoptive Home Development (FAD)
- Administrative Review Investigation (ARI)

Other functions will follow in future builds.

All CPS cases begin with an Intake stage, initiated by a report to the State Central Register (SCR). Onondaga and Monroe counties also receive reports and create CPS Intakes locally. If multiple investigations are open concurrently on a family, the case will have more than one open stage.

Stages are organized further into tasks. The CONNECTIONS Task List for the Investigation stage contains the following tasks:

- Review Intake
- Maintain Person
- Maintain Primary Address and Phone
- Maintain Allegation
- Investigation Actions
- Safety Assessment for Case
- Investigation Conclusion
- Child Protective Record Summary

You may repeat some of these tasks and perform them at several key intervals throughout the stage.
Understanding Your Role in a Stage

As a CPS worker, you will be assigned as either a Primary or Secondary worker in an INT or INV stage. These roles describe different levels of responsibility for a stage or overall case:

- A *Primary* worker has overall responsibility for a stage. Primary workers can view and maintain (modify) information in the stages to which they’re assigned. They can also view information for other stages in the same case. There can be only one primary worker for a stage. The Primary worker assigned to a stage has traditionally been responsible for all data maintenance in the stage and must document the final decisions regarding what is best for the child(ren) and family. The worker in whose jurisdiction the child is located is ultimately responsible for the safety of that child. That worker might not be the Primary worker.

- There can be any number of *Secondary* workers also assigned to work on a stage. Secondary workers can also view and record some information in the stages to which they are assigned. Secondary workers cannot Save and Submit the investigation determination for approval.

All CPS workers with the appropriate Business Function Profile (BFP) are able to view the *Child Protective Record Summary* window (CPRS) for a particular investigation (more information about BFPs and security can be found on page 10).

CONNECTIONS makes it possible to access specific information related to cases to which you are presently assigned, or to which you have *ever* been assigned, even if that information is in a case in another jurisdiction. If a stage you are working on shares a person in common with another case, you are given an *implied* role in the related case. With this implied role you will be able to view information on the related case, but not to change any of it. This feature is available only to staff in local districts (with the appropriate BFP), not to staff in voluntary agencies.
Module 2:  
Getting Started

As a Windows-based application, many features of CONNECTIONS are common to other Windows-based applications. This module shows you how to accomplish basic system tasks that are similar to those in other Windows-based applications. It also introduces you to the main navigation methods in CONNECTIONS.

By the end of this module, you’ll be able to:
- minimize and maximize windows;
- use scroll bars;
- switch between windows using the Alt and Tab keys;
- copy and paste information;
- use CONNECTIONS Toolbar buttons;
- use CONNECTIONS menus; and
- use buttons in CONNECTIONS windows.

Basic Windows Skills in CONNECTIONS

When you launch CONNECTIONS, the CONNECTIONS Toolbar displays. If you are using either the Production Database or Preview Application, the title bar (located at the top of the CONNECTIONS Toolbar) displays the name of that environment, “CONNECTIONS Toolbar” and your name. If you are using the Training Database, the title bar displays “Training - CONNECTIONS Toolbar” and the fictitious name assigned to the Training Database worker. The CONNECTIONS Toolbar contains buttons and menus that enable you to open CONNECTIONS windows. Since CONNECTIONS is a Windows-based application, to use it effectively you need to be familiar with how windows work.

Understanding Windows

Every window, like the CONNECTIONS Toolbar, has buttons and menus. These features enable you to change information on the window and/or navigate to other windows in CONNECTIONS. Each window also includes a Close button (❑), located in the upper right corner of the title bar (the colored bar at the top of the window), that you can use to close the window.

You can have more than one window open within CONNECTIONS and have multiple applications open within Windows, each with its own window. When you have a number of windows open, they will be stacked one on top of another, like sheets of paper. The “active window” will be topmost in the stack. You can only work in the active window.
The ability to have multiple windows open ("multitasking") is a feature that allows you to use a number of applications at once, but it can be confusing. This section explains how to manage and manipulate multiple windows.

**Moving Windows**

Windows in the CONNECTIONS application are slightly smaller than the size of your screen. Although you cannot resize them, you can move them. This allows you to see the windows that are open but may be displayed underneath the active window.

To move a window, position your cursor over the title bar and hold down the left mouse button while you drag the mouse ("click & drag").

**Minimizing and Maximizing Windows**

While you cannot change the size of the windows in CONNECTIONS, you can manipulate some (e.g., Microsoft Word documents that you open within CONNECTIONS and CONNECTIONS Help windows). These windows can be minimized or maximized like windows in other applications. To understand how this works, it is helpful to know a bit about window states.

At any point a window displays in one of three states: *normal*, *maximized* or *minimized*. A *normal* window partially fills the screen and usually can be resized. A *maximized* window fills the entire screen. A *minimized* window is still open, but is represented only by an icon on the desktop.

Most CONNECTIONS windows are set to a uniform size and cannot be maximized or minimized. You can, however, change the size of Microsoft Word and CONNECTIONS Help windows by using the **Minimize**, **Maximize** or **Restore** buttons located in the upper right corner of the Microsoft Word document window.

**Scrolling**

The vertical and/or horizontal scroll bars display on the right side and bottom, respectively, of windows whenever there is more information than can be displayed in a window at one time. There are three ways to scroll through a document:

- Click on the top or bottom (or right or left) arrow on the scroll bar to scroll up or down (or side to side) through the document a little bit at a time.
- To scroll more quickly, click and drag the center block in the scroll bar up or down (or right or left) until you locate the appropriate section of the document.
- In some windows, "mega-scroll" buttons (which look like dog-eared pages) display at the juncture of the vertical and horizontal scroll bars. Use the mega-scroll buttons to move beyond the last record you can view with the scroll bar.
Switching Between CONNECTIONS and Applications on your Local Desktop

The Alt+Tab hot key combination enables you to move between your Citrix session and other applications on your local desktop.

1 Hold down the Alt key.

2 Briefly press and release Tab key to cycle through open application windows. With each press of the key, a pop-up window displays with the name of an open application window.

3 When you see the name of the application you want to access, release the Alt key. The open application window you selected becomes the active window.

The Ctrl+Esc hot key combination enables you to move between your Citrix session and other applications on your local desktop. The Start menu for your local desktop displays when you use Ctrl+Esc on your keyboard.

If your computer has 95% Screen Resolution, you do not need to use Ctrl+Esc or Alt+Tab; instead, use the Task Bar at the bottom of the screen to navigate among applications in Citrix. The Task Bar is where your windows Start button is located, as we discussed earlier in this training. Any applications that are open will appear on the Task Bar at the bottom of the screen.

Switching Between Programs Open While in a Citrix Session

When you access the Citrix Production Desktop it displays three icons: one for the CONNECTIONS Desktop, one for the Policy Library and one for CIN/PID (Data Warehouse; limited to designated users). A fourth icon, for the CONNECTIONS Preview application, is only accessible when the Preview application is available. When you access the Citrix Training Desktop, there is no icon for CIN/PID. Double-clicking an icon opens the application represented by that icon. To switch between these programs on the Citrix desktop when they are both open, click on the desired application’s task button on the Citrix Task Bar.

Remember that even though parts of a window may be visible, that window might not be the active window. Clicking anywhere within a window will make it the active window, placing it on top of any other open windows.
Copying and Pasting

In CONNECTIONS, as in other Windows-based applications, you can use the Copy and Paste functions to duplicate information without retyping it. This is handy for transferring notes from a Microsoft Word document into a Word document within CONNECTIONS, or copying information from one location to another within CONNECTIONS. You can copy and paste only in those windows where your Business Function Profile allows you to maintain information. Be careful when using the copy and paste functions so that information is not inadvertently lost or misplaced. See the boxes at right for more Copy/Paste tips.

Within the CPRS, you can use the Copy/Paste functions to copy information among the narrative fields on the Safety Assessment, Risk Assess Profile and Progress Notes tabs. To copy and paste information among these tabs; click and drag with the mouse to highlight the narrative text to be copied. Then use the hot key combination to copy the selected text. Once the text has been copied to the electronic clipboard, click on the narrative field into which you need to paste the information and use the hot key combination to paste. (See “Hot Key Method for Copying and Pasting” on page 21.)

In addition, the Progress Notes tab contains the Copy Note functionality, which is described in detail in Module 9.

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Step-by-Step: Copying and Pasting Text

1. Open the window (e.g., a Microsoft Word document) that contains the text to be copied.
2. Click and hold the mouse button while you drag it over the text you want to copy. The text highlights as you drag the mouse.
3. Click on the Edit menu and select Copy. The system copies the highlighted text onto a temporary Windows “clipboard.” It will remain on this clipboard until you copy another selection of text or close the application. (If an Edit menu is unavailable on a particular CONNECTIONS window, use the hot key method described at the end of this section.)
4. Click on the location where you want to paste the text. If you are moving from a stand-alone Word document to an open Word document in CONNECTIONS, use Alt+Tab to move from one document to the other, or minimize the first document by clicking on the Minimize button ( minimizing button ) in the top right corner of the window.

---

The Copy and Paste functions work within a stage. You cannot use these functions to copy documentation directly from one INV stage and paste it into another INV stage.

Save the document from which you are copying before minimizing and/or switching to another document to paste.

Be careful when using Select All, a command in some Edit menus. It selects everything on the page for copying (including headers, footers and template commands) and may delete the template style of the document into which you’re pasting text.
5 Click on the **Edit** menu and select **Paste**.
The copied text is pasted next to the cursor. If an *Edit* menu is unavailable on a window, use the hot key method described on the next page. When copying from or pasting into the CPRS, **do not** use the *Paste Cells* or *Paste as Nested Tables* command in the *Edit* menu, since these functions result in the overlay of tables, format problems and printing problems.

**Hot Key Method for Copying and Pasting**

If an *Edit* menu is unavailable on a window where you want to copy and/or paste, you can use the following “hot key” method to copy and paste.

### Step-by-Step:
#### Copying and Pasting Text via the Hot Key Method

1. **Highlight** the text you want to copy.

2. **Press** the Ctrl and C keys on your keyboard at the same time. 
   *The highlighted text is copied onto the Windows “clipboard.”*

3. **Click** on the location where you want to paste the text.

4. **Press** the Ctrl and V keys on your keyboard at the same time. 
   *The copied text is pasted next to your cursor.*

**Getting Around in CONNECTIONS**

CONNECTIONS contains a number of windows, all linked at the highest level to the CONNECTIONS Toolbar.

There are four primary navigation tools in CONNECTIONS:

- Buttons on the CONNECTIONS Toolbar
- Menu commands on the CONNECTIONS Toolbar and many windows in the application
- Buttons on CONNECTIONS windows
- Tabs in the Child Protective Record Summary (CPRS) and various CONNECTIONS windows

Sometimes buttons and menu commands are disabled. Features are disabled either because that function is not available from that window, or because your security profile does not allow you access to that information.
Using CONNECTIONS Toolbar Buttons

The CONNECTIONS Toolbar is always available at the top of your screen when you are working in CONNECTIONS. It is the gateway into the CONNECTIONS system. Sometimes the Toolbar may display beneath another window on your desktop. Click on the title bar to bring the Toolbar to the forefront of all of your open windows.

The CONNECTIONS Toolbar

The first two buttons on the CONNECTIONS Toolbar (TO-DO and WORK) help you organize your day-to-day work. The TO-DO button opens the Staff To-Do List, containing items needing your attention. The WORK button opens the Assigned Workload, a list of your case assignments. This is the method you use to access your tasks in CONNECTIONS.

The third button, UNIT, opens the Unit Summary window, which is available only to CONNECTIONS users with a special BFP. It is available to staff at the supervisory level and to their designees. It gives supervisors access to the workloads of the workers they supervise. For all other users, the button is disabled.

The next four buttons (PERS, CASE, RSRC and STAFF) are search buttons, which enable you to search for people, cases, resources (including foster homes, agencies and service providers), and staff in CONNECTIONS. Staff in voluntary agencies must conduct Person and Case searches from within a case, instead of using the PERS and CASE buttons on the Toolbar.

The final button, RPRTS, opens the Report List, which provides access to reports that you’ve generated (or “launched”) from within the application. Monthly management reports are also downloaded directly into the RPRTS window for people with special BFPs.

Using CONNECTIONS Menus

Just above the buttons on the CONNECTIONS Toolbar (and at the top of every window opened within CONNECTIONS) is the Menu bar, a row of key words that, when clicked, open menus (see the CONNECTIONS Toolbar graphic above).

Commands available from the menus vary by window and are related to the actions you may wish to perform at that point. They provide an alternative way to open windows available from buttons, and also serve as a means for opening additional CONNECTIONS windows.
Step-by-Step:
Navigating via Menus

1. Click on a key word from the Menu bar at the top of any window.
2. Click on a command from the resulting menu.

Using Buttons in Windows
Most windows contain additional buttons, often near the bottom of the window. These buttons serve as shortcuts to frequently performed functions or frequently visited windows from that window. The functions available through these buttons are often also found in menus. A partial list of these buttons appears in the chart below.

Partial List of Buttons and Their Functions

<table>
<thead>
<tr>
<th>Button</th>
<th>Function</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cancel</td>
<td>Ignores any changes, closes the window and returns to the previous window.</td>
</tr>
<tr>
<td>Close</td>
<td>For areas in CONNECTIONS other than CPRS, this button appears when no changes could have been made to information on the window. It closes the window and displays the previous window.</td>
</tr>
</tbody>
</table>

For the Notes, Supportive District Notes and Supervisory Review & Comments tabs in CPRS, this is your first step toward saving changes in your document. When changes have been made to a document, click on the Close button and the following message displays: “Save Changes to Notes Narrative?” Click on the Yes button to save your work. The document closes and the last tab displays.

<table>
<thead>
<tr>
<th>Button</th>
<th>Function</th>
</tr>
</thead>
<tbody>
<tr>
<td>OK</td>
<td>Responds to a message box and returns to the previous window. Also accepts a selection from a list.</td>
</tr>
<tr>
<td>Add</td>
<td>Adds information to a list on certain windows. To save to the database, you also need to click on the Save button.</td>
</tr>
<tr>
<td>Modify</td>
<td>Modifies existing information in a list on certain windows. To save to the database, you also need to click on the Save button.</td>
</tr>
<tr>
<td>Save</td>
<td>Stores new or modified information in the database.</td>
</tr>
<tr>
<td>Delete</td>
<td>Deletes information from the database. You will usually receive a confirmation message before the item is deleted.</td>
</tr>
<tr>
<td>New</td>
<td>Creates a new detail window with blank data entry fields.</td>
</tr>
<tr>
<td>Detail</td>
<td>Opens a window with detailed information for a selected item.</td>
</tr>
<tr>
<td>Clear</td>
<td>Clears detail fields from certain windows, or criteria from search windows.</td>
</tr>
<tr>
<td>Search</td>
<td>Displays all records that match the search criteria.</td>
</tr>
</tbody>
</table>
**CPRS-Specific Buttons**

**Help on Narratives** Displays help information about the respective document when in the Notes, Supportive District Notes or Supervisory Review & Comments tab. In other tabs, this button displays an index of help topics relating to the narratives in that tab.

**Generate Report** Provides a window for selecting tabs to be included in a formatted report of information in the CPRS.

**Edit Narrative/View Narrative** Re-opens a Word document in CPRS that has been closed or minimized.

In some instances, the Edit Narrative button may be replaced by a View Narrative button. Whether a tab displays a View Narrative or Edit Narrative button depends on which tab you are viewing, your role in the case, and whether the document opened by that tab is in a “view only” state.

**Intake Narrative** Allows you to view the Intake Report Narrative associated with the Investigation stage from the Allegations tab in CPRS. The Intake Report Narrative displays as a “view only” Word document.

**Tabs in the Child Protective Record Summary (CPRS)**

The information in the Child Protective Record Summary is organized as file tabs:

- Case Identification
- Household Composition
- Allegations
- Investigative Actions
- Investigative Findings
- Local Protocol
- Safety Assessment
- Risk Assess Profile
- Progress Notes

Specific case information can be accessed by clicking on the associated tab in the Child Protective Record Summary window. Tabs can be accessed in any order.
Module 3:
Managing Your Workload

CONNECTIONS provides tools to help you manage your caseload. These tools include the Assigned Workload and the To-Do Lists.

The Assigned Workload is your “gateway” in CONNECTIONS to performing and documenting your work on the reports assigned to you. Each of your assignments is listed on your Assigned Workload. This information is organized and available for you to fulfill the responsibilities for each report and case efficiently.

The To-Do List supports the completion of timely work required by regulations. Since more than one worker may be involved in completing work on a stage, the To-Do List can assist with communication. The To-Do List helps you manage the shared responsibility that often occurs in a CPS case, particularly between you and the supervisor who must review and approve your work.

By the end of this module, you will be able to:

- sort and filter the Assigned Workload to manage your caseload and navigate to tasks;
- use the Staff To-Do List to manage necessary tasks, send To-Dos to yourself or others, and navigate to tasks;
- keep track of necessary tasks using the Case To-Do List; and
- use the Event List to keep track of events that have occurred in your cases or stages and navigate to view details of particular events.
Managing Your Assigned Workload

The Assigned Workload is an important workload management tool in CONNECTIONS. It lists all of the stages assigned to you, as either a Primary or Secondary worker, along with basic information about the report, the name, when it was assigned to you, etc. You can sort your Assigned Workload in different ways to organize the work you need to do.

New cases are highlighted in gray and displayed at the top of the Assigned Workload when it is initially opened. NYC cases display based on the presence of High Priority Safety Factors (HPF) and then alphabetically. They remain highlighted until the assigned worker displays the case information on screen. New assignments do not automatically display on the Assigned Workload if it is open at the time of the assignment. It is necessary to refresh your workload for these assignments to appear. To refresh the Assigned Workload, click on the Refresh button.

Step-by-Step:
Opening the Assigned Workload

1. Click on the WORK button on the CONNECTIONS Toolbar. The Assigned Workload displays.

The following columns on the Assigned Workload provide an abbreviated view of relevant information about each stage assigned to you.

- **!**: Displays an exclamation point (!) if a report has been marked “sensitive.” A sensitive case is one in which the reported person is an employee of the SCR or a local district worker. Occasionally, a local district may choose to mark a high-profile case as sensitive (e.g., a case involving a celebrity or other public figure). For information about marking a case as sensitive, see page 136.

- **Role**: Displays a code defining your role in the assigned stage. “PR” in the Role column indicates that you are the Primary worker for the stage. “SE” indicates that you are the Secondary worker for the stage. Roles in FSI and FSS stages include “CM” for Case Manager, “CP” for Case Planner, “CW” for Caseworker and “WM” for CPS Worker/Monitor.

- **Stage Name**: Intake and Investigation stages are usually named for the mother of the abused/maltreated child(ren).

- **County**: Displays a code representing the local district whose worker has primary assignment for the stage.

- **Zone**: Displays a code for New York City addresses only.
Stage Displays the stage of service the selected item represents. Local district CPS workers will see “INT” (Intake) or “INV” (Investigation) stages on the Assigned Workload. If an assignment displays “INT” in the Stage column, the stage has not yet been progressed to the Investigation stage. If “INV” displays in this column, the stage has already been progressed from Intake to Investigation. (See “Stage Progression” on page 86.) You may also see “FSI” (Family Services Intake) or “FSS” (Family Services Stage). (See the CONNECTIONS Case Management Step-by-Step Guide for more information.)

Type Describes the type of report (e.g., “INI” for Initial reports or investigations of abuse/maltreatment; “SUB” for Subsequent reports or investigations of abuse/maltreatment). (See “Different Types of CPS Reports” on page 77.) If you have a role in an FSI or FSS stage, CWS (or another FSI or FSS type) would display in this field. (See the CONNECTIONS Case Management Step-by-Step Guide on the OCFS intranet site for more information.)

Start Denotes the Stage Start Date for both Intake and Investigation stages, based on the Intake start date.

Assigned Displays the date the stage was assigned to you.

Unit Indicates the unit to which the Primary worker is assigned.

Stage ID and Case ID The Stage ID and Case ID numbers are unique, system-generated identification numbers assigned to stages and cases, respectively.

The Assigned Workload for ACS workers (New York City) displays three additional columns:

HPF Indicates the ranking of the High Priority safety factor associated with the stage. The lower the number, the higher the ranking. High Priority factors are determined by the system and are calculated from the type of allegations made, the age of the child and the safety factors selected. (See Appendix H for a list of High Priority Factors and their corresponding rankings.)

* An asterisk (*) in this column indicates that the stage has more than one High Priority factor.

CD Displays the Community District (CD) code for the address associated with the stage.

Six buttons also display at the bottom of the Assigned Workload:

Tasks… Opens the Task List for the selected stage. If no stage is selected, or if more than one stage is selected, this button disables.

Assign… Opens the Assign window for the selected stage(s). If no stage is selected, this button disables.
Accept

Accepts the selected new Intake assignment. This button disables if: no stage is selected; the selected stage is not an INT stage; or you have already accepted the INT stage.

Reject

Rejects the selected new intake assignment. This button disables if: no stage is selected; the selected stage is not an INT stage; or you have already accepted the INT stage. Reports are rejected only for incorrect jurisdiction. Rejected reports are returned automatically to the SCR for review and reassignment.

Refresh

Refreshes the Assigned Workload to display new assignments that have been received since the last time the Assigned Workload was opened or refreshed. New assignments do not automatically display on the Assigned Workload if it is open at the time of the assignment. It is necessary to refresh your workload for these assignments to appear.

Close

Closes the Assigned Workload.

Sorting the Assigned Workload

Your Assigned Workload may have more stages than are visible on the window at one time. You may need to arrange the data in the list to find a particular stage.

You can change the sort of your assignments on the Assigned Workload by using the Sort menu. The following sorts are available:

- **Case**
  Sorts assignments by Case ID number.

- **Alphabetical**
  Sorts assignments in alphabetical order by Stage Name.

- **Worker Role**
  Sorts assignments alphabetically by your role in the stage.

- **Stage of Service, Stage Name**
  Sorts assignments by Stage of service (e.g., INT or INV), then alphabetically by Stage Name.

- **County**
  Sorts assignments by County code.

- **Chronological**
  Sorts assignments by Start date, earliest (oldest) date first. If two or more stages have the same Start date, a secondary sort is performed by Stage ID, with Stage IDs listed from lowest to highest.

- **Reverse Chronological**
  Sorts assignments in reverse order by Start date, most recent (latest) date first. If two or more stages have the same Start date, a secondary sort is performed on Stage ID, with Stage IDs listed from highest to lowest.

- **Date Assigned**
  Sorts assignments in order of the date on which the report was assigned to you, based on the Intake start date for Intake and Investigation stages. If two or more stages have the same Date Assigned, a secondary sort is performed on Stage ID, with Stage IDs listed from lowest to highest.
Step-by-Step: Sorting the Assigned Workload

1. Click on the Sort menu and select a sort command.  
   The Assigned Workload displays according to the selected sort command.

2. To re-sort the list, click on the Sort menu again and select another sort command.

3. To return the Assigned Workload to its default sort (new assignments on top, shaded in gray), click on the Options menu on the Assigned Workload and select Refresh.

Filtering the Assigned Workload

The Workload Filtering window makes it easier to navigate through larger workloads. You can use this window to filter your Assigned Workload by using one of the following three fields:

- Stage ID
- Case ID
- Match Retrieval by Stage Name

When the Assigned Workload has been filtered, the title bar displays as Assigned Workload (Filtered).

Step-by-Step: Filtering the Assigned Workload

1. Click on the Options menu on the Assigned Workload and select the Workload Filter... command.  
   The Workload Filtering window displays.

2. Enter filtering criteria in one of the three fields on the Workload Filtering window.  
   To filter using the Match Retrieval by Stage Name field, you must enter a minimum of two character of the stage name in the field.

3. Click on the Search button.  
   The Assigned Workload (Filtered) displays with the stages that match the filtering criteria.
Navigating from the Assigned Workload to Accomplish Tasks

From the Assigned Workload, you accomplish tasks either by opening the Task List or by navigating to specific tasks through the Options menu.

### Step-by-Step: Opening the Task List from the Assigned Workload

1. Click on the stage you want to work on.
   *The Tasks... button enables at the bottom of the window.*

2. Click on the Tasks... button.
   *The Task List displays for the selected stage.*

3. To return to the Assigned Workload, click on the Close button.

You can also open a number of specific task-related windows from the Assigned Workload by using the Options menu. You can use this technique, for example, to maintain a case or stage name, to progress a stage, or to open the Case Summary window. You can also use the Options menu to open the Staff To-Do List, Case To-Do List and Event List, which are other workload management tools.

### Step-by-Step: Opening Task-Related Windows via the Options Menu

1. From the Assigned Workload, click on the stage you want to work on.

2. Click on the Options menu and select an enabled command.
   *The window associated with the selected command displays.*

3. To return to the Assigned Workload, click on the Close, Cancel or Save button on any open window.
Using Staff and Case To-Do Lists

CONNECTIONS sends you To-Dos to notify you of actions you must take on an assignment, and of events (such as decisions, new assignments, approvals, rejections and stage closings) in a case. You can also send To-Dos to yourself and others.

These To-Dos appear on the Staff To-Do List and the Case To-Do List. The Staff To-Do List contains all To-Dos for a specific staff person. The Case To-Do List contains all To-Dos associated with a particular case, regardless of assignment.

To-Do Lists are useful workload management tools in CONNECTIONS. The lists provide you with information about a particular stage. You can also organize your To-Dos, keep the lists current by deleting outdated To-Dos, and reassign To-Dos that should be handled by another worker.

Types of To-Dos

There are three types of To-Dos:

- **Alert**
  Alert To-Dos are created by CONNECTIONS to notify you that something has happened or needs to happen. For example, you are sent an Alert To-Do when you receive a new assignment. Alert To-Dos are identified by an “A” in the *Type* column of a To-Do List. You can delete Alert To-Dos at any time. Because they are not directly task-related, you cannot navigate directly from Alert To-Dos to task-related windows.

- **Reminder**
  Reminder To-Dos are created by CONNECTIONS users and are not related to a task from the Task List. You might create this kind of To-Do to remind yourself of an upcoming appointment. You can also send Reminder To-Dos to other people. Reminder To-Dos are identified by an “R” in the *Type* column of a To-Do List. Reminder To-Dos can be deleted at any time. Because they are not directly task-related, you cannot navigate directly from Reminder To-Dos to task-related windows.
Task

Task To-Dos can be either system- or user-generated to notify you that there is a task you must complete. Task To-Dos are identified by a “T” in the Type column of a To-Do List. Task To-Dos cannot be deleted. The only way to remove a Task To-Do from your Staff To-Do List is to complete the Task.

An example of a system-generated Task To-Do is one reminding you to complete a Safety Assessment by a particular due date. You can navigate to task-related windows from a Task To-Do by selecting it from the list and clicking on the Navigate… button.

Viewing To-Dos

### Step-by-Step: Viewing To-Dos on the Staff To-Do List

1. Click on the TO-DO button on the CONNECTIONS Toolbar. *The Staff To-Do List displays.*
2. Click on a To-Do to select it from the list.
3. Click on the Detail… button. *The To-Do Detail window displays for the selected To-Do.*
4. To close the To-Do Detail window, click on the Cancel button. *The Staff To-Do List displays.*
5. To close the Staff To-Do List, click on the Close button.

### Step-by-Step: Viewing To-Dos on the Case To-Do List

2. Click on a stage to select it.
3. Click on the Options menu on the Assigned Workload and select Case To-Dos. *The Case To-Do List displays with To-Dos for the selected case. If the selected case has multiple stages, To-Dos display for every stage of the case. If the Case To-Do command is disabled, the stage has not been accepted. Accepting and rejecting assignments is covered in Module 7.*
4. Click on a To-Do to select it from the list.

Creating a Task To-Do can be useful if you need another worker to complete a task for your case.
5 Click on the **Detail...** button.  
*The To-Do Detail window displays for the selected To-Do.*

6 To close the **To-Do Detail** window, click on the **Cancel** button.  
*The Case To-Do List displays.*

7 To close the **Case To-Do List**, click on the **Close** button.  
*The Assigned Workload displays.*

### Navigating from Task To-Dos

From a Task To-Do, you can navigate directly to the window needed to complete the task. For example, if you receive a system-generated Task To-Do notifying you that the Safety Assessment is due, you can navigate directly to the Safety Assessment window for that stage. This feature is available only for Task To-Dos.

---

#### Step-by-Step: Navigating from Task To-Dos

1 Open the **Staff To-Do List** or **Case To-Do List** using the steps above.

2 Click on a Task To-Do to select it from the list.  
*The **Navigate...** button enables*

3 Click on the **Navigate...** button.  
*The task-related window associated with the selected To-Do displays.*

4 If you make changes in that window, save your work by clicking on the **Save** button.  
*The To-Do List displays; from the Safety Assessment window, the **Safety Assessment** tab on the CPRS displays.*

5 To close the window without saving changes, click on the **Cancel** button.  
**-OR-**  
From the **Risk Assess Profile** tab, click on the **Close** button.  
*The To-Do List displays.*
Sorting To-Do Lists

You can sort To-Do Lists to make them easier to use and maintain. These sorts help you prioritize your work in CONNECTIONS. The tables below illustrate the sorts available on the Staff To-Do List and the Case To-Do List.

Staff To-Do List Sorts

<table>
<thead>
<tr>
<th>Sort Name</th>
<th>Primary Sort</th>
<th>Secondary Sorts</th>
</tr>
</thead>
<tbody>
<tr>
<td>To-Do Type</td>
<td>Sorts by type of To-Do.</td>
<td>Items of the same type are sorted by date, then by Stage ID.</td>
</tr>
<tr>
<td>Event Status</td>
<td>Sorts by Event status (NEW, PROC, PEND, REJT, COMP).</td>
<td>Items with the same status are sorted by type, then by date.</td>
</tr>
<tr>
<td>Date</td>
<td>Sorts in ascending order by date.</td>
<td>Items with the same date are sorted by type, then by Stage ID.</td>
</tr>
<tr>
<td>Case Name</td>
<td>Sorts alphabetically by Case Name.</td>
<td>Items with the same Case Name are sorted by Stage ID, then by type, then by date.</td>
</tr>
<tr>
<td>Created By</td>
<td>Sorts alphabetically by the To-Do creator’s initials.</td>
<td>Items with the same creator are sorted by type, then by date.</td>
</tr>
</tbody>
</table>

Case To-Do List Sorts

<table>
<thead>
<tr>
<th>Sort Name</th>
<th>Primary Sort</th>
<th>Secondary Sorts</th>
</tr>
</thead>
<tbody>
<tr>
<td>To-Do Type</td>
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</tr>
<tr>
<td>Event Status</td>
<td>Sorts by Event status (NEW, PROC, PEND, REJT, COMP).</td>
<td>Items with the same status are sorted by type, then by date.</td>
</tr>
<tr>
<td>Date</td>
<td>Sorts in ascending order by date.</td>
<td>Items with the same date are sorted by type, then by Stage ID.</td>
</tr>
<tr>
<td>Stage ID</td>
<td>Sorts by Stage ID.</td>
<td>Items with the same Stage ID are sorted by type, then by date.</td>
</tr>
<tr>
<td>Assigned To</td>
<td>Sorts alphabetically by the initials of the worker to whom the To-Do is assigned.</td>
<td>Items with the same assignees are sorted by type, then by date.</td>
</tr>
<tr>
<td>Created By</td>
<td>Sorts alphabetically by the To-Do creator’s initials.</td>
<td>Items with the same creator are sorted by type, then by date.</td>
</tr>
</tbody>
</table>

Step-by-Step: Sorting To-Do Lists

1. Click on the **Sort** menu and select a sort command.  
   *The To-Do List displays in the order of the selected sort command.*

2. To change the sort order, click on the **Sort** menu again and select another sort command.
Searching for To-Dos

When first opened, the To-Do List includes all outstanding To-Dos created before the current date, as well as To-Dos that will be due up to seven days into the future. If you want to plan ahead and see what will be due beyond that seven-day period; you can extend this date by completing a search from within the To-Do List.

**Step-by-Step: Searching for To-Dos**

1. Click on the **From** date field at the top of the To-Do List and enter the date from which you want to start your search.
2. Press the **Tab** key to move to the **To** field and enter the date through which you want to end your search.
3. Click on the **Search** button. To-Dos display which fall within the selected time period.

**Step-by-Step: Deleting Alert and Reminder To-Dos**

1. From the **Staff To-Do List**, click on the Alert or Reminder To-Do you want to delete.
2. Click on the **File** menu and select **Delete**. The selected To-Do is removed from the list. You cannot delete system-generated Task To-Dos.
3. To close the To-Do List, click on the **Close** button.

It's a good idea to delete Alert and Reminder To-Dos you no longer need. This will keep your **Staff To-Do List** manageable. You can delete only Alerts, Reminders and staff-created Task To-Dos. You cannot delete system-generated Task To-Dos. Once completed, these To-Dos are removed from the list automatically.
Creating or Reassigning Task To-Dos

CONNECTIONS allows you to create a Task To-Do and send it to another worker, or reassign one of your Task To-Dos to another worker. In either case, from this Task To-Do, the other worker can navigate directly to windows related to the task and view or update information in those windows.

The step-by-step instructions below illustrate the process of creating a Task To-Do by opening the To-Do Detail window from the Task List for a specific stage; the To-Do Detail window can also be accessed for creating Task To-Dos directly from the Progress Notes and Safety Assessment tabs in the CPRS by using the Create To-Do command from each tab’s Options menu. Task To-Dos cannot be assigned for the recording of the Risk Assessment Profile (RAP), since only the Primary worker assigned to the investigation can record the RAP.

---

**Step-by-Step:** Creating and Assigning a Task To-Do

1. Click on the **WORK** button on the CONNECTIONS Toolbar. *The Assigned Workload displays.*
2. Click on the stage for which you want to create a To-Do. *The Tasks… button enables.*
3. Click on the **Tasks…** button. *The Task List displays for the selected stage.*
4. Click on the task for which you want to create the To-Do.
   *If you click on the CPRS task, the To-Do button disables. You would need to click on the Detail… button to display the CPRS and then click on either the Safety Assessment or Progress Notes tab to record a To-Do. They are the only tabs on the CPRS that provide for recording To-Dos.*
5. Click on the **To-Do…** button at the bottom of the window. *The To-Do Detail window displays. The short description field on this window is pre-filled with the name of the task you selected from the Task List.*
6. If you are creating a Task To-Do for yourself, skip to **Step 12** below. To assign the Task To-Do to another worker, click on the **STAFF** button. *The Staff Search Criteria window displays. The Agency field is pre-filled and the Active checkbox is selected.*
7 Enter search criteria—either the Person ID number or the staff member’s last name. *(Just a portion of the last name is enough, unless you are searching for a common name in a large agency.)*

8 If you are searching for a worker outside your agency and you know that person’s agency code, enter it in the **Agency** field and skip to **Step 10** below.

The **Agency** field defaults to your own agency code. *If you don’t know a worker’s agency code, see the adjacent tip box.*

9 Click on the **Search** button.

The **Staff List displays with the results of your search.**

10 Click on the staff person’s name from the **Staff List.**

11 Click on the **OK** button.

The **To-Do Detail window displays. The Assigned To: field at the top of the window displays the name of the selected staff member.**

12 You can add a description of the To-Do or extra notes in the **Descr./Notes** field. You can change a due date by clicking in the **Due** field and entering the due date.

13 Click on the **Save** button.

---

**Step-by-Step:**

**Reassigning a To-Do**

1 Click on the **TO-DO** button on the CONNECTIONS Toolbar.

The **Staff To-Do List displays.**

2 Click on a To-Do to select it from the list.

3 Click on the **Detail...** button.

The **To-Do Detail window displays for the selected To-Do.**

4 Follow the procedures beginning with **Step 6** of “Creating and Assigning a Task To-Do” on page 36 to assign the To-Do to another staff person. *Remember, once it is reassigned, the To-Do no longer displays on your Staff To-Do List.*
Reminder To-Dos

You can create both generic and case-related Reminder To-Dos. The process of creating either is similar to that of creating a Task To-Do, but you do not associate a Reminder To-Do with a specific task.

**Step-by-Step: Creating a Reminder To-Do**

1. Click on the TO-DO button on the CONNECTIONS Toolbar. The Staff To-Do List displays.
2. Click on the New button. The To-Do Detail window displays. The short description field on the window is empty, since you have not associated the To-Do with a task. To send the reminder to another worker, refer to Step 6 under “Creating and Assigning a Task To-Do.”
3. Record a short description in the Short Desc field.
4. Click on the Save button. The new To-Do is saved and displays on the Staff To-Do List.
5. To exit the Staff To-Do List, click on the Close button.

**Step-by-Step: Creating a Stage-Related Reminder To-Do**

1. Click on the WORK button on the CONNECTIONS Toolbar. The Assigned Workload displays.
2. Select a stage and click on the Tasks… button. The Task List displays for the selected stage.
3. Click on the To-Do… button at the bottom of the window. The To-Do Detail window displays with the name of the selected stage.
4. Change the date in the Due: field by entering it in the field.
5. Enter a subject for the To-Do in the Short Desc. field.
6. If you want to send the Reminder to another worker, refer to the procedures in “Creating and Assigning a Task To-Do” on page 36.
7. If the Reminder is for you, click on the Save button. The To-Do is saved and the Task List displays.
8. Click on the Close button to exit the Task List.
9. To view the new Reminder To-Do, click on the TO-DO button on the CONNECTIONS Toolbar. The Staff To-Do List displays.
Using the Event List

There are two types of Event Lists in CONNECTIONS—one for a stage and one for a case. Each Event List contains a list of CONNECTIONS tasks and case/stage-related activities that have been completed or are in progress. Events are recorded on the list, for example, when you receive a new assignment, or when your supervisor approves or rejects an item you’ve submitted.

You can use the Event List to keep track of the progress of work on a stage and, in some situations, to view details of specific events. The Event List is also the primary method for viewing comments recorded for a supervisory approval, as well as for accessing information on closed cases. For detailed steps on how to view supervisory comments from the Event List, see “Checking the Status of an Approval” in Module 9. For detailed steps on viewing event information on closed cases or cases not in your Assigned Workload, see “Opening the Event List for a Case” on page 40.

The Event List includes two date columns:

- **Event Date** signifies the date an event was completed, as recorded by the worker on the specific window or during the events evaluation (e.g., the date that was recorded in the Date field on the Safety Assessment window). If no date was recorded, the Event Date column will be blank for that event.

- **TX Date** signifies the system-generated transaction date, which is the date an event was updated by the worker using one of the Save functions (i.e., Save, Save and Submit, Save and Close, Save and Stay).

Some events are generated as “complete” (e.g., assignments and notification letters); both the Event Date and the TX Date for these events correspond to the date on which the event was generated.

**Event Status**

The Event List includes a Status column, denoting the status of each event:

- **NEW** An event has been generated but no work has been saved (e.g., a Safety Assessment in an Investigation stage that has not been accessed).

- **PROC** The item is in process. Work has been saved but not yet completed (e.g., some Risk Assessment Profile information entered by worker but not ready to be submitted for supervisory approval).

- **COMP** Work has been completed and saved, but not yet submitted for approval (e.g., an Investigation Conclusion that is completed and saved but not yet submitted for supervisory approval). This status also displays for events that do not require submission.

- **PEND** Work has been submitted and is pending approval (e.g., a Safety Assessment that has been Saved and Submitted, but which the supervisor has not yet approved or rejected).
The supervisor has rejected the submitted work. The worker must correct the affected item (e.g., Safety Assessment, RAP) and re-submit it.

The submitted work has been approved by the supervisor (and any additional approvers, if applicable). Upon approval, the event is “frozen” along with all of its related windows (e.g., the supervisor has approved an Investigation Conclusion).

The Investigation stage has been closed as a duplicate (and the Safety Assessment was never approved by the supervisor). If the Investigation was closed as Fatality – No Surviving Children, the status of the RAP changes to SUSP, unless the RAP was previously approved by the supervisor.

---

**Step-by-Step: Opening the Event List for a Stage**

1. Click on the WORK button on the CONNECTIONS Toolbar. 
   *The Assigned Workload displays.*

2. Click on a stage to select it.

3. Click on the Options menu and select the Event List... command.
   *The Event List displays for the selected stage.*

---

**Step-by-Step: Opening the Event List for a Case**

1. Click on the WORK button on the CONNECTIONS Toolbar. 
   *The Assigned Workload displays.*

2. Write down the Case ID number from the stage for which you want to view the Event List.

3. Click on the CASE button on the CONNECTIONS Toolbar.
   *The Case Search Criteria window displays.*

4. Enter the Case ID number in the Case ID field.

5. Click on the Search button.
   *The Case List displays the case that matches the search criteria.*

6. Select the case and click on the Events... button or the Event List command on the Options menu.
   *The Event List displays for the selected case.*

---

To view events for other stages in a case:

1. Highlight a stage on the Assigned Workload, click on the Options menu and select Case Summary.
   *The Case Summary window displays.*

2. From the Case Summary window, select a stage and click on the Events... button.
   *The Event List displays for the selected stage.*
Events also can be viewed in a printed report. The Event History Report contains all events for a stage or a case. You can also search for events that match specific criteria.

Step-by-Step: Generating the Event History Report

1. From the Event List, click on the Reports menu and select Event History…
   The following message displays:
   “The Report has been launched. Check Report List Window.”

2. Click on the OK button.

3. Click on the RPRTS button on the CONNECTIONS Toolbar.
   The Report List displays.

4. Click on the report you want to view and/or print. Make sure the report’s status reads “DONE.” If it doesn’t, either refresh the window by clicking on the Refresh button, or close the Report List and try again in a few minutes. You need to wait for the report to launch completely before you can view it.

5. Click on the Open button.
   The report displays as a Microsoft Word document.

6. To print the report, click on the File menu and select Print.
   The Microsoft Word Print dialog box displays. Verify that the prompted printer choice is correct. If you want to print multiple copies, enter the number in the Copies field.

7. Click on the OK button.
   The document is sent to the selected printer.

8. To close the report, click on the File menu and select Close.

9. Click on the Close button to close the Report List.

10. To exit the Event List, click on the Close button.
For task-related events, you can navigate to detail windows directly from the Event List.

---

**Step-by-Step:**
**Navigating from the Event List**

1. Click on an event to select it from the Event List. 
   *If there are details to view, the Detail… button enables.*

2. Click on the Detail… button. 
   *The task-related window associated with the selected event displays. For example, if you select an event related to a Safety Assessment, clicking on the Detail… button opens the Safety Assessment window.*

3. To close the window, click on the Cancel button. 
   *The Event List displays.*

---

**Step-by-Step:**
**Searching for Events**

1. Click on the WORK button on the CONNECTIONS Toolbar. 
   *The Assigned Workload displays.*

2. Click on a stage to select it.

3. Click on the Options menu and select Event Search… 
   *The Event Search Criteria window displays.*

4. Enter search criteria in this window. To search by date, enter a date range. To search by event type, select from the list by double-clicking on a type (you can select more than one type).

5. Click on the Search button. 
   *The Event List displays with events that match the search criteria.*

6. Click on the Close button to close the Event List. 
   *The Event Search Criteria window displays.*

7. Click on the Close button to close the Event Search Criteria window. 
   *The Assigned Workload displays.*
Module 4:
Retrieving Information in CONNECTIONS

State, local district and voluntary agency staff record the results of their work with children and families into CONNECTIONS. For this reason, CONNECTIONS is where you will be able to locate information related to your assignments, as well as for the insights of staff who worked with a particular individual or family before you.

In the previous module you learned how to use CONNECTIONS to view your case assignments. In this module, you'll learn how to use CONNECTIONS to look up information about people related to a stage you've been assigned; find out more about cases they've been involved with in the past; locate staff statewide; and find information about professional community resources available to help meet a client’s needs.

By the end of this module, you will be able to:

- determine if a person is known to CONNECTIONS and access detailed information about a person;
- locate information about a case;
- obtain information about providers of child welfare services in New York State; and
- locate information about offices, units and staff who use CONNECTIONS at the state, regional and local level.
**Person Search:**
Finding Information About a Person in CONNECTIONS

The CONNECTIONS database includes information about individuals associated with child protective cases, Family Services Intakes, Family Services Stages, as well as foster care providers, state and local district staff, and voluntary agency personnel. As a CPS worker, you may need to locate information regarding some of these individuals. Person Search is a tool for locating information about people in CONNECTIONS.

Person Searches are used:

- to determine if a person is known to CONNECTIONS; and
- to find specific information about a person in CONNECTIONS.

In the course of your work, you may find that a family member is not listed on the Person List for a stage. You need to add that individual to the stage. Before doing so, you need to conduct a Person Search to determine whether that individual is already known to the CONNECTIONS database. This is a precaution to prevent the creation of duplicate records for the same person in CONNECTIONS.

Once a search is performed, the Case List button on the Person Search window provides a method of accessing the selected person’s case information. This information can also be accessed from the File menu.

**Persons will not be identified as sources or reporters in a Person Search,** even if they are listed as members of the household. If a reporter is also a principal, Person Search returns the principal information only. For example, if a mother is the source of a report of child abuse or maltreatment regarding her child and the child’s father, she is both the reporter and a principal in the case. A Person Search on the mother only returns information identifying her as a principal, not as a reporter. CONNECTIONS information needs to be maintained in a secure, accurate and reliable manner, but also be readily available for use by workers needing information.
Routes to the Person Search Window

All Person Searches are conducted from the Person Search window. There are two routes to the Person Search window:

- From the CONNECTIONS Toolbar
- From the Maintain Person task within a stage

As a CPS worker, you most often conduct a Person Search through your Assigned Workload, using the Maintain Person task within a stage. This enables you to maintain information (e.g., add or relate a person) for that stage. As the assigned worker, your role in the case determines your access and your ability to maintain data.

On occasion, you may need to search for an individual from the CONNECTIONS Toolbar. This is beneficial when you are not the assigned worker, but need information on a person or case.

Step-by-Step: Opening the Person Search Window from the CONNECTIONS Toolbar

1. Click on the PERS button on the CONNECTIONS Toolbar. 
   The Person Search window displays.

Step-by-Step: Opening the Person Search Window Within a Stage

1. Click on the WORK button on the CONNECTIONS Toolbar. 
   The Assigned Workload displays.

2. Click on a stage to select it. 
   The Tasks... button enables.

3. Click on the Tasks... button. 
   The Task List displays for the selected stage.

4. Click on the Maintain Person task.

5. Click on either the New or List... button. 
   The Person List displays.

6. Click on the New button. 
   The Person Search window displays.

The Maintain Person task is available only for Investigation (INV) and Foster/Adoptive Home Development (FAD) stages.
Person Search Methods

The **Search Type** drop-down list in the *Person Search* window contains the person search options that indicate the type of search in effect:

- Phonetic Name
- Phonetic Address
- Exact

**Phonetic Name Search**

Person Search defaults to the **Phonetic Name** search type. Phonetic Name search returns matches that sound similar to the search criteria, which usually produces the largest pool of results. You can use Phonetic Name search even if the name you are searching for is not spelled correctly. The **Last** name field is required to enable a Phonetic Name search.

For step-by-step instructions, see “Conducting a Phonetic Name Search from the Toolbar” on page 52, and “Conducting a Phonetic Name Search Within a Stage” on page 56.

**Phonetic Address Search**

Phonetic Address Search returns results that sound similar to the information entered in the Address section. The **Street 1** field is required to enable a Phonetic Address search. When the Phonetic Address search type is selected, all non-address fields disable. All address fields are enabled, but search criteria must be entered in the **Street 1** field to initiate a Phonetic Address Search.

You can also filter search results by using other search criteria; this helps you retrieve the best possible results for your search. When you use filters, the criteria you enter (other than one of the required criteria) acts as a filter to the selection criteria’s original pool.

If you enter address criteria, validate the address criteria before executing the search to increase the likelihood of receiving address matches, since most addresses in the system are validated when they are recorded.

For detailed information about this function, see “Searching by Address” on page 49. Step-by-step instructions are included in “Conducting Address Searches” on page 58.

**Exact search**

An Exact search returns results that match the search criteria *character for character and space for space*. You can use exact search when you know the exact spelling of the person’s name for which you are searching. Keep in mind that if you enter the name incorrectly (or the information you have is wrong), your results will reflect the *incorrect* data. This is also useful if you want to narrow the search results.
Required fields for an Exact search:

- **Last Name**
- **Street 1**
- Social Security Number (**SSN**)  
- Client Identifier Number (**CIN**)  
- Person **ID**  

Only one of these five fields needs to have data entered to execute the search. Once information is entered into one Identifier field (**SSN, CIN or ID**), the remaining Identifier fields disable. Likewise, once a non-Identifier criterion is entered, all of the Identifier fields disable.

For step-by-step instructions, see “Conducting an Exact search from the Toolbar” on page 55 of this guide.

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**Searching by Name:**

**Phonetic Name Search vs. Exact search**

When searching for a person by name, you can conduct either a Phonetic Name search or an exact search. The system defaults to a Phonetic Name search, which returns records with names that *sound similar* to the search criteria. For example, if you conduct a Phonetic Name search for “Stewart,” CONNECTIONS may also return “Stuart” in the results.

Phonetic Name search also returns common equivalencies for names (e.g., searching for “James” also returns matches for “Jim” and “Jimmy”).

You can also use the Phonetic Name search type to search for all forms of hyphenated last names in a single search. Results for all potential hyphenated name combinations are important, since the person you are searching for may have had only one of the two names originally recorded in the system, or the hyphenated last name may originally have been recorded in the opposite order from the way the current search is entered.

This feature applies to the **Last name** field only, not for first or middle names. In order to use this feature effectively, you need to add a hyphen between the two names listed in the **Last Name search field.** Without the hyphen, the system only searches on the two last names as a multiple last name in the order in which they appear in the search field.

For examples of Phonetic Name search results on hyphenated last names, see the table at the top of the next page.
A Phonetic Name search on these criteria:

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Produces a single candidate pool consisting of the following names:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mary</td>
<td>Smith-Jones</td>
<td>Mary Smith-Jones, Mary Jones-Smith, Mary Smith, Mary Jones</td>
</tr>
<tr>
<td>Mary</td>
<td>Smith Jones (no hyphen)</td>
<td>Mary Smith Jones</td>
</tr>
</tbody>
</table>

The scoring of every name in the candidate pool is always based on the specific search name entered by the user. Although names phonetically further away from the search name will score lower, users conducting online Intake or Toolbar searches will ultimately be able to see all possible matches.

When searching on a common name, you may want to try an Exact search, however you might find that a Phonetic Name search is more helpful. If you are searching on a common name, you can enter additional search criteria to bring the closest matches to the top of the list. An Exact search returns matches that are identical to the search criteria. Use the vertical scroll bar and “mega-scroll” buttons to view all of the results.

All Person Searches display a message on the Person Search List title bar. These messages provide a short description of the results. The message which displays depends on the type of search you conduct.

A Phonetic Name search displays the following messages:

- **Phonetic Name Results Returned:** All records in the database that sound like the search criteria are returned in the Person Search List.
- **No Results Returned:** No records in the database match the search criteria.

An Exact search displays the following messages:

- **Exact Results Returned:** All records in the database that exactly match the search criteria are returned in the Person Search List.
- **No Results Returned:** No records in the database match the search criteria.

Deciding whether to use Exact search or Phonetic Name search depends on the available search criteria. Here are some general rules of thumb to start your search:

- When you are not sure of the proper spelling of the name of the person for whom you are searching, begin with a Phonetic Name search.
- If you are certain of the exact spelling of the name you are searching for, conduct an Exact search. Be aware that if the person’s name was previously entered incorrectly, an Exact search will not return the misspelled name. Exact searches do not always return the best results.
• When conducting a Phonetic Name search on a common name, it’s a good idea to enter as much information as possible about the person you are searching for, in order to narrow the search criteria.

• Selecting “M” (male) or “F” (female) in the Sex field ranks your search results, with records matching the selected criterion in the Sex field returning higher in the Person Search List, followed by records with other values in the Sex field.

• Phonetic Name search returns “flip-flops” (also know as Reverse Name Matches)—that is, results that reverse the first and last names (e.g., searching on “John Williams” returns matches such as “William Johnson”). These results appear at the bottom of the list in a Phonetic Name search. Flip-flop matches do not return in an Exact search.

• Entering an age and/or date of birth (DOB) also affects your search results. Results are listed by score. The results at the top of the Person Search List are the closest match to the name and age/DOB you entered. CONNECTIONS considers adults’ ages a bit differently than children’s ages:

  ⇒ If you enter an age/DOB representing an age of 18 or older, the system returns matches within a ten-year range (+/- 5 years of the age/DOB entered) toward the top of the Person Search List. Toward the bottom of the Person Search List, matches outside of the ten-year range display.

  ⇒ If you enter an age/DOB representing an age under 18, the system returns matches within a six-year range (+/- 3 years of the age/DOB entered) toward the top of the Person Search List. Toward the bottom of the Person Search List, matches outside of the six-year range display.

Searching by Address:
Phonetic Address Search vs. Exact search

In addition to Phonetic Name and Exact searches, CONNECTIONS provides the ability to search for records based on the search criteria entered in the address fields. Address searches can be either phonetic or exact.

Since exact search returns only records that match the search criteria character for character and space for space, it is not advisable to use the Exact search type when conducting an address search.

In a Phonetic Address search, CONNECTIONS creates a pool of candidates (search results) by comparing the phonetic similarity of the search criteria entered in the Street 1 field with the information in the Street 1 field of an address recorded in the database. All other address search criteria (e.g., City) are used to score the candidates. The closer the Street 1 candidate information is to the Street 1 search criteria, the higher the candidate’s score will be. The table on the next page demonstrates the difference between scoring and filtering search results.

To use Phonetic Address search effectively, employ the “less is more” approach: enter only the street name in the Street 1 field, without a house number or suffix (e.g., “Avenue”).
### Search Results: Scoring vs. Filtering

<table>
<thead>
<tr>
<th>Result</th>
<th>Description</th>
<th>Search Type(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scoring</td>
<td>Phonetic searches are “scored” by any and all additional search criteria that are entered. Scoring ranks candidates in the pool of results depending on how close they are to the search criteria.</td>
<td>Phonetic Name, Phonetic Address (see tip box at right)</td>
</tr>
<tr>
<td>Filtering</td>
<td>Exact searches are “filtered” by any and all additional search criteria entered. Filtering eliminates candidates from the pool of results.</td>
<td>Exact, Phonetic Address (see tip box at right)</td>
</tr>
</tbody>
</table>

Other address fields can be used in conjunction with the **Street 1** field to affect the ranking of the search results. For example, if you enter search criteria in the **City** field, addresses that match the **Street 1** field and the **City** field receive a higher score in the search results than those that match the **Street 1** field but do not match the **City**.

If you include the number with the street name (e.g., “10 Wilson”), all matches with that number and street name will return on the result list. In some instances, a number or street name that is phonetically similar to the search criteria will also return in the search results.

The table on the next page provides examples of possible Phonetic Address search results.

Phonetic Address searches may be scored and filtered, depending on the search criteria.

Entering search criteria in additional address fields scores the search results. The closer a result is to all of the search criteria, the higher its score.

Entering additional information in the **Street 1** field filters the search results. For example, entering “Wilson” in the **Street 1** field—**without a house number or suffix** (e.g., “Avenue”)—returns all results with Wilson (or street names similar to Wilson) in the **Street 1** field.

In this example, addresses across New York State that match the **Street 1** field return higher on the list of results. Addresses containing street numbers or a suffix (as well as street names that are phonetically similar to the street name in the search criteria) display lower on the list.

It is advisable to conduct a Phonetic Address search using only the street name (without a house number or suffix) in the **Street 1** field. This reduces the likelihood of filtering out a valid match.
A Phonetic Address search using the following criteria:

<table>
<thead>
<tr>
<th>Street 1</th>
<th>City</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wilson</td>
<td>Apple City</td>
</tr>
</tbody>
</table>

Produces the following results:

- Wilson, Apple City
- Wilson, Beachville
- Wilson, Chippertown
- 5 Wilson, Apple City
- 5 Wilson, Beachville
- 63 Wilson, Beachville

The results in this example would continue with all matches that are phonetically similar to the Street 1 search criteria.

<table>
<thead>
<tr>
<th>Street 1</th>
<th>City</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 Wilson</td>
<td>Apple City</td>
</tr>
</tbody>
</table>

Produces the following results:

- 5 Wilson, Apple City
- 5 Wilson, Beachville
- 5 Willston, Beachville
- 5 Wilsound, Chippertown

The results in this example would all have “5” (or anything phonetically similar) in the Street 1 field. House number greatly influences the search results.

A Phonetic Address search displays the following messages in the Person Search List title bar:

- **Phonetic Address Results Returned**: All records in the database that sound similar to the address search criteria are returned in the Person Search List.
- **No Results Returned**: No records in the database match the search criteria.
**Conducting Person Searches**

Throughout your investigation, there will be occasions which require you to look up information about people associated with your assigned case. This includes all current and/or historical cases in which these individuals were involved. The following individuals need to be included in the *Person List* for an Investigation stage:

- Subject(s), including Parent(s) and Guardian(s) of victim child(ren); and other person(s) 18 years of age or older responsible for the victim child(ren)’s care at the relevant time;
- Abused/maltreated Child(ren); and
- All other children living in the household.

Person Search is also helpful for finding staff persons when you do not know their agency code. By conducting a Person Search in this situation, you can obtain the Person ID for a staff person, then use the Person ID to conduct a Staff Search. You cannot obtain detailed information about a staff person in Person Search; use the staff person’s Person ID to conduct a Staff Search in order to retrieve detailed information.

**Conducting a Phonetic Name Search from the Toolbar**

You may need to conduct a Person Search from the CONNECTIONS Toolbar to determine if that person has a history in CONNECTIONS, in order to verify the information on the Intake/IRI Report and make sure you have all available information about a person.

The Toolbar search method is not commonly used by CPS workers, but in some circumstances it can be helpful. For example, if you receive a call from a reporter, source or other authorized person, you can use the Toolbar search method to determine the status or assignment of the case.

The *Relate* function in CONNECTIONS links historical records concerning an individual to the current investigation. Keep in mind that the Relate function disables when you open the *Person Search* window from the CONNECTIONS Toolbar.
Step-by-Step:
Conducting a Phonetic Name Search from the CONNECTIONS Toolbar

1 Click on the PERS button on the CONNECTIONS Toolbar.
   The Person Search window displays. The Person Search window automatically defaults to Phonetic Name search. To choose a different type of search, click on the drop-down arrow for the Search Type field and select from the resulting list.

2 Enter the person’s first and last name in the name fields.

3 Enter the date of birth or approximate age, if known, in the DOB or Age fields.

4 Click on the Search button.
   CONNECTIONS performs a search based on your criteria and returns the results of your search in a list at the bottom of the Person Search window. Use the scroll bar to scroll down the list.

Viewing Detailed Information about a Person

Search results may include more than one possible match for your search criteria. Explore all possible matches. The individual you are searching for may be listed more than once in the database. Review the information in the Person Search List to determine if the person you are searching for matches one or more of the results on the list. If you don’t have enough information to make this determination, you can access more information about a person in the Person Search List by looking at case composition. This process is sometimes called “drilling down.”

Step-by-Step:
Viewing Detailed Information About a Person

1 Click on a person’s name from the results in the Person Search List.

2 Click on the Options menu and select Case List.
   The Case List window displays, containing a list of cases with which the selected individual is associated.

3 Click on a case to select it.
4 Click on the **Comp** button.

The Case Composition window displays with a list of the people associated with the selected case. Review this information (looking at the names of the people in the case, dates of birth and addresses) to determine if this is the same person as the one for whom you are searching.

- If information in the Case Composition window led you to determine that this is the same individual as the one you are searching for, your search is complete. If the purpose of the search is to maintain case information, continue with the process of relating the individual to the stage. If there are multiple matches, relate the individual to the match with the most complete information and merge the remaining matches. Instructions for relating or merging persons can be found in Person Relate on page 107 or in Person Merge/Split Functions on page 128, respectively.

- If information in the Case Composition window has led you to determine that this is not the same individual, choose another name from the search results and return to Step 1 above. If you do not find a match and the purpose of your search is to maintain case information, continue with the process of adding the individual to the stage. Instructions for adding an individual can be found in “Step-by-Step: Adding a New Person Record” on page 108.

5 To close the Case Composition window, click on the **Close** button. The Case List displays.

6 To close the Case List, click on the **Close** button. The Person Search window displays.
Conducting an Exact search from the Toolbar

An Exact search considers search criteria character for character and space for space. If a person’s name was previously added to CONNECTIONS with a spelling different than the one you are using for your exact search, the system will not return a match. Be careful using this search type; if you define your search criteria too narrowly, you may not find the search result you seek. A broad search generally returns a better pool of potential matches; it is always preferable to use a Phonetic Name search.

<table>
<thead>
<tr>
<th>Step-by-Step: Conducting an Exact search from the CONNECTIONS Toolbar</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Click on the PERS button on the CONNECTIONS Toolbar.</td>
</tr>
<tr>
<td>The Person Search window displays.</td>
</tr>
<tr>
<td>2 Click on the drop-down arrow for the <strong>Search Type</strong> field and select <strong>Exact</strong>.</td>
</tr>
<tr>
<td>3 Enter one of the required search criteria (see page 47) into the appropriate field. Fields required to complete a particular type of search appear yellow when that type is selected from the <strong>Search Type</strong> drop-down list. Criteria that are not available for a particular type of search disable when that search type is selected.</td>
</tr>
<tr>
<td>4 Click on the <strong>Search</strong> button.</td>
</tr>
</tbody>
</table>
Conducting a Phonetic Name Search Within a Stage

During the course of an investigation, you may identify an individual who should be added or related to the investigation. Before adding a person to a stage, CONNECTIONS guides you through a required Person Search to determine whether that individual has a history in CONNECTIONS. This functionality is intended to preserve data integrity by preventing the creation of duplicate records.

Who can be added to a stage?

Prior to adding anyone to a stage, it is necessary to establish if the individual is required by law (Social Services Law §412.4 and Family Court Act §1012.g) to be added to the stage (e.g., other persons named in the report, including non-culpable parents, guardians or other persons legally responsible and other children in the household).

Before you add or relate an individual, you need to conduct a person search to see if the person is known to CONNECTIONS. When individuals are related in an Investigation stage, the “historical” person selected in the Person Search is added to the current Investigation stage. If the person is not known to CONNECTIONS, add the person as a new record. The Person Search is an important step because it helps prevent the creation of duplicate records.

Step-by-Step:
Conducting a Phonetic Name Search Within a Stage

2. Click on a stage to select it. *The Tasks… button enables.*
3. Click on the Tasks… button. *The Task List displays for the selected stage.*
4. Click on the Maintain Person task.
5. Click on the List… or New… button. *The Person List displays for the selected stage.*
6. Click on the New… button. *The Person Search window displays.*
7. The Person Search window automatically defaults to Phonetic Name search. The Search Type field contains a drop-down list of three person search options that indicate the type of search in effect:
   - Phonetic Name
   - Phonetic Address
   - Exact

Fields that are required to conduct a particular type of search appear yellow when that search type is selected from the drop-down list. Criteria that are not available for a particular type of search disable when that search type is selected.

8. Enter the person’s first and last name into the name fields.
9 Enter the person’s date of birth or the approximate age, if known, into the **DOB** and/or **Age** fields.

10 Click on the drop-down arrow for the **Sex** field and select from the resulting list.

11 Click on the **Search** button. 

    
    **CONNECTIONS performs a search based on your criteria and returns the results of your search in a list at the bottom of the Person Search window. Use the vertical scroll bar to scroll down the list.**

---

*Scoring* sorts the search results and displays the matches most similar to the search criteria first, followed by less similar records. If you perform a Phonetic Name search, the scoring of every name in the candidate pool is based on the specific search name you entered. Although names phonetically further away from the search name will score lower, you will ultimately be able to see all possible matches.

Additional criteria entered for a Phonetic Name search is scored, not filtered out. This ensures that potential matches are not eliminated from the pool of results.

If you perform an Exact search, all records return which exactly match the search criteria. The ability to filter Exact search results by using other search criteria and the ability to validate the search address information helps users retrieve the best possible results.

With the additional filters, any criteria entered (other than one of the required criteria) act to the selection criteria’s original pool (see page 47 for a list of required fields for Exact search).
Conducting Address Searches

Step-by-Step: Conducting a Phonetic Address Search from the CONNECTIONS Toolbar

1. Click on the PERS button on the CONNECTIONS Toolbar. The Person Search window displays.

2. Click on the drop-down arrow for the Search Type field and select Phonetic Address. The Street 1 field highlights in yellow, indicating that it is a required field for this type of search.

3. Enter the street name, without a number or suffix, in the Street 1 field. To increase the effectiveness of your search, you can enter search criteria in additional address fields, such as City or ZIP Code. See page 49 for hints about conducting effective Phonetic Address searches.

4. Click on the Search button. Search results display on the Person Search List in the lower half of the Person Search window.
The Person Search List Output

Some Person Searches may return a long list of results. You may find it useful to print the search results to help you keep track of your progress as you view detailed information about each person on the list. Keep in mind that the information in CONNECTIONS is highly confidential and therefore should be treated accordingly. Do not leave any output information in plain sight and use a cross-cut shredder to dispose of it.

Other person searches may result in no matches being returned. You may consider it helpful to include a hard copy showing no search results in the external case file as a record that a person search was conducted.

The results of a Person Search can be printed by launching the Person Search List output.

Step-by-Step: Generating the Person Search List Output

1. After completing a Person Search, click on the Forms menu on the Person Search window and select Person Search List.
   The following message displays:
   “Please wait while form or document is being produced…”
   The Person Search List output then displays as a Microsoft Word document.

2. To print the Person Search List output, click on the File menu and select Print.
   The Microsoft Word Print dialog box displays. Verify that the prompted printer choice is correct.

3. Click on the OK button.
   The document prints to the selected printer.

4. To close the report, click on the File menu and select Close.
   The report closes and the Person Search window displays.
Case Search

When working on an investigation, it is important to know about any other stages that may exist in the case, as well as other cases with which an individual may be involved. Historical cases are not always associated with the current case at the time of Intake, so historical cases may not appear on the Intake/IRI Report. Performing a Case Search enables you to retrieve historical information about case involvement for the individuals you are currently investigating.

A Case Search is a direct route to case information when you know the Case ID number, Stage ID number, Case Name, Facility Name or the District and WMS Case Number. When searching by Case Name, the search criteria must exactly match the CONNECTIONS Case Name in order for the search to return a match. Other names in the Case Composition for that case will not return. (For example, if a case is named after Sandra Connors, her daughter Mary will be included in the Case Composition, but will not return a match if the Case Search uses Mary’s name as the search criteria.)

To further narrow the search when completing a Case Search by Case Name or Facility Name, you may enter a District, Zone and/or City. These fields are disabled if the search is performed by Case or Stage ID number.

Case List

When a Case Search is conducted, the search results display on the Case List. This window contains the following columns:

| ! | An exclamation point (!) in this column indicates that the case is marked "sensitive." |
| Image | A red check mark in this column indicates that one or more stages in the case pre-date the implementation of the CONNECTIONS system; the pre-dated information (as a scanned image) is available exclusively to the SCR. |
| Mrg | An M in this column indicates that the case was involved in a Case Merge. An S indicates that the case was involved in a Case Split. (See “Case Merge/Split Functions” on page 134 for details.) |
| Status | “CLD” in this column indicates that the case is closed. Open cases are designated with “OPN” in this column. |
| Case Name | This column contains the name of the case; typically, cases are named after the biological mother of the abused or maltreated child. |
| Case ID | This column contains the unique, eight-digit, system-generated case identification number. |
| District/Agency | This column lists the name of the local district that has Primary jurisdiction for the case. |
| Zone | This column, which is only be populated for cases in which the Primary address is in New York City, indicates the geographical borough subdivision corresponding to the case address. |
Case Type
This column displays SVC for all CPS Intake and Investigation stages, as well as for Family Services Intake and Family Services Stages (including Child Case Record). Foster and adoptive home stages are designated with FAD in this column.

Primary
This column lists the name of the Primary worker (or the Case Manager) for SVC cases and local district -authorized FAD cases; for voluntary agency-authorized FAD cases, the name of the agency displays in this column.

The Case List provides access to the Case Composition window, the Case Summary window and the Event List for the case. If the case you are viewing is outside your district (and you have no implied role) you are only able to view the Case Composition window and the Case Summary window. Historical Secondary workers (workers who were assigned as Secondary workers at the time a stage was closed) are able to access the Case Composition window, the Case Summary window and the Event List for an entire case from the closed stage. This also applies to those users having the ACCESS ALL DIST Business Function from the same district as the Historical Secondary worker.
Case Composition Window

The Case Composition window lists the names of all individuals associated with any stage in the case and displays the relationship between these individuals. This window is useful in determining if the person you are searching for is the same person on the Search Results List (on the Person Search window), because it places the searched-for person in the context of other household members. This window does not display the person’s role in the case.

All workers can view the information on the Case Composition window, regardless of Business Function Profile or jurisdiction. The window does not provide information regarding the specific type of case in which the person is associated.

Conducting Case Searches

All Case Searches are conducted from the Case Search Criteria window, which is opened via the CASE button on the CONNECTIONS Toolbar.

Searching by Case ID or Stage ID Number

The Case ID and Stage ID numbers are unique, system-generated, 8-digit identification numbers. Using either the Case ID or Stage ID in the search criteria is a direct method for conducting a Case Search (if you have the correct 8-digit Case ID or Stage ID number), since only one case will display in the search results on the Case List.

Entering a Stage ID disables all other search fields in the Case Search Criteria window. The Case List window displays the case that contains that Stage ID.

Step-by-Step: Conducting a Case Search by Case ID or Stage ID Number

1. Click on the CASE button on the CONNECTIONS Toolbar. The Case Search Criteria window displays.

2. Enter the 8-digit Case ID number into the Case ID field (or the 8-digit Stage ID number in the Stage ID field).
3 Click on the **Search** button. The Case List displays with one case which matches the search criteria. From this window, you can access the following information (depending on your security) by clicking on the buttons in the window:

8 **Case Summary**: a list of all stages in a case

9 **Case Composition**: a list of all individuals in a case

10 **Event List**: a list of all events in a case

**Conducting a Case Search by WMS Number**

The Welfare Management System (WMS) Case Number is generated by WMS to identify cases for which the services are being provided. Since the same number can be used by two local districts, a combination search must be completed by entering the WMS Case Number and selecting the local district from the drop-down list.

<table>
<thead>
<tr>
<th>Step-by-Step: Conducting a Case Search by WMS Case Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Click on the <strong>CASE</strong> button on the CONNECTIONS Toolbar. The Case Search Criteria window displays.</td>
</tr>
<tr>
<td>2 Enter the WMS Number in the <strong>WMS Number</strong> field. The <strong>District</strong> field enables.</td>
</tr>
<tr>
<td>3 Click on the drop-down arrow for the <strong>District</strong> field and select the district code from the resulting list. The <strong>Search</strong> button enables.</td>
</tr>
<tr>
<td>4 Click on the <strong>Search</strong> button. The Case List displays with the only case that matches the search criteria.</td>
</tr>
</tbody>
</table>
Step-by-Step: Viewing Information on the Case Summary Window

1. Click on a case to select it from the Case List.

2. Click on the Summary button.
   The Case Summary window displays with a list of all stages in the selected case. A check mark in the SEC column in the Case Summary window indicates that a secondary assignment has been made to the stage. If the case being displayed is closed, a check mark indicates the existence of a Historical Secondary worker. You can access both person- and case-specific information from here by selecting a stage and clicking on the Options menu, then selecting an enabled command to navigate to related windows.

   The Case Summary window also includes a column labeled “CD.” This column displays the Community District for New York City stages.

3. Click on the Close button to close the Case Summary window.
   The Case List displays.

Step-by-Step: Viewing Information on the Case Composition Window

1. Click on a case to select it from the Case List.

2. Click on the Comp button.
   The Case Composition window displays, containing a list of all individuals in the case. You can compare this family composition with the list of individuals in a stage you’re working on to make sure the information is consistent.

3. Click on the Close button to close the Case Composition window.
   The Case List displays.

Step-by-Step: Viewing Information on the Event List

1. Click on a case to select it from the Case List.

2. Click on the Events button.
   The Event List displays with a list of all events in the case.

3. Click on the Close button to close the Event List.
   The Case List displays.

If you return to the Event List after viewing other windows, the Event List displays the previous scroll position and the previously selected event remains highlighted.

You can also search for events that match specific criteria. See “Searching for Events” in the Event List section of this guide.
Resource Search

In the course of your casework, you may need to locate information on agencies, facilities or providers. The Resource Directory is considered the “yellow pages” of CONNECTIONS. It contains information about providers of child welfare-related services throughout New York State.

Each resource has a designated Resource Type. Six Resource Types exist in the Resource Directory:

- Agency
- Facility
- Hotline/Helpline
- Law Enforcement
- Provider
- School

You will generally be searching for a Facility, Agency or Provider.

A Facility is a location that provides professional child welfare services.

- Foster and Adoptive homes
- OCFS congregate care facilities, such as institutions and group homes
- OCFS, OMH and OMRDD facilities
- OCFS preventive facilities (converted and new entered by districts)

An Agency is either a local district (LDSS) or a voluntary agency.

A Provider is an organization or individual that provides services for the local district.

- Day Care
- Housing vendors (preventive)
- Adoption vendors

Conducting Resource Searches

In the course of your casework, you may need to locate information on agencies, facilities or providers to arrange services for an individual associated with one of your cases. If you know the name of the resource, you can conduct a Resource Search using the resource’s name in the search criteria. If you are looking for a resource that matches certain service and/or location characteristics, you can conduct a Resource Search using the resource’s characteristics in the search criteria.
The Resource Search Criteria window enables you to conduct three different types of searches:

**Phonetic Name** *(default)*
This search type returns results that sound like the information entered in the Resource Name field.

**Phonetic Address**
This search type returns results that sound like the information entered in the Address section (the Street 1 field is required to enable a Phonetic Address search). See the tip box and table on page 46 for more information about Phonetic Address search.

**Exact/Directory**
This search type returns results that exactly match the search criteria. You must enter at least two characters of the resource name, when using this exact search.

CONNECTIONS returns all results that match the search type and search criteria, regardless of which search type is selected. Also, if you are looking for a resource that matches certain service and/or location characteristics, you can conduct a Resource Search using the resource’s characteristics in the search criteria.

### Step-by-Step: Conducting a Resource Search


2. Click on the drop-down arrow for the Search Type field and select from the resulting list. *This field must be completed to perform a search. Phonetic is the default search type.*

3. Type in the part of the resource’s name that you are certain about. You need a minimum of two letters to enable a search. *The Search… button enables. You don’t need to enter any other search criteria, but you can if you want to narrow the search.*

4. If you know the resource’s Facility Type, click on the drop-down arrow for that field and select from the list.

5. Click on the Search… button. *The Resource List displays, containing the results of your search. Use the scroll bars to view information that doesn’t fit on the screen.*

6. Click on a resource to select it from the list.
7 Click on the Detail… button. 
The Resource Detail window displays. Information about the resource is available via the Address, Phone, Facility, Svc Area and Comments buttons.

8 To close the Resource Detail window, click on the Cancel button. 
The Resource List displays.

9 To close the Resource List, click on the Close button.

Staff Search

You can use CONNECTIONS to locate contact information about staff who are also CONNECTIONS users. You can do a stand-alone Staff Search from the CONNECTIONS Toolbar, or search from specific task windows when searching is part of the task, like sending a To-Do or reassigning a case to another worker.

Completing a Staff Search in CONNECTIONS is similar to looking for someone in a telephone directory. Names are listed alphabetically; the search criteria you enter bring you to a particular point on that alphabetical list. For this reason, if you are unsure of the exact spelling of the staff member’s name, it is best to search only on the portion of the last name about which you are certain.

To locate basic information about a staff member, conduct your search from the Toolbar. If you are conducting a Staff Search in order to send a To-Do, conduct the search from within the To-Do Detail window.

Step-by-Step: 
Searching for Staff from the CONNECTIONS Toolbar

1 Click on the STAFF button on the CONNECTIONS Toolbar. 
The Staff Search Criteria window displays. The Agency field is pre-filled and the Active checkbox is selected.

2 Enter search criteria, either the Person ID number or the staff person’s last name. (Just a portion of the last name is enough, unless you are searching for a common name in a large agency.)

3 If you are searching for a worker outside your agency and you know that person’s agency code, enter it in the Agency field and skip to Step 8 (the Agency field defaults to your own agency code).
4 If you don’t know a worker’s agency code, click on the PERS button on the
CONNECTIONS Toolbar and complete a Person Search (see the “Person Search”
section in Module 4 of this guide).

5 When you have completed the search, write down
the individual’s Person ID number from the Person
Search List.

6 Close the Person Search window by clicking on the
Cancel button.

When you click on a staff
person’s name in the Person
Search List, the following
message displays:
“This person is an Employee.
For more information use
Staff Search.”

This message helps you identify
employees in the listing.

7 Type the worker’s Person ID number in the Person
ID field.

8 Click on the Search button.

The Staff List displays with the results of your
search.

Step-by-Step:
Viewing Detailed Staff Information

1 Click on a name to select it from the Staff List.

2 Click on the Detail… button.

The Staff Detail window displays.

3 To close the Staff Detail window, click on the Cancel button.

The Staff List displays.

4 To close the Staff List, click on the Close button.

The Staff Search Criteria window displays.

5 To close the Staff Search Criteria window, click on the Close button.
Module 5: Working with Reports and Forms

You can print hard copies of much of the information contained in CONNECTIONS by clicking either the Forms or Reports menus on many CONNECTIONS windows. Clicking on the Generate Report button in the Child Protective Record Summary window provides you the opportunity to generate a report of the information contained in the CPRS. You can choose to print the entire CPRS by clicking on the Select All button or specific tabs by selecting the specified tab.

This module guides you through procedures for finding and printing these documents.

By the end of this module, you'll be able to:

- locate reports and forms from associated windows;
- launch, view and print these reports; and
- print these forms.

Generating, Viewing and Printing Reports

CONNECTIONS provides pre-designed reports and forms for printing information.

In many areas in CONNECTIONS, creating, viewing and printing a report is a three-step process. First you generate the report from an associated window, then you use the RPRTS button on the Toolbar to view it. Once the report is open, you will able to print it. In the CPRS, click on the Generate Report button and select the tabs to be printed.

Each report has to be launched from its own window. See Appendix B for a complete list of the reports related to CPS, along with the windows from which you launch them.

---

Step-by-Step: Generating a Report

1. Open the window from which you can generate the desired report.
   *See Appendix B for a list of which reports are generated from which windows.*

2. Click on the Reports menu on that window and select the desired report command.

3. The following message displays: “The Report has been launched. Check Report List.”

4. Click on the OK button.

---

You can click on the RPRTS button at any time. You don't need to close any other windows to do so.

You may first have to select an item (e.g. a stage from the Assigned Workload) before you the Reports menu is enabled.
Step-by-Step: View a Generated Report

1. Click on the **RPRTS** button on the CONNECTIONS Toolbar. 
The report list displays.

2. Click on the report you want to view.

3. Make sure that the report’s status reads “DONE.” If it is still in “PEND” or “RUN” status, click on the **Refresh** button or close the window and return in a few minutes. You need to wait for the report to launch completely before you can view it.

4. Click on the **Open** button. 
*The report opens as a Microsoft Word document.*

---

Step-by-Step: Printing an Open Report

1. Click on the **File** menu in the Word document window and select **Print**. 
The Microsoft Word Print dialog box displays. 
*Verify that the prompted printer choice is correct and select the number of copies to be printed.*

2. Click on the **OK** button. 
*The document is sent to the selected printer.*

3. To close the report, click on the **File** menu and select **Close**. 
The report list displays.

4. To close the report list, click on the **Close** button.
Printing a Form

Some windows in CONNECTIONS enable you to generate letters or forms. Forms are opened directly from the **Forms** menu on these windows.

**Step-by-Step: Printing a Form in CONNECTIONS**

1. In the appropriate window, click on the **Forms** menu and select the form you want to generate. 
   The form opens as a Microsoft Word document. For many forms, you must first select something before you can access the commands from the **Forms** menu. For example, when you are printing a Notice of Existence, you must select the individual to whom you wish to provide the notice before the menu command enables.

2. To print the form, click on the **File** menu in the Word document window and select **Print**. 
   The Microsoft Word Print dialog box displays. 
   Verify that the prompted printer choice is correct and select the number of copies to be printed.

3. Click on the **OK** button. 
   The document is sent to the selected printer.

4. To close the form, click on the **File** menu and select **Close**. 
   The window displays from which you generated the form.
Module 6:  
Getting Help When You Need It

When you’re using CONNECTIONS, you may have questions that are not answered in this guide. There is a wealth of additional information available to you that will help you answer these questions.

By the end of this module, you will be able to:

- contact the Help Desk to get basic trouble-shooting questions answered;
- access Online Help for assistance in accomplishing CONNECTIONS tasks; and
- access training materials (e.g., Step-by-Step Guides, Job Aids) from the OCFS intranet site.

The Enterprise Help Desk

The New York State Office for Technology (NYS OFT) Enterprise Help Desk staff are available to answer basic questions related to your equipment, or to solve problems you’re having with the CONNECTIONS application. If they cannot solve your problem, they will record your information and forward it to others who can.

When you call the Help Desk with a problem, you will be given a ticket number to use for tracking your issue and its resolution. Keep a record of this number; you will need it for any follow-up conversations with the Help Desk.

The Help Desk is staffed 24 hours a day, seven days a week. The telephone number is:

1-800-NYS-1323  
(1-800-697-1323)

Please note that some agencies have internal policies regarding who contacts the Help Desk. Check with your supervisor for information on your agency’s policy.
Online Help

The CONNECTIONS Online Help feature provides descriptions for various windows, as well as step-by-step instructions for common tasks. You can access Online Help at any time, from any window in CONNECTIONS. Updates to Online Help content and functionality in CONNECTIONS are ongoing.

In support of the Child Protective Record Summary (CPRS), a new online help file was created. CPRS Help provides context-sensitive help information for all elements of the CPRS, including tabs, grids, buttons and individual fields. This additional online Help is not found in the other CONNECTIONS windows. CPRS Help provides the following features:

- **CPRS Overview**
  A high level summary of the CPRS, including a list of features and functions

- **How Do I?**
  Information for navigating within the CPRS and how to utilize the functions

- **Glossary**
  Definitions of commonly used terms in CPS casework and definitions of the CPRS elements and concepts

- **Guidelines**
  Legal, policy and procedural guidelines followed by CPS workers for viewing and recording information in the CPRS

- **Help on Help**
  Instructions on how to use the CPRS Online Help system

CPRS Help offers many navigational tools that guide you to the help topic you need:

- A table of contents provides access to all help information.
- Index and search functions provide alternate means of finding information.
- Interactive graphics display examples of CPRS elements.
- Hyperlinks take you directly to related information, such as definitions and procedural guidelines.

**Accessing CPRS Help**

CPRS Help can be accessed via context-sensitive links by clicking on an element to make that element “active” and pressing the F1 key. Information displays about the selected CPRS element.

In addition, CPRS Help can be accessed by clicking on the Help menu in the upper left corner of the CPRS. Accessing Help using this method displays the CPRS Overview topic.
Help for CPRS narratives on the Investigative Findings tab can be accessed in one of following two ways:

- Clicking on the Help on Narratives button with a narrative opened but minimized displays the Help topic for the opened/minimized narrative.
- Pressing the F1 key on the keyboard with a narrative opened but minimized displays the Help topic for the opened/minimized narrative.

---

**Step-by-Step:**
Accessing CONNECTIONS Online Help  
(Other than CPRS Online Help)

1. Click on the Help menu on the CONNECTIONS Toolbar.  
   Choose from the following commands:

   - **Contents**  
     A table of contents for the help facility with links to major sections.
   - **How Do I?**  
     Step-by-instructions to help you complete tasks using CONNECTIONS.
   - **Window Descriptions**  
     Descriptions of windows in CONNECTIONS, along with information on various fields.
   - **DSS Policy**  
     Online OCFS policy handbooks, not currently available.
   - **Help On This Window**  
     Window description help for the window you are on.
   - **Help for Help**  
     Instructions on how to use the help functionality.
   - **About CONNECTIONS**  
     Information about the current CONNECTIONS version and build.

2. Click on a command from the Help menu.  
   The window related to your selection displays. In some cases, you will need to make another selection in that window to obtain instructions. At the top of each window, you’ll see additional buttons and menus. Use the Search button to search for specific information in the Help function and use the Back button to return to windows you’ve just visited in Help. The Glossary button opens a list of important CONNECTIONS terms and the Print button allows you to print Help information.

3. When you’re done reviewing information in Help, close each Help window by clicking on the Close button (×) in the top right corner of the window.  
   The system returns to the window your were using when you accessed help.
Finding Training Materials Online

A variety of training-related materials are available from the CONNECTIONS intranet site (http://ocfs.state.nyenet/connect/).

Some of you have access to the Internet via your CONNECTIONS computer; there are some security issues to keep in mind when accessing the Internet. Only connect to the Internet for purposes authorized by your district/agency management. You should not use the Internet for any reasons that could breach security. This includes accessing external e-mail accounts (e.g., Hotmail or Yahoo).

Do not exchange non-public CONNECTIONS information over a messaging system unless authorized by OCFS ISO or OFT management after a formal risk assessment of the situation has been performed. No external public Instant Messaging, Team-rooms and Conferencing services should be used to conduct business unless authorized in writing from the OCFS ISO.

Do not try to prove a suspected weakness. This means you should not attempt to find workarounds or bugs in the system. All CONNECTIONS users should be aware of the procedure for reporting security incidents that may have an impact on the security of information. Report any incidents to your appropriate supervisor and the Security Coordinator.

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**Step-by-Step: Finding Training Materials on the OCFS CONNECTIONS Intranet Site**

1. From your desktop, double-click on the Internet Explorer icon.

2. If the browser does not display the OCFS intranet site automatically, enter http://ocfs.state.nyenet into the browser’s address line and press the Enter key on your keyboard.
   
   *The OCFS intranet site home page displays.*

3. Click on the CONNECTIONS link.
   
   *The OCFS CONNECTIONS intranet home page displays.*

4. Click on a topic to access information.
   
   *For access to various Step-by-Step Guides and Job Aids, click on the Step-by-Step/Job Aids/Tips link.*

5. To close Internet Explorer, click on the File menu and select Close.
Module 7: Reviewing Intake Information and Starting an Investigation

The basis for an investigation is a report of child abuse or maltreatment. Reports are received by Child Protective Services Specialists at the NYS Child Abuse and Maltreatment Register, also known as the State Central Register (SCR). SCR staff interview callers to determine if the phone call constitutes a report. If so, the SCR staff member creates an Intake record in CONNECTIONS, assigns it a system-generated Case ID number and forwards the case electronically to the appropriate jurisdictions. (In Monroe and Onondaga counties, local intake workers may also receive calls and record information, which is then forwarded to the SCR for initial processing.)

On-call workers at the local-district level (or others, depending upon local procedures) receive these cases from the SCR and then carry out a number of steps to process them locally. These steps can include: reviewing information collected during intake; printing the Intake and IRI reports; accepting the case and progressing it to the Investigation stage; and reassigning it to a local district worker.

When you receive an assignment, you may also need to complete some or all of these tasks. In the case of accepting and progressing a stage, information within the Assigned Workload tells you whether these steps have already been completed.

By the end of this module, you will be able to:

- find new assignments and navigate to related tasks;
- identify the various types of CPS reports;
- review information collected during Intake and cross-referenced case information;
- launch, view and print the Intake Report and IRI (Individual Report of Involvement);
- accept and progress stages;
- reassign cases to another worker; and
- print the Notice of Existence.
Different Types of CPS Reports

Initial Report
An Initial report is registered by the State Central Register (SCR) when there is no open case or investigation. Although the principals may have been involved in past cases, these cases have been closed prior to the current report. As a result of this type of report, a new case is created in CONNECTIONS. Historical cases involving any of the same individuals will be linked within CONNECTIONS through these individuals.

Duplicate Reports, Subsequent Reports and Additional Information
There are times when a particular family is reported to the SCR more than once; sometimes there may be many reports. Each of these reports is assigned to the local district. These reports may fall into several categories; the categories and respective procedures are outlined below.

Duplicate Reports
A report made which describes the same incident(s), involving the same subjects and child(ren), occurring within the same time frame as a previously made report—\textit{and which does not include any new allegations}—is considered a duplicate report. Duplicate reports are usually made by different reporters. This type of report displays on the \textit{Assigned Workload} with the label “DUP” in the \textbf{Type} column.

Duplicate reports are merged with the original case by the SCR and thereby receive the same Case ID number as that of the original report.

Unlike an initial or subsequent report, a duplicate report is not progressed to an investigation in CONNECTIONS. A duplicate intake stage is closed, using the \textit{Intake Priority Closure} window, \textit{after it has been accepted and reviewed} by the local district.
Step-by-Step: Closing a Duplicate Report

1. Click on the WORK button on the CONNECTIONS Toolbar. The Assigned Workload displays.

2. Click on the desired stage with “DUP” in the Type column.

3. Click on the Options menu and select Intake/Priority Closure… The Intake Priority Closure window displays.

4. Click on the drop-down arrow for the Reason Closed field and select Close Duplicate Report from the resulting list.

5. Click on the File menu and select Save and Close. The Intake Priority Closure window closes. The stage name with a type of DUP no longer displays on the Assigned Workload.

A duplicate report cannot be closed if it is the only stage in a case or if a merge is pending.

If you attempt to close a duplicate stage when it is the only stage in a case, the following message displays:

“Cannot close Add Info or Dup if only stage in case. Merge or change type.”

If you attempt to close a duplicate stage when a merge is pending, the following message displays:

“Add Info or Dup cannot be closed. It is involved in a pending merge.”

Subsequent Reports

Subsequent reports are those reports made to the SCR concerning families that have:

- a child abuse or maltreatment report under investigation; or
- an open indicated child protective case.

A subsequent report is added to an open case when a call to the SCR contains new or additional allegations, subject(s) or abused/maltreated child(ren), or involves a new incident. Subsequent reports are merged with the original case by the SCR and thereby receive the same Case ID number as that of the original report. However, this report displays on your Assigned Workload as a separate report/stage, and it must be investigated and fully documented within CONNECTIONS in the same way that any other report would be.

A new Notice of Existence is required for each subsequent report.
Additional Information

At times a reporter will provide the SCR with additional information that is relevant to a CPS case that is either open or under investigation. An Additional Information (ADD INFO) contains no allegations and may include more identifying details (names, addresses, birth dates, relationships, etc.) or other information related to the case. Since an ADD INFO contains no allegations, it is not classified as a report. The SCR transmits an ADD INFO to the local district. The information displays on your Assigned Workload with “ADD” in the Type column.

An Additional Information is merged with the original case by the SCR and thereby receives the same Case ID number as that of the original report. An Additional Information is not progressed to the Investigation stage in CONNECTIONS. An Additional Information Intake stage should be closed, using the Intake Priority Closure window, after it has been accepted and reviewed by the local district.

An Additional Information cannot be closed if it is the only stage in a case or if a merge is pending.

If you attempt to close an Additional Information stage when it is the only stage in a case, the following message displays:

“Cannot close Add Info or Dup if only stage in case.
Merge or change type.”

If you attempt to close an Additional Information stage when a merge is pending, the following message displays:

“Add Info or Dup cannot be closed. It is involved in a pending merge.”

Step-by-Step: Closing an Additional Information

1. Click on the WORK button on the CONNECTIONS Toolbar. The Assigned Workload displays.

2. Click on the desired stage with “ADD” in the Type column.

3. Click on the Options menu and select Intake/Priority Closure… The Intake Priority Closure window displays.

4. Click on the drop-down arrow for the Reason Closed field and select Close Additional Information from the resulting list.

5. Click on the File menu and select Save and Close. The Intake Priority Closure window closes. The stage name with “ADD” in the Type column no longer displays on the Assigned Workload.
Using the Task List

The Task List for an Investigation stage identifies eight tasks that you may complete in CONNECTIONS during your work on an investigation. There is a separate Task List for each stage (i.e., Intake, Investigation) in the life of a case. You access work and information-related windows in CONNECTIONS via the Task List.

If you select more than one assignment, the Tasks... button disables and you are not able to open the Task List. Click again on an assignment to deselect it.

<table>
<thead>
<tr>
<th>Step-by-Step: Opening the Task List</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong> Click on an INT or INV assignment from the Assigned Workload. The Tasks... button enables.</td>
</tr>
<tr>
<td><strong>2</strong> Click on the Tasks... button. The Task List displays for the selected stage.</td>
</tr>
</tbody>
</table>

The INT Task List contains only one task: Record/Review Call. The Intake report is frozen when the Intake is assigned by the SCR to the local district. You can only view the intake, you cannot change it.

The INV Task List contains eight tasks:

<table>
<thead>
<tr>
<th>Task</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review Intake</td>
<td>The information available from this task is the same as the information from the Record/Review Call task in the Intake Task List.</td>
</tr>
<tr>
<td>Maintain Person</td>
<td>This task enables you to add, modify and view information regarding persons associated with the selected stage.</td>
</tr>
<tr>
<td>Maintain Primary Address and Phone</td>
<td>This task enables you to use a single window to add or modify the primary address or phone information for multiple individuals in a stage. You can also select an existing address or phone number for an individual who has recently been added to a stage.</td>
</tr>
<tr>
<td>Maintain Allegation</td>
<td>This task enables you to add, modify and view allegations (including injuries, as applicable) associated with the selected stage.</td>
</tr>
<tr>
<td>Investigation Actions</td>
<td>This task enables you to open the list of Investigation Actions Questions associated with the selected stage. These questions must be answered in order to complete an investigation.</td>
</tr>
<tr>
<td>Safety Assessment for Case</td>
<td>If multiple stages exist for a case (e.g., an Initial Investigation and a Subsequent Investigation), a list of all Safety Assessments can be displayed from this task.</td>
</tr>
</tbody>
</table>
Investigation Conclusion

This task enables you to record and review Investigation Conclusion information, including the narrative and the closure reason. The determination is system-populated based on your completion of the Maintain Allegations window.

Child Protective Record Summary

The CPRS provides demographic information and investigative findings in one place. This window contains multiple tabs that allow you to access, view, record (e.g., Safety Assessment, Risk Assessment Profile, Progress Notes) and print CPS case information easily. The window is organized to be consistent with the investigation process.

Reviewing Intake Information

When you receive a new assignment, you must review information about the report collected during Intake to get an overview of the situation. You must review the cross-referenced case history. You may uncover information that is relevant to your current investigation.

Two printable reports in CONNECTIONS consolidate much of this information for easy review. The Intake Report contains the details of the reported incident; the Individual Report of Involvement (IRI) contains a comprehensive cross-reference history for each principal listed in the associated Intake Report, including all under investigation, indicated, legally sealed unfounded CPS cases. Principals are listed in the IRI in the same order as in the associated Intake Report. The IRI provides a combination of historical and current information about each individual. The demographics displayed on the IRI are those that were recorded as of the date of the Intake Report. The cross-reference history includes all reports that existed prior to the date of the associated Intake Report. Review all persons listed in the report.

Once an Intake stage has been progressed to the Investigation stage, the Child Protective Record Summary (CPRS) provides you with another method of accessing, viewing and printing case information in CONNECTIONS. The CPRS offers a formatted report of all information contained in all sections of the CPRS.

The Intake Report has the following sections:
- Summary
- List of Principals
- Reported Address Information
- Allegation Detail
- Reporter Information
- Safety Factors
- Facility Detail
- Report Narrative
- Comments

The Individual Report of Involvement (IRI) has the following sections:
- Person Information as of the Intake Date
- Current Demographics
- Cross-reference History Information
- Person Merge Information
The following excerpt from CAPTA Regulations, subparagraph (i) of paragraph (3) of subdivision (b) of section 432.2, is pertinent to IRI information and reads as follows:

“...within one business day of the oral report date, the child protective service must review State Central Register of Child Abuse and Maltreatment records pertaining to all prior reports involving members of the family, including legally sealed unfounded reports where the current report involves a subject of the unfounded report, a child named in the unfounded report or a child’s sibling named in the unfounded report. Within five business days of the oral report date, the child protective service must review its own child protective service record(s) that apply to the prior reports, including legally sealed unfounded reports where the current report involves a subject of the unfounded report, a child named in the unfounded report or a child’s sibling named in the unfounded report. For prior reports in which case records are maintained by another social services district including legally sealed unfounded reports, the child protective service with investigative responsibility must request relevant portions of such record(s) within one business day of the oral report date. The social services district maintaining the case record must provide the inquiring child protective service with the requested pertinent portions of their records within five business days of receiving such request.”

CAPTA Regulations can be found in: Public Folders>Statewide>OCFS>CAPTA>CAPTA Regulations 3/20/01

It is recommended that you print out each of these reports to facilitate review of all of the information they contain. As with most CONNECTIONS reports, you need to launch them before you can view and print them. These reports can be launched from your Assigned Workload.

You can review this information—as well as additional information about cases in which you have an implied role—online. Page 87 of this guide provides the steps for reviewing cross-referenced case history for a particular stage. The steps on the next page guide you through generating, viewing and printing the Intake Report and IRI.
Step-by-Step: Generating the Intake Report and IRI

1. Click on the WORK button on the CONNECTIONS Toolbar. The Assigned Workload displays.

2. Click on the stage for which you want to generate an Intake Report and/or IRI. You can click on several stages to launch reports for multiple assignments. If you select multiple assignments from the Assigned Workload, the only reports that enable on the Reports menu are the Intake/IRI Report and the Family Services OCI by Worker.

3. Click on the Reports menu and select Intake Report, Individual Report Involvement or Intake/IRI Report.

The following message displays:
“The Report has been launched. Check Report List Window.”

4. Click on either the OK button or the Close button. (The Close button appears on the message window generated by the Intake/IRI Report command.)

5. Click on the RPRTS button on the CONNECTIONS Toolbar. The Report List displays. Reports on this window are identified by the Intake Stage Name and Stage ID. If you scroll to the right, you can see the date the report was generated.

6. Determine if the report has been launched. Reports are ready to be opened when the Status column reads “DONE.”

7. Click on the report you want to print or view online.

8. Click on the Open button. The report displays as a Microsoft Word document. Use the scroll bars to view information on the report.

9. To print the report, click on the File menu in the Microsoft Word document window and select Print. The Microsoft Word print dialog box displays. Verify that the prompted printer choice is correct and select the number of copies to print.

10. Click on the OK button. The document is sent to the selected printer. When your report has been printed, a message displays, indicating the print job number.

11. Click on the OK button.
12 To close the report, click on the File menu and select Close. 
   The Report List displays.

13 Click on the Close button. 
   The Assigned Workload displays.

---

**Step-by-Step: Reviewing Intake Information Online**

1 Click on the WORK button on the CONNECTIONS Toolbar. 
   The Assigned Workload displays.

2 Click on the INT/INV stage you want to work on. New assignments are highlighted in gray. 
   The Tasks… button enables.

3 Click on the Tasks… button. 
   The Task List displays for the selected stage.

4 Click on the Review Intake task.

5 Click on the Detail… button. 
   The Call Summary window displays for the selected stage. 
   If the phone number and/or address listed for the Reporter/Source is the same as that listed for one of the Principals, the following message displays: “Reporter/Source has Same Address/Source as Principal.”
   You must be assigned the VIEW RPTR SOURC Business Function in order for this message to display. This message does not prevent you from proceeding.

6 Click on enabled buttons at bottom of the window (Entry…, Narrative…, Persons…, Allegation…, Facility…, Decision… and Summary…) to view the information collected during Intake.

7 When you are done, click on the Summary…or Entry… button. 
   The Call Summary or Call Entry window displays.

8 To close the window, click on the File menu and select Exit. 
   The Task List displays.
Accepting an Assignment

Depending upon local procedures, the on-call worker in your district receives new reports from the SCR and will accept or reject them. If the **Accept** and **Reject** buttons are enabled when you click on a stage on your *Assigned Workload*, the stage has not yet been accepted from the SCR. In these cases, you need to accept or reject the assignment. It is vital to accept or reject a CPS report as soon as possible. The SCR monitors the acceptance or rejection of all reports. The designated person from the SCR will call the local district if this has not been accomplished within 30 minutes of the assignment time.

When the SCR sends a report to a district, the SCR also adds it to an assignment log and monitors it until the local district has accepted it. Accepting an assignment, in effect, serves as acknowledgment to the SCR that you have received the new stage and are beginning work on it.

There are instances in which you would reject a new assignment, but these are rare. Speak to your supervisor for guidelines on when the “reject” option is appropriate (e.g., the jurisdiction is incorrect). Rejected reports are reassigned as appropriate by the SCR.

**Step-by-Step: Accepting an Assignment**

1. Click on the **WORK** button from the CONNECTIONS Toolbar.  
   *The Assigned Workload displays.*

2. Click on an INT stage to select it.  
   *If the stage has not yet been accepted, the **Accept** and **Reject** buttons enable.*

3. Click on the **Accept** button.  
   *The stage is accepted. This process serves as acknowledgment that you have received the stage from the SCR and are beginning work on it.*

**Step-by-Step: Rejecting an Assignment**

1. Click on the **WORK** button from the CONNECTIONS Toolbar.  
   *The Assigned Workload displays.*

2. Click on an INT stage to select it.  
   *If the stage has not yet been accepted, the **Accept** and **Reject** buttons enable.*

3. Click on the **Reject** button.  
   *A blank Comments window displays.*

4. Click in the **Comments** window and type your reason for rejecting the assignment.
5 Click on the **OK** button.
   *The following message displays:*
   “This action will reassign assignment to the SCR On Call Person. Continue?”

6 Click on the **Yes** button.
   *The stage is returned to the SCR. The stage you rejected no longer displays on the Assigned Workload.*

---

**Stage Progression**

Most cases in CONNECTIONS go through more than one stage. For example, new reports are recorded in CONNECTIONS in the Intake stage, but investigative work on a case is done in the Investigation stage.

In order to begin work in the Investigation stage, the case must be “progressed” from the Intake stage. Depending upon local procedures, an on-call worker in your local district may progress the stage before assigning it to you. If you see “INT” in the assignment’s **Stage** column on the **Assigned Workload**, you need to progress the stage yourself. “INV” in that column indicates that the stage has already been progressed.

When a stage is progressed from the Intake stage, a Child Protective Record Summary (CPRS) is created for the Investigation stage.

The CONNECTIONS stage progression logic maintains a case status of “Open” if any Investigation stage in the case is concluded with an “Open for Services” closure reason. The status will remain “Open” as long as there is at least one Investigation stage with an “Open for Services” closure reason. When it is appropriate to close these cases, this can be done using the Case Status Maintenance functionality (see “Changing the Case Status” on page 277).

---

**Step-by-Step:**
**Progressing a Stage from Intake to Investigation**

1 Click on the **WORK** button on the CONNECTIONS Toolbar.
   *The Assigned Workload displays.*

2 Select the INT stage and click on the **Options** menu on the Assigned Workload and select **Stage Progression**.
   *The Stage Progression window displays. The Current Stage field is pre-filled with “INT” and the Create New Stage field is pre-filled with “INV.”*

3 Click on the **Save** button.
   *The following message displays:*
   “This will create a new stage of service. Remember to reassign. Continue?”

4 Click on the **Yes** button.
   *The Assigned Workload displays. The stage has been progressed from INT to INV.*
Reviewing Cross-Referenced Case History

Step-by-Step: Reviewing Cross-Referenced Case History

1. Click on the **WORK** button on the CONNECTIONS Toolbar.
   *The Assigned Workload displays.*

2. Click on the stage you want to work on.
   *The **Tasks**… button enables.*

3. Click on the **Tasks…** button.
   *The Task List displays for the selected stage.*

4. Click on the **Maintain Person** task.

5. Click on the **List…** button.
   *The Person List displays for the selected stage.*

6. Click on a person’s name to select it from the list.

7. Click on the **Options** menu and select **Case List**.
   *The Case List displays with the cases in which the selected individual is known. From this window, you can access additional information by selecting the appropriate case and clicking on the following buttons:*
   - **Case Summary**
     A list of all stages in the case
   - **Case Composition**
     A list of all individuals in the case
   - **Events**
     A list of all events in the case

---

You must have an implied role in a case (meaning the case shares a person in common with a stage of yours) to access information on people in cases outside your jurisdiction.

Workers who have ever been assigned to the stage, along with users from their district with the ACCESS ALL DIST Business Function also have access to closed stages.

This is done for security reasons. It enables CONNECTIONS to verify that you have rights to access information on people outside your stage. If you do not have an implied role in the case, some buttons on the Case Summary window will be grayed out—that is, not enabled.
Step-by-Step:
Viewing Information on the Case Summary Window

1. Click on a case in the Case List.

2. Click on the Case Summary button.
The Case Summary window displays, containing a list of all open and closed stages, the stage Primary worker and phone number. You can access stage- or case-specific information from here by selecting a stage and clicking on the Options menu.

3. To close the Case Summary window, click on the Close button.

Step-by-Step:
Viewing Information on the Case Composition Window

1. Click on a case in the Case List.

2. Click on the Case Composition button.
The Case Composition window displays with an unduplicated list of individuals in all stages in the case. Demographics reflect those from the most recent stage. From this list you can check the family composition from prior investigations. Review all persons listed in the report.

3. To close the Case Composition window, click on the Close button.

Step-by-Step:
Viewing Information on the Event List

1. Click on a case in the Case List.

2. Click on the Events button.
The Event List displays with a historical list of significant case activities. To view further details of some events (e.g., Investigation Conclusion), select the event and click on the Detail… button.

3. To close the Event List, click on the Close button.

Cross-referenced information in the IRI can be printed by following the step-by-step instructions under “Generating the Intake Report and IRI” on page 83.
Seeing Who is Assigned to Your Case and Reassigning a Stage

In CONNECTIONS, the Assign window provides an easy way to find out who else is assigned to a particular case. It also enables you to reassign a stage to another staff member. Consult with your supervisor, however, for local guidelines concerning reassigning a stage to another worker. In most local districts, reassignments are done by the on-call worker and supervisor. If it is appropriate to reassign a report to another district, prior consultation with that district is necessary.

CONNECTIONS sends alerts to the following staff regarding case assignments:

- To the Primary worker when a new assignment is received.
- To Secondary workers when the Primary worker submits an Investigation Conclusion for approval.
- To the Primary worker’s supervisor(s) when a new assignment is received.
- To all workers with a role in an open FSI/FSS stage with when a new assignment is received.
- To the Primary worker when Secondary workers unassign themselves.
- To Secondary workers’ supervisor(s) when Secondary workers unassign themselves.
- To Secondary workers’ supervisor(s) for new secondary assignments.
- To Secondary workers when another worker unassigns them from a case.
- To the Secondary worker when a new assignment is received.

Step-by-Step: Viewing Case Assignments

1. Click on the WORK button on the CONNECTIONS Toolbar.
   *The Assigned Workload displays.*

2. Click on the stage to be reassigned.

3. Click on the Assign... button.
   *The Assign window displays, listing the available staff in your unit (top of the window) and the currently assigned staff (bottom of the window).*

Reassigning a Stage

The Assign window is used to reassign a report (stage) from your Assigned Workload to that of another worker in CONNECTIONS. By default, this window contains available staff within your unit or district.

Case assignment in CONNECTIONS does not override policy parameters or off-line procedures/communications that are often required prior to transferring or assigning a case. Cross-district assignments should only be done after you have consulted with the supportive district and received their approval for the assignment. Always consult with your supervisor when a report is to be reassigned.

The top half of the Assign window, the Available Staff section, lists the eligible unit staff to whom you can reassign a stage. A list of the staff currently assigned to the stage is displayed in the Assignments section at the bottom of the window.
Step-by-Step: Reassigning a Stage

1. Click on the WORK button on the CONNECTIONS Toolbar. 
The Assigned Workload displays.

2. Click on the stage to be assigned.

3. Click on the Assign… button. 
The Assign window displays.

4. Select the worker’s name from the Available Staff list. 
   If the desired worker’s name does not appear on the Available Staff list, see the steps listed below for “Reassigning a Stage to a Worker Not on the Available Staff List.”

5. Click on the Primary or Secondary button, as applicable. 
The selected worker’s name displays in the Assignments section.

6. If you assign a staff person to be the Primary worker for a stage that already has a Primary worker assigned, the following message displays: “This action will remove the current Primary worker from the stage. Continue?” Click on the Yes button.

7. Click on the Save button. 
The Assigned Workload displays. The reassigned stage no longer appears on your Assigned Workload.

Step-by-Step: Reassigning a Stage to a Worker Not on the Available Staff List

1. From the Assign window, click on the Options menu and select the Search Staff Criteria command from the resulting list. 
The Search Staff Criteria window displays.

2. Enter the name of the desired worker in the First and Last Name fields. Click on the Search button. 
The Staff List window displays.

3. Select the name of the worker you wish to add to the Available Staff list and click on the OK button. 
The Assign window displays with the worker’s name added to the Available Staff list.

4. Return to Step 4 in the previous step-by-step (“Reassigning a Stage”).

If you are reassigning a stage to a worker who is not in your Agency, see page 67 for detailed information on conducting a Staff Search.
Assignment Changes by Supervisors

Supervisors and individuals in the Unit Hierarchy of a worker can un-assign or add a new a Primary or Secondary worker to a case. The supervisor opens the worker’s Assigned Workload and makes the changes on the Assign window.

<table>
<thead>
<tr>
<th>Step-by-Step: Reassigning a Worker by a Supervisor</th>
</tr>
</thead>
</table>
| 1 Click on the UNIT button on the CONNECTIONS Toolbar.  
*The Unit Summary window displays.* |
| 2 Click on the Search button.  
*A list of all workers in the unit displays.* |
| 3 Select the worker currently assigned to the case. |
| 4 Click on the Workload... button.  
*The Assigned Workload displays for the selected worker.* |
| 5 Select the stage to be assigned. |
| 6 Click on the Assign button.  
*The Assign window displays.* |
| 7 To un-assign a worker from your unit, select the worker’s name from the lower section of the Assign window and click on the Un-Assign button.  
*If the worker you wish to assign is from another unit, see the steps for “Reassigning a Stage to a Worker not on the Available Staff List” on page 90.* |
| 8 To assign a different worker from your unit, select the new worker’s name in the upper section of the Assign window and click on the Primary or Secondary button, as appropriate.  
*If the worker you wish to assign is from another unit, see the steps for “Reassigning a Stage to a Worker not on the Available Staff List” on page 90.* |

Canceling Assignments

On occasion, a worker or supervisor in a local district may inadvertently assign a stage to the wrong worker. The List Assignments Made window enables these individuals to view and cancel an incorrect assignment, provided that the stage has not been accessed by the newly assigned worker.

An assignment is considered accessed when the newly assigned worker selects the assignment and either clicks on the Tasks... button or selects a command from the Options menu on the Assigned Workload.

If the original assigned worker attempts to access the stage after it has been canceled/reassigned, the following message displays: “Stage has been reassigned. Window will be refreshed.”
Step-by-Step: Canceling Assignments

1. Click on the **WORK** button on the CONNECTIONS Toolbar.  
   *The Assigned Workload displays.*

2. Click on the **Options** menu on the **Assigned Workload** and select the **List Assignments Made…** command.  
   *The List Assignments Made window displays.*  
   If all of the assignments have been accessed, the following message displays instead of the List Assignments Made window:  
   “No Assignments to Retrieve. All Assignments Retrieved by Assigned Worker.”  
   Contact the assigned worker and have the stage reassigned to the appropriate worker.

3. Select the assignment (stage) to be canceled.  
   *If the Primary worker’s assignment is selected when a stage has more than one assignment, the worker performing the cancellation will have the assignment “rights” of the Primary worker.*

4. Click on the **Assign** button.  
   *The Assign window displays.*

5. Select the appropriate staff person’s name from the Available Staff list.

6. Click on the **Primary** or **Secondary** button, as appropriate, to reassign the selected staff person to the stage.  
   *If you select **Primary**, the following message displays: “This action will remove the current Primary worker from the stage. Continue?” Click on the **Yes** button.*  
   CONNECTIONS performs a final check to verify that the stage was not accessed during the cancellation/reassignment process. If the stage was accessed, a message displays, notifying the worker that the save will not be completed.

7. Click on the **Save** button.  
   *The List Assignments Made window displays. The window refreshes after a cancellation/reassignment has been successfully (or unsuccessfully) completed.*

8. Click on the **Close** button to close the **List Assignments Made** window.  
   *The Assigned Workload displays.*

9. To close the Assigned Workload, click on the **Close** button.
The Notice of Existence

You need to provide a Notice of Existence to every subject of the report and any non-culpable parent, guardian or other person legally responsible for the child, within seven days of receiving the report. A Notice of Existence can only be launched if the person selected from the Person List is either a subject (alleged, confirmed or non-confirmed) or a no-role adult named in the case. The Notice of Existence informs recipients that the report has been received by the SCR and has been forwarded to the local district for investigation. A new Notice of Existence is required for each subsequent report. It is important to document the date and method of delivery used when providing each Notice of Existence. Record this information in the Progress Notes tab in the Child Protective Record Summary.

This notice is generated in CONNECTIONS and is pre-filled with the name and address information maintained for the individual.

If you want to provide a Notice of Existence to a person who is not already included in the Person List, you must add that person to the stage via the Maintain Person task (see “Adding or Relating a Person to the Investigation Stage” in Module 2).

Please note: If CONNECTIONS is not able to print the Notice of Existence (or any other system-generated letter), you should complete a manual (off-line) letter and send it to the appropriate individual(s). A copy should also be kept in the case record for future documentation. Remember to document the date and method of delivery for the Notice of Existence in the Progress Notes tab in the Child Protective Record Summary. If it is not possible to print any system-generated letter, contact the Help Desk at 1-800-NYS-1323 (1-800-697-1323) for assistance.

Step-by-Step: Generating the Notice of Existence

1. Click on the WORK button on the CONNECTIONS Toolbar.
   The Assigned Workload displays.

2. Click a stage to select it.
   The Tasks... button enables.

3. Click on the Tasks... button.
   The Task List displays for the selected stage.

4. Click on the Maintain Person task.

5. Click on the List... button.
   The Person List displays for the selected stage.

6. Click on the name of the person who should receive the Notice of Existence.

Before printing the Notice of Existence, make sure that the name and address for the subject are accurate in CONNECTIONS. See the ‘Case Maintenance’ module in this guide for help in reviewing and modifying this information in CONNECTIONS.

A Notice of Existence can be launched only if the person selected from the Person List is a subject or an adult with a role of “None” or “Unknown.”
7 Click on the Forms menu and select either Notice of Existence (English) or Notice of Existence (Spanish), as appropriate. The notice displays as a Microsoft Word document.

8 To print the notice, click on the File menu and select Print. The Microsoft Word print dialog box displays.

9 Click on the OK button. Make sure that you send the Notice of Existence to a printer set up to print on your local district letterhead.

Viewing Information in the Child Protective Record Summary (CPRS)

The Child Protective Record Summary (CPRS) provides demographic information and investigative findings in one place. A single window with multiple tabs allows you to access, view and print CPS case information easily. The window is organized to be consistent with the investigation process. The CPRS provides for the recording of progress notes within the CONNECTIONS application via the Progress Notes tab. All workers with a role in the stage are able to view any progress notes recorded for the stage. Supervisors can use the CPRS to review case information and workers’ progress notes.

Some districts have opted to create their own templates for the Local Protocol tab. Incorporating these locally created templates into CONNECTIONS integrates New York State mandates and local district procedures for investigation and assessment. It also eliminates the need for duplicate entry of case information into external progress notes documents and CONNECTIONS. This results in a more complete online investigation record for each report and an improvement in the quality of case record documentation for CPS investigations.

When an Investigation stage is open, the Child Protective Record Summary window can be accessed in two ways: from the Task List and from the Event List. When an investigation stage is closed, the Child Protective Record Summary window can only be accessed from the Event List.

All state and local staff with the appropriate Business Function Profile (BFP) are able to view the CPRS for a particular investigation. The ability to update information in the CPRS is limited according to your role in the stage and whether the stage is open or closed.
Step-by-Step:
Opening the Child Protective Record Summary (CPRS)

1. Click on the WORK button on the CONNECTIONS Toolbar. 
   *The Assigned Workload displays.*

2. Select the INV stage from the list. 
   *The Tasks... button enables.*

3. Click on the Tasks... button. 
   *The Task List displays for the selected INV stage.*

4. Click on the Child Protective Record Summary task. 
   *The Detail... button enables.*

5. Click on the Detail... button. 
   *The CPRS window displays for the selected stage.*

**Locating Information in the CPRS**

The Child Protective Record Summary window is organized into three sections. The Heading and Button sections contain elements that are present no matter which section of the CPRS is being used. The Tabs section comprises the main body of the CPRS.
**The Heading**

The heading is always present when the CPRS is open. It includes the following information: Case Name, Case ID, INV Stage ID, Report Date and Stage CD (Community District). The INV Stage ID refers to the stage that was highlighted on the Assigned Workload when the CPRS was opened. The Stage CD will display only for NYC stages.

In addition, a High Priority label will display in the CPRS header for any NYC stage that contains High Priority Factors.

**The Footer**

The footer is always present when the CPRS is open. It contains four buttons:

- **Intake Narrative**: This button opens a window for viewing the narrative recorded at Intake.
- **Help on Narratives**: This button opens the CPRS Online Help function, which you can use to view technical and policy information to help you complete particular narratives in the CPRS.
- **Generate Report**: This button opens the Generate Report window, where you can select one, several or all tabs for inclusion in a pre-formatted report of information contained in the CPRS.
- **Close**: This button closes the CPRS, returning you to the **Task List**.

**The Tabs**

The information contained in the Tabs section of the CPRS is organized as file tabs. Clicking on the associated tab accesses specific case information. Tabs can be accessed in any order.

- **Case Identification**: This tab includes two grids. The upper grid details all of the Investigation, Intake (both Child Protective and Family Services) and Family Services and Administrative Review stages (open or closed) associated with the selected case. For each stage, the following information will display in the grid: Stage ID, Stage Name, Stage (INT, INV, FSI, FSS or ARI), Stage Type (INI or SUB for INT or INV stages; CWS for FSI or FSS stages), Stage Opened (Date), Stage Closed (Date), Reason Stage Closed, Stage Classification, Determination, and CD (for NYC cases).

- **Household Composition**, **Allegations**, **Investigative Actions** and **Investigative Findings** tabs are view-only. To update the information on any of these tabs, you must close the CPRS and open the appropriate CONNECTIONS window(s).

CPRS Help provides the path to the appropriate window(s).
The lower grid displays all workers associated with the stage selected in the upper grid. For each worker, the following information displays: Worker Name, Role, Telephone Number (with area code and extension) and District or Regional Office.

When the Case Identification tab is opened, the stage that was selected on the Assigned Workload (or, in the case of a closed stage, the stage for which the Event List was opened) is highlighted. This is the only tab of the CPRS that contains information for more than one stage. Information on the other tabs is specific to the INV stage listed in the heading.

The Household Composition tab lists all individuals involved in the INV stage listed in the heading.

This tab includes two grids. The upper grid includes the following information for each person in the stage: Name, Person ID, Relationship/Interest, Date of Birth (DOB), Sex, Role, Ethnicity, Race, Language, Social Security Number (SSN) and Religion.

An Address ID number displays to the left of each line in the upper grid, linking the person with one of the addresses displayed in the lower grid.
The lower grid contains address and phone number information for all individuals involved in the stage. When you click on a person’s name in the upper grid, that person’s address information highlights in the lower grid. Even if more than one person listed in the upper grid lives at an address, each address appears in the lower grid only once. Each address has an “Address ID” number which also displays in the upper grid, linking each person with one of these addresses. This allows you to see all persons living at the same address.

Allegations

The Allegations tab lists all allegations for the report.

This tab includes two grids. The upper grid lists all of the allegations listed in the report. For each allegation, the following information is provided (appearing in the grid from left to right): the name of the MA/AB child, that child’s Person ID, the name of the Subject of the allegation, the Subject’s Person ID, the allegation, the associated decision (unsubstantiated or substantiated, labeled UNSUB/SUB) and the stage in which the allegation was recorded.
When you click on an allegation in the upper grid, the lower grid displays the injuries associated with that allegation. If no injuries are associated with the selected allegation, the tab displays the following message in place of the lower grid:

“No injuries exist for this allegation.”

If comments have been recorded for a particular injury, a check mark displays in the Comments column in the lower grid. Double-click on that injury to open the Injury Comments window.

This tab also contains a Reporter/Source button, which opens the Reporter/Source window. This window displays the Name, Relationship, Address and Phone information for the Reporter and Source of the report. This window is view-only. In order to open this window, your BFP must include the VIEW RPTR/SOURC Business Function.

This tab displays the Investigative Actions checklist for the stage. The Response column indicates whether the action listed on that line was completed. The Comments column displays a check mark if comments were recorded for that action. Double-click on a particular Investigative Action to open the Investigative Actions Comments window and view any comments recorded for that action.

If the Investigation Actions task has not been completed, nothing displays on this tab.
Investigative Findings

This tab displays the information recorded on the CPS Investigation Conclusion window. (See “The CPS Investigation Conclusion Window” on page 266.) In addition, the Final Risk Rating from the RAP will display on this tab. If any Elevated Risk Elements are selected in the RAP, an “Elevated Risk Exists” label will display on this tab.

This tab also includes a View Narrative button for opening the Investigation Conclusion narrative in view-only format.

If you click on the button and no narrative was recorded, the following message displays: "Investigative Findings Not on File."
Local Protocol

This tab provides you with a district-specific template for recording information required by their local district’s policy and procedures. This tab is enabled only for those districts that have submitted a template. (As of this writing, these districts are ACS, Delaware, Erie, Putnam and Suffolk.) The tab is disabled for all other districts. For detailed information about this functionality, see “Local Protocol Tab” on page 102.

Safety Assessment

This tab lists all Safety Assessments recorded for the stage. From this tab, you can:

- create a new Safety Assessment;
- modify/view/print an existing Safety Assessment;
- assign a Safety Assessment Task To-Do to another worker;
- submit a completed Safety Assessment for approval; and
- view the approval status of a submitted Safety Assessment.

For detailed information about this functionality, see “Completing a Safety Assessment” in Module 9.

Risk Assess Profile

The Primary worker assigned to the stage uses this tab to record the Risk Assessment Profile for the stage. For detailed information about this functionality, see “The Risk Assessment Profile” in Module 9.
Progress Notes  
This tab lists all progress notes recorded for the stage. From this tab, you can:
- create new progress notes;
- modify/view/print existing progress notes;
- copy progress notes to another stage in the same case; and
- assign a progress notes Task To-Do to another worker.
For detailed information about this functionality, see “Recording Progress Notes” in Module 9.

Local Protocol Tab

The Local Protocol tab is used by those districts that have submitted a district-specific template (ACS, Delaware, Erie, Putnam and Suffolk) for recording additional investigation information. If the Primary worker’s district is not using a template, the Secondary worker will not be able to use a template either. The Primary worker’s district takes precedence over the Secondary worker’s district. See the table below for more information about the availability of the Local Protocol tab.

Districts using the Local Protocol template still need to complete progress notes using the Progress Notes tab. The Local Protocol templates only contain additional information that is not included as part of the narrative or data fields on the Progress Notes tab and that is not included anywhere else in CONNECTIONS. For example, ACS workers will use the Casework Practice Recording Template (CPRT) available on the Local Protocol tab to record information such as domestic violence screening.

When you access the Local Protocol tab for the first time, the Local Protocol template displays. If you remain on the tab after the initial save, clicking on the Edit Narrative button in the middle of the tab reopens the document for viewing or editing. If you leave the Local Protocol tab, or close and reopen the CPRS, the Local Protocol narrative will display when you access this tab again.

The table below illustrates how the availability of the Local Protocol tab (and any information it may contain) is affected when a stage is reassigned from one local district to another. In the table, District A is the originally assigned (“previous”) district and District B is the newly assigned (“new”) district for the stage.

<table>
<thead>
<tr>
<th>District A</th>
<th>District B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HAS a Local Protocol Template (information recorded)</strong></td>
<td><strong>Does NOT Have a Local Protocol Template</strong></td>
</tr>
<tr>
<td>District A’s template will continue to be used for the life of the investigation.</td>
<td>District B will be able to access the Local Protocol tab in view-only mode to view the formatted information recorded by District A.</td>
</tr>
<tr>
<td><strong>Does NOT Have a Local Protocol Template</strong></td>
<td><strong>The Local Protocol tab will be enabled and will contain District B’s Local Protocol template.</strong></td>
</tr>
<tr>
<td><strong>The Local Protocol tab will be disabled for both districts, since no Local Protocol template exists.</strong></td>
<td></td>
</tr>
</tbody>
</table>
The CPRS Generate Report Function

The **Generate Report** button in the CPRS Footer opens the *Generate Report* window. From this window, you can select the specific CPRS tab(s) you want to print by clicking on the corresponding checkbox(es). To print all information in the CPRS (except progress notes); click on the **Select All** checkbox.

![Generate Report Window](image)

The **Local Protocol** checkbox enables only if your district has submitted a Local Protocol template. (See “Local Protocol Tab” on page 102 for information about the Local Protocol functionality.)

This window is *not* to be used for printing progress notes or individual Safety Assessments. Use the **Progress Notes** tab and **Safety Assessment** tab, respectively, to print these items.

The Open Case Inquiry (OCI) Report

The Open Case Inquiry (OCI) Report lists and identifies the status of all Safety Assessments and Investigation Conclusions that a worker needs to complete. The list is organized by case and includes all open cases that have been progressed to the Investigation stage for which the worker is the Primary worker. It provides a snapshot of information about a worker’s **Assigned Workload**, including the total number of open investigations, cases and overdue 7-day Safety Assessments and Investigation Conclusions.

**Step-by-Step: Generating the OCI Report**

1. Click on the **WORK** button from the CONNECTIONS Toolbar.
   *The Assigned Workload displays.*
2 Click on the **Reports** menu and select **OCI by Worker**.
   *The following message displays:*
   *“The Report has been launched. Check Report List Window.”*

3 Click on the **OK** button.

4 Click on the **RPRTS** button on the CONNECTIONS Toolbar.
   *The Report List displays.*

5 Select the OCI Report you just generated.

6 Click on the **Open** button.
   *The report opens as a Microsoft Word document.*

7 To close the document window, click on the **File** menu and select **Close**.
Module 8:  
Case Maintenance

You will gather a great deal of information on people in a case during the course of an investigation. The Maintain Person task in CONNECTIONS provides access to a number of windows where you record this information. New York State and other agencies rely on workers like you to use CONNECTIONS to record your case activities and the information you discover during your investigation, so that others can make use of that information in the future.

In the previous module, you learned how to find a wealth of information already maintained in CONNECTIONS. In this module you will learn how to add the information you gather during the course of your investigation to CONNECTIONS so it can be viewed later.

By the end of this module, you will be able to:

- add or relate a person to a stage;
- update information about people in a case (personal information, name or alias, address and phone numbers);
- change the case name;
- merge and split persons;
- merge and split cases;
- consolidate duplicative open investigations; and
- correct erroneous information in a closed stage/case.
Adding or Relating a Person to the Investigation Stage

During the course of an investigation, you may identify an individual who should be added or related to the investigation.

Who can be added to a stage?

Prior to adding anyone to a stage, it is necessary to establish if the individual is required by law (Social Services Law §412.4 and Family Court Act §1012.g) to be added to the stage (e.g., other persons named in the report, including non-culpable parents, guardians or other persons legally responsible and other children in the household).

Before you add or relate an individual, you need to conduct a Person Search to determine if the person is known to CONNECTIONS. When individuals are “related” in an Investigation stage, the historical person selected in the Person Search is added to the current Investigation stage. If the person is not known to CONNECTIONS, add the person as a new record. The Person Search is an important step because it helps avoid creating duplicate records.

Step-by-Step: Opening the Person Search Window via the Maintain Person Task

1. Click on the WORK button on the CONNECTIONS Toolbar.
   *The Assigned Workload displays.*

2. Click on a stage to select it.
   *The Tasks... button enables.*

3. Click on the Tasks... button.
   *The Task List displays for the selected stage.*

4. Click on the Maintain Person task.

5. Click on the List... or New button.
   *The Person List displays for the selected stage.*

6. Click on the New button.
   *The Person Search window displays.*

Once you have opened the Person Search window, conduct a person search on the individual you want to add to the stage. Step-by-step instructions are detailed in “Conducting a Phonetic Name Search within a Stage” on page 56. See “Searching by Name” on page 47 for information about conducting effective person searches.

Search results display on the Person Search List in the lower half of the Person Search window. Review the results carefully to determine whether the person you are searching for is already known to CONNECTIONS.
Step-by-Step: Reviewing Person Search Results

1  Review the potential matches on the Person Search List and determine if any of them is the person you wish to relate/add.

2  If you find the person, continue with Relating a Person on page 108.

   —OR—

   If you do not find the person, continue with Adding a New Person Record on page 108.
   You may want to revise your search to narrow your search parameters.

See “Viewing Detailed Information about a Person” on page 53.

Person Relate
To minimize the occurrence of misrelates when you attempt to relate two people in the system, CONNECTIONS generates warnings if any of the following conditions are present:

- There is a DOB/age discrepancy of more than five years between the two persons.
  The following warning displays:
  “DOB varies by >5 years between Individuals. Do you wish to continue?”

- There is a gender mismatch between the two persons.
  The following warning displays:
  “Sex Mismatch between Individuals. Do you wish to continue?”

- The relationship/interest is Foster Parent (FP) for one person and not the other.
  The following warning displays:
  “Relating Individuals with a different Rel/Int. Do you wish to continue?”

- There is a role mismatch between the two persons being related.
  The following warning displays:
  “Relating a FAD and CPS Individual. Do you wish to continue?”

- There is a county mismatch between the two persons.
  The following warning displays:
  “Individuals do not reside in the same district. Do you wish to continue?”

- If the system recognizes more than one condition, the following warning displays:
  “More than one relate mismatch. Do you wish to continue?”

You can print the results of your Person Search at any time from the Person Search List by clicking on the Forms menu and selecting Person Search List.

The Person Relate function supports relating individuals in the FSI or FSS as well as INV stages.

If the Relate was done in the FSI or FSS, the information is not automatically updated in the CPS INV stage.

To synchronize this information, the CPS Primary worker needs to relate the person in the INV stage (if the INV stage is currently open).

If the INV stage is closed, the worker needs to relate the person through the Local Data Maintenance window.
These warnings display to alert you of potential conflicts; you need to evaluate the information carefully and determine if it is appropriate to proceed with Relating the individual. These warnings do not prevent you from completing the Relate function.

**Step-by-Step:**
**Relating a Person**

1. From the Person Search List, click on the name of the historical person you want to relate.

2. Click on the **Relate**… button.
   
   *If you receive a warning, review the information. Select **Yes** to continue, or **No** if you no longer wish to relate. If you click on the **Yes** button, the Person Detail window displays for the selected person.*

3. In the Current Stage section, identify the person’s Type for the current stage by clicking on the drop-down arrow for the **Type** field and selecting **PRN** (Principal) from the resulting list.

4. In the **Rel/Int** field, indicate the person’s relationship to the case by clicking on the drop-down arrow and selecting from the resulting list.

5. Update the record with any demographic information you have that is more current than what is already in CONNECTIONS. You record most of this information by clicking on the drop-down arrow for each field and selecting from the resulting list. If a field has no drop-down arrow, type directly into the field.

6. When you are done updating the Person Detail window, click on the **Save** button.
   
   *The Person List displays. The person you related has been added to the Person List. You may also need to update other information about the person. See “Maintaining Information about People in the Case” on page 110 for more information.*

**Step-by-Step:**
**Adding a New Person Record**

1. From the Person Search window, click on the **New** button.
   
   *The Person Detail window displays, pre-filled with the information you included in your search.*

2. Click on the drop-down arrow for the **Type** field and select **Principal** or **Collateral** from the resulting list, as appropriate.
Click on the drop-down arrow for the **Rel/Int** field and select the applicable relationship/interest value from the resulting list.

In the demographics section, click on the drop-down arrows for the **Sex**, **Marital**, **Religion** and **Language** fields and select from each resulting list.

In the **DOB** field, record the date of birth by either typing the information directly into the field (in mm/dd/yyyy format) or by using the arrow keys in the field.

Click on the drop-down arrow for the **Ethnicity** field and select either **Hispanic or Latino origin** or **Non-Hispanic or Latino Origin**.

*If you select **Hispanic or Latino Origin**, the **Hispanic or Latino Origin** field enables.*

If you selected **Hispanic or Latino Origin** in the **Ethnicity** field (see Step 6 above), select the appropriate Hispanic or Latino Origin(s) by double-clicking an origin in the list box.

*Multiple origins may be selected. Use the vertical scroll bar within the list box to see and select additional origins.*

In the **Race** field, double-click a race select from the list box.

*Multiple races may be selected. Use the vertical scroll bar within the list box to see and select additional races.*

In the **Address** section, record the person’s address in the appropriate fields.

When you have recorded the address, click on the **Validate** button.

*CONNECTIONS runs address validation. For more information about address validation, see page 115.*

In the **Phone** section, record the person’s phone number, extension (if applicable) and type (e.g., residential, cell phone) in the appropriate fields.

When you have finished recording information for this individual, click on the **Save** button.

*The Person List displays with the person you added now included in the list.*

To record additional information for the person, such as aliases or a WMS Client Identification Number (CIN), see “Maintaining Information About People in a Case” on page 110.

The **Role** field is pre-filled with “No Role” in the **Person Detail** window. To change a role to “Alleged Subject” follow the steps below:

**Step-by-Step:**

**Changing a Person’s Role to “Alleged Subject”**

1. From the **Task List**, select **Maintain Allegation**.

2. Click on the **New** button

*The Allegation List displays.*
3  Click on the **New** button.  
*The Allegation Detail window displays.*

4  Complete the fields on the window by clicking on the drop-down arrow for each field and selecting from the resulting list. The fields you must complete at this time are highlighted in yellow: **MA/AB Child, Allegation** and **Alleged Subject.**

5  Click on the **Save** button.  
*The Allegation List displays.*

*For a more detailed look at the allegation maintenance process, see “Maintaining Allegations” in Module 9.*

### Maintaining Information About People in a Case

During the course of an investigation, you gather information about people associated with the case. When that information differs from what is already contained in CONNECTIONS, record the new information using the **Maintain Person** task. Use this function to record demographic, address and phone information.

The **Maintain Primary Address and Phone** task provides a single window that enables you to add or modify primary address and phone information for multiple persons in an Investigation stage. You can also use this task to select an existing primary address or phone number for a person you are adding to a stage.

In CONNECTIONS, a person may have only one valid primary name, address or telephone number at a time. The individual may, however, have a number of other addresses or telephone numbers. When you add a new address or telephone number and indicate that it is now the primary, the previously listed primary is automatically end-dated.

Due to the requirement to maintain historical information, you cannot delete or modify existing names, addresses or phone numbers. Use the following guidelines when updating records:

- **Outdated information is noted by the end date.** For example, the family has moved or the mother has a new last name.
- **Incorrect entries are marked as Invalid.** For example, the original name or address was never correct. When the Invalid checkbox is selected, that entry no longer returns as a search result.

#### Step-by-Step: Opening the Person List to Update Information

1  Click on the **WORK** button on the CONNECTIONS Toolbar.  
*The Assigned Workload displays.*

2  Click on a stage from the list.  
*The Tasks... button enables.*
3. Click on the **Tasks**… button. 
   *The Task List displays for the selected stage.*

4. Click on the **Maintain Person** task.

5. Click on the **List**… button. 
   *The Person List displays for the selected stage.*

The steps you take at this point depend upon what you want to add or change. The following section groups these steps by larger tasks.

**Changing Person Demographics**

Use the *Person Detail* window to record a person’s sex, ethnicity, marital status, primary language, date of birth (DOB), age, occupation and, if applicable, date of death (DOD) and reason. The Investigation Conclusion cannot be saved and submitted without DOB information; if you attempt to Save and Submit without this information, the following message displays: “Each principal in the Investigation must have an exact or estimated DOB.”

<table>
<thead>
<tr>
<th>Step-by-Step: Updating the Person Detail Window</th>
</tr>
</thead>
</table>
| **1** From the Person List, click on the name of the person whose record you want to update.  
 *If you are recording information for the first time, see the “Case Maintenance” module in this guide for details on adding or relating a person.* |
| **2** If information is already recorded for this person, click on the **Detail**… button.  
 *The Person Detail window opens for the selected individual.* |
| **3** Click on the drop-down arrow for each field and make a selection from the resulting list. If a field does not have a drop-down arrow, type directly into the field. |
| **4** To save what you have recorded, click on the **Save** button.  
 *The Person List displays.* |
Adding or Correcting a Person’s Name or Alias

In CONNECTIONS, a person can have both a primary name—the person’s legal name, or the name s/he is now using—and any number of non-primary names, or AKAs. An AKA could be an alias or street name, Common Law assumed name, maiden name or former name.

In CONNECTIONS you add or maintain multiple names for a person in the A.K.A. Name List/Detail window. A person can have only one primary name; when you add a new primary name, CONNECTIONS automatically end-dates the existing one. Because of the need to maintain accurate historical information in CONNECTIONS, you should never delete names and never invalidate names that were once, but are no longer, used for the person. Names should be invalidated only if they were never correct for the person.

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<table>
<thead>
<tr>
<th>Step-by-Step: Adding or Correcting a Person’s Name or Alias</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 On the Person List, click on the name of the person whose record you wish to update.</td>
</tr>
<tr>
<td>2 Click on the Options menu and select the A.K.A. Name List/Detail… command. The A.K.A. Name List/Detail window displays for the selected person.</td>
</tr>
<tr>
<td>3 To change the primary name or add an alias, type in the new information in the bottom part of the window.</td>
</tr>
<tr>
<td>4 If the new name is the primary name, select the Primary checkbox.</td>
</tr>
<tr>
<td>5 Click on the Add button. The new name is added to the list of names on this window and identifies it as primary, if appropriate. CONNECTIONS also automatically end-dates any existing primary name.</td>
</tr>
<tr>
<td>6 If any name in the list section is invalid, highlight that name and check the Invalid checkbox, then click on the Modify button. A red check mark displays in the INV column in the list section at the top of the window, signifying that the name has been invalidated.</td>
</tr>
<tr>
<td>7 Click on the Save button. The Person List window displays. If you changed the primary name for the person, the Person List reflects that change.</td>
</tr>
</tbody>
</table>

“Invalid” means that the name was never correct—that it was recorded in CONNECTIONS incorrectly.

Do not invalidate a misspelled name if it is one that is a common misspelling (for example Stephen, Steven, Steve, Stephan). This will increase the chance of the name returning as a match in searches. Only invalidate misspelled names if they are clearly wrong, like “Gelen” for “Helen.”
Adding or Correcting Person Identifier Numbers

CONNECTIONS enables you to record various identification numbers, such as a Social Security Number (SSN) or WMS Client Identification Number (CIN). This information is recorded in the **Person Identifiers** window.

### Step-by-Step: Adding or Correcting Person Identifier Numbers

1. On the **Person List**, click on the name of the person whose record you wish to update.
2. Click on the **Options** menu and select the **Person Identifiers…** command. The Person Identifiers window displays for the selected person.
3. Select an ID type by clicking the drop-down arrow for the **Type** field and selecting from the resulting list. *If you choose “Other” as the type, you must enter Comments.*
4. Type the ID number into the **Number** field.
5. Click on the **Add** button.
6. To change an existing Person Identifier, highlight that number from the list, make any changes and click on the **Modify** button.
7. Click on the **Save** button. *The Person List displays.*

Maintaining a Person’s Address or Phone Number

When a family moves to a new address or changes the phone number, you need to reflect this change in CONNECTIONS. When you record a new primary address or phone number in the system, CONNECTIONS automatically end-dates any existing primary address or phone number, as applicable. If you notice an address or phone number in CONNECTIONS that was **never** accurate, you need to invalidate the address or phone number.

There are four locations where you can maintain address and/or phone information for an individual:

- The Person Detail window
- The Maintain Primary Address and Phone window
- The **Address** window
- The **Phone** window

If a person is being related or added to a stage, but that individual does **not** reside in the household (e.g., a biological parent who does not live with the child), it is usually more efficient to maintain the address and/or phone information for this individual in the **Person Detail** window.
If a person who lives in the household is being related or added to a stage, the Maintain Primary Address and Phone window enables you to maintain this information efficiently, while reducing the likelihood of data entry error. The Maintain Primary Address and Phone window also provides an efficient method for updating this information for several individuals in a household (e.g., when the family moves to a new address).

To correct a person’s address or phone number using the Person Detail window, follow the step-by-step instructions below. To correct address or phone information via the Maintain Primary Address and Phone window, following the step-by-step instructions on page 114.

**Step-by-Step: Updating or Correcting a Person’s Address or Phone Number (Person Detail Window)**

1. From the Assigned Workload, select the stage to be updated. The Tasks... button enables.

2. Click on the Tasks... button. The Task List displays.

3. Click on the Maintain Person task. The List... button enables.

4. Click on the List... button. The Person List displays.

5. Click on the name of the person whose address or phone information needs to be updated or corrected.

6. Click on the Detail... button. The Person Detail window displays.

7. Record the updated/corrected address or phone information in the Address and Phone section, as appropriate, at the bottom of the Person Detail window.

8. If you record address information, click on the Validate button. Address validation verifies the accuracy of the address and formats the information to be compatible with US Postal Service standards. (See page 115 for information about address validation.)

9. Click on the Accept button to accept the validated address.

10. Click on the Save button. The Person List displays.

**Step-by-Step: Updating or Correcting a Person’s Address or Phone Number (Maintain Primary Address and Phone Window)**

1. From the Assigned Workload, select the stage to be updated. The Tasks... button enables.
2 Click on the Tasks… button.
The Task List displays.

3 Click on the Maintain Primary Address and Phone task.
The Detail… button enables.

4 Click on the Detail… button.
The Maintain Primary Address and Phone window displays.

5 To record a new address or phone number manually, enter the new information in the appropriate fields in the Primary Address Information and/or Primary Phone Information sections in the upper half of the window.
To link an individual to a pre-existing case address, skip to Step 9 below.

6 Click on the Validate button.
CONNECTIONS performs address validation. This process validates address information and formats it to be compatible with U.S. Postal Service standards. All addresses must be validated in CONNECTIONS. If there is a discrepancy between the validated address and the address you recorded, a message displays showing both addresses for comparison. If a message displays stating that the address is invalid, click on the OK button, correct the address information and run address validation again by clicking on the Validate button.

7 Click on the Accept button to replace the recorded address with the validated address, or click on the Reject button to use the recorded address.

8 When you have finished recording information in this window, skip to Step 14 below.

9 To link an individual to a pre-existing case address, select a person who had the correct address from the list in the lower section of the window by clicking on any field in that person’s row.

10 Right-click (click with the right mouse button) over your selection.
A shortcut menu displays with the following commands:

- Use Primary Address
- Use Primary Phone
- Use Both Address and Phone
11 Select a command from the shortcut menu. 
*The Address and/or Phone information (depending on the command you selected)* 
displays in the appropriate fields. *This information can be modified if it is not* 
applicable to the person.

12 If you selected either **Use Primary Address** or **Use Both Address and Phone** from 
the shortcut menu, click on the **Validate** button. 
**CONNECTIONS performs address validation.** 
*(See page 115 for information about address validation.)*

13 To link this address to one or more individuals listed in the lower section, click on the 
box to the left of an individual’s name. To select more than one individual, press and 
hold the **Ctrl** key while clicking on the box to the left of the person’s name. 
*Selected individuals highlight.*

14 Click on the **Save** button. 
*The following message displays: “Changes Have Been Saved.”*

15 Click on the **OK** button. 
*The Maintain Primary Address and Phone window refreshes, displaying the* 
modifications.

16 Click on the **Cancel** button. 
*The Task List displays.*

17 Click on the **Close** button to close the **Task List.** 
*The Assigned Workload displays.*

18 To close the **Assigned Workload,** click on the **Close** button.

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<table>
<thead>
<tr>
<th>Step-by-Step: Invalidating a Person’s Address</th>
</tr>
</thead>
</table>
| 1 Click on the **WORK** button on the **CONNECTIONS Toolbar.** 
*The Assigned Workload displays.* |
| 2 Click on the stage to be updated. 
*The **Tasks...** button enables.* |
| 3 Click on the **Tasks...** button. 
*The Task List displays for the selected stage.* |
| 4 Click on the **Maintain Person** task. 
*The **List...** button enables.* |
| 5 Click on the **List...** button. 
*The Person List displays.* |
| 6 Click on the name of the person whose address needs to be invalidated (because the address was **never** correct). |

Addresses should be invalidated *only if they were never correct.* 
Addresses that were correct but have changed are *end-dated.*
7 Click on the Options menu and select the Address List/Detail... command. 
   *The Address List/Detail window displays.*

8 Click on the address that needs to be invalidated (because it was *never* correct) from the list section at the top of the window. 
   *The selected address information fills in the fields in the detail section in the lower portion of the window.*

9 Click on the Invalid checkbox to select it.

10 Click on the Modify button. 
   *The address is recorded as “Invalid,” end-dated and stored for historical purposes. In the list section at the top of the window, the INV column contains a red check mark next to the invalidated address.*

11 Click on the Save button. 
   *The Person List displays.*

12 To close the Person List, click on the Close button. 
   *The Task List displays.*

13 To close the Task List, click on the Close button. 
   *The Assigned Workload displays.*

14 To close the Assigned Workload, click on the Close button.

---

**Step-by-Step:**

**Invalidating a Person’s Phone Number**

1 Click on the WORK button on the CONNECTIONS Toolbar. 
   *The Assigned Workload displays.*

2 Click on the stage to be updated. 
   *The Tasks... button enables.*

3 Click on the Tasks... button. 
   *The Task List displays for the selected stage.*

4 Click on the Maintain Person task. 
   *The List... button enables.*

5 Click on the List... button. 
   *The Person List displays.*

6 Click on the name of the person whose phone number needs to be invalidated (because the information was *never* correct).

7 Click on the Options menu and select the Phone List/Detail... command. 
   *The Phone List/Detail window displays.*

8 Click on the phone number that needs to be invalidated (because it was *never* correct) from the list section at the top of the window.

---

Phone numbers should be invalidated only if they were *never* correct. 

Phone numbers that were correct but have changed are end-dated.
The selected phone information fills in the fields in the detail section in the lower portion of the window.

9 Click on the Invalid checkbox to select it.

10 Click on the Modify button.

11 The phone number is recorded as “Invalid,” end-dated and stored for historical purposes. In the list section at the top of the window, the INV column contains a red check mark next to the invalidated phone number.

12 Click on the Save button.
The Person List displays.

13 To close the Person List, click on the Close button.
The Task List displays.

14 To close the Task List, click on the Close button.
The Assigned Workload displays.

### Changing a Person’s Role

There are situations in which an individual may be associated with a stage, but that person’s role is not accurate or must be changed in order to conclude the investigation. For example, a person may have an “Unknown” role. If, in the course of investigating the report, you find that no allegations are or can be associated with this individual, you need to change the person’s “Unknown” role to “No Role.” CONNECTIONS prevents you from saving and submitting the Investigation Conclusion as long as any individual in the stage has an “Unknown” role.

Only the following individuals can change a person’s role:

- Primary worker
- Secondary worker
- An individual in the Primary or Secondary worker’s Unit Hierarchy

You can only make these role changes in the Person Detail window:

- Unknown ▶ No Role
- Confirmed Maltreated ▶ Confirmed Abused
- Confirmed Abused ▶ Confirmed Maltreated (unless the child is associated with Sexual Abuse or Fatality allegations)
- Non-Confirmed Abused ▶ Non-Confirmed Maltreated (unless the child is associated with Sexual Abuse or Fatality allegations)
- Non-Confirmed Maltreated ▶ Non-Confirmed Abused
- Non-Confirmed Abused ▶ Reported in Error (see “Person Reported in Error” on page 120 for security dependencies)
Changing a person’s role affects the Investigation stage only; the original role information remains intact in the “frozen” Intake stage.

### Step-by-Step: Changing a Person’s Role

1. Click on the **WORK** button on the CONNECTIONS Toolbar. *The Assigned Workload displays.*
2. Click on the stage containing the person whose role is to be changed. *The Tasks... button enables.*
3. Click on the **Tasks...** button. *The Task List displays.*
4. Click on the **Maintain Person** task. *The List... button enables.*
5. Click on the **List...** button. *The Person List displays.*
6. Select the person whose role is being changed.
7. Click on the **Detail...** button. *The Person Detail window displays.*
8. Click on the drop-down arrow for the **Role** field and select an appropriate role from the resulting list.
9. Click on the **Save** button. *The following message displays: Unsubstantiated/Undetermined allegations will be deleted. Continue?*
10. Click on the **Yes** button. *The Person List displays with the updated information in the Role column.*
Person Reported in Error

The previous section addressed the ability to change an individual’s role in CONNECTIONS. A specific type of role change is required if a person is associated with a stage at Intake, but during the course of the investigation, you determine that the person should never have been associated with the stage; the individual was “reported in error.”

For example, the reporter tells the SCR Intake worker that four children reside in the household, including a teenager named Tommy and a child named Mina. The reporter has never seen Mina, but has heard the mother yelling at her and threatening to beat her. When the local district worker visits the home during the investigation, she learns that only two children reside in the household. Tommy is the 18-year-old delivery boy for the local grocery store and Mina is the family’s dog. Both Mina and Tommy would be considered “Reported in Error.” In addition, since Tommy is at least 18 years old, he is entitled to receive certain information, which is limited to the report itself and the portion of the case record that confirms he was reported in error.

If a person was reported in error during the Intake stage of a case, that person’s role can be changed to “Reported in Error” during the Investigation stage. Only the following individuals can select this new role:

- Primary worker
- Secondary worker
- Unit Approver (in the Primary worker’s, Secondary worker’s or Case manager’s unit) or someone with a role above that of the Unit Approver in that unit

In order to change a person’s role to “Reported in Error,” all of the following conditions must also be met:

- The person must have been reported during the Intake stage.
- The person cannot be associated with any substantiated allegations.
- There must be at least one other allegation which does not involve the person whose role is being changed to “Reported in Error.”
- Your BFP must include the “Reported in Error” Business Function. (If you are a Unit Approver or someone with a role above that of the Unit Approver, the BFP must also include the “Unit Access Summary” Business Function.)
Pre-existing Notification events (e.g., a Notice of Existence) generated for this person do not prevent changing the role to “Reported in Error.” The district is responsible for sending manually generated letters notifying the person of the role change. Once the change is complete, the following notifications can no longer be system-generated for the person whose role was changed to “Reported in Error”:

- Notice of Existence
- Notice of Indication
- IAB Notification Letter
- IAB Indicated Letter
- IAB Unfounded Letter

**Step-by-Step: Changing a Person’s Role to “Reported in Error”**

1. Click on the **WORK** button on the CONNECTIONS Toolbar.  
   *The Assigned Workload displays.*

2. Click on the stage containing the person whose role is to be changed.  
   *The Tasks... button enables.*

3. Click on the **Tasks...** button.  
   *The Task List displays.*

4. Click on the **Maintain Person** task.  
   *The List... button enables.*

5. Click on the **List...** button.  
   *The Person List displays.*

6. Select the person whose role is being changed.

7. Click on the **Detail...** button.  
   *The Person Detail window displays.*

8. Click on the drop-down arrow for the **Role** field and select **Reported in Error** from the resulting list.

9. Click on the **Save** button.  
   *The following message displays: “Unsubstantiated/Undetermined allegations will be deleted. Continue?”*

10. If the person was not reported during Intake, the following message displays: “Person not in Intake. Cannot change role to Reported in Error.”  
    If no other allegations are associated with another person, the following message displays: “A subject and MA/AB child must remain. Cannot change to Reported in Error.”
The allegations associated with this person will be deleted when the change is complete. A recalculation of overall roles and determination occurs when a person’s role is changed to “Reported in Error.”

Changing a person’s role to “Reported in Error” changes how and where that person is listed in CONNECTIONS:

- “XE” displays in the Role column for that person on the Person List.
- If a person’s only role in a case is “Reported in Error,” that individual’s name does not display on the Case Composition window.
- The person’s name still returns in a person search.

**Person Unrelate**

The Person Unrelate function enables designated workers to unrelate an individual who was related in error during the Intake stage. This function is performed in an open Investigation stage from the Person List.

When a Person Unrelate is performed, the misrelated person (and the information associated with that individual) no longer appears in the Intake or other associated stages. A new person record with a new Person ID (PID) is created in the CONNECTIONS database using the information reported during the Intake.

In order to perform a Person Unrelate, you must:

- be the Primary or Secondary worker; OR
- be the Unit Approver or have a role above that of the Unit Approver in the unit of the Primary or Secondary worker; OR
- be assigned the ACCESS ALL DIST and CASE/PERS SRCH Business Functions (allowing access through a Case Search).

In order to maintain accurate data for the person, you are responsible for correcting necessary demographic information prior to performing a Person Unrelate. Performing a Person Unrelate changes a person's role. If the individual received a notice prior to the Unrelate, the local district should send a new notice with the correct information. Notices should also be sent whenever a new subject or person over 18 is added to a stage.
Step-by-Step: Unrelating a Person

1. Click on the **WORK** button on the CONNECTIONS Toolbar.
   *The Assigned Workload displays.*

2. Select the appropriate stage by clicking on it.
   *The Tasks… button enables.*

3. Click on the **Tasks…** button.
   *The Task List displays.*

4. Click on the **Maintain Person** task.
   *The List… button enables.*

5. Click on the **List…** button.
   *The Person List displays.*

6. Select the person to be unrelated.

7. Click on the **Options** menu and select the **Person Unrelate…** command.
   *See the tip box at right for warnings and error messages that may display.*
   *Once you have responded to any warnings, the following message displays:*
   “Are you sure that you want to unrelate this person?”

8. Click on the **Yes** button to complete the Person Unrelate process.
   *The Person List displays.*
   *To return to the Person List without performing the Person Unrelate, click on the **No** button.*

9. Click on the **Close** button to close the **Person List**.
   *The Task List displays.*

10. Click on the **Close** button to close the **Task List**.
    *The Assigned Workload displays.*

An Unrelate event is created for the associated Investigation stage. The following information displays in the **Description** column on the **Event List** for such an event:
“<PID> was unrelated from <PID>.”

An Alert is also generated to the **Staff To-Do List** of every worker assigned to an open stage that involves the misrelated person. The alert notifies you that a Person Unrelate occurred: “<Name> (<PID>) was unrelated from <Stage Name> (<Stage ID>).”

Once the Person Unrelate is complete, “U” displays in the **SCH** column on the **Case List**, signifying that an unrelate has occurred. These changes are also reflected on the Person Data Report and the Intake/IRI Report.

**Person Unrelate Warnings and Error Messages**

If the person selected was not reported during Intake, the following message displays:
“Person not in Intake. Cannot Unrelate. Choose Remove Person – Added in Error.”

When demographic information for the person was changed after the date of the Intake, the following message displays:
“Changes made to Person in this stage should be reset before continuing.”

If the person is associated with another CONNECTIONS event (e.g., Notice of Existence), the following message displays:
“Events for this person in this stage will be invalidated! Continue?”
Remove Person – Added in Error

The Remove Person – Added in Error function enables designated workers to remove an individual who was added in error during an Investigation or ARI stage. This function is performed in an open Investigation stage from the [Person List].

This function cannot be performed if the person to be removed was reported in Intake or named in an allegation.

In order to perform the Remove Person – Added in Error function, you must:

- be the Primary or Secondary worker; OR
- be the Unit Approver or have a role above that of the Unit Approver in the unit of the Primary or Secondary worker; OR
- be assigned the ACCESS ALL DIST and CASE/PERS SRCH Business Functions (allowing access through a Case Search).

In order to maintain accurate data for the person, you are responsible for making necessary demographic changes prior to performing the Remove Person – Added in Error function. For example, if the person’s age was changed from 45 to 35 after the person was added to the stage, you must correct the age to restore the original information.

The “Remove Person – Added in Error” function is a corrective process only.

If any demographic information has been changed since the person was added to the stage, the following message displays:

“Changes made to Person in this stage should be reset before continuing.”

If the person is associated with another CONNECTIONS event (e.g., Notice of Existence), the following message displays:

“Events for this person in this stage will be invalidated! Continue?”

If the person being removed is listed as the Primary Caretaker or Secondary Caretaker for the RAP associated with the Investigation stage, the following message displays:

“This person is selected as a Caretaker on the RAP cannot be removed.”

The Remove Person – Added In Error process is cancelled and the person remains on the [Person List] for the INV stage.
Step-by-Step:
Remove Person – Added in Error

1. Click on the **WORK** button on the CONNECTIONS Toolbar.
   The **Assigned Workload displays**.

2. Select the appropriate stage by clicking on it.
   The **Tasks…** button enables.

3. Click on the **Tasks…** button.
   The **Task List displays**.

4. Click on the **Maintain Person** task.
   The **List…** button enables.

5. Click on the **List…** button.
   The **Person List displays**.

6. Select the person to be removed.

7. Click on the **Options** menu and select **Remove Person – Added in Error**.
   The following message displays:
   “Are you sure you want to remove the person Added in Error?”

8. Click on the **Yes** button to complete the Remove Person – Added in Error process.
   The **Person List displays**.
   To return to the **Person List without removing the person**, click on the **No** button.

9. Click on the **Close** button to close the **Person List**.
   The **Task List displays**.

10. Click on the **Close** button to close the **Task List**.
    The **Assigned Workload displays**.
Changing the Case Name

New cases are named after the first Principal added to the case at Intake, who is usually the mother. Each stage of a case also has a Stage Name. For the Investigation stage, the Stage Name may be the same as the Case Name.

You may occasionally need to change the Case Name. If you update a person’s name that is also used as the Case Name, or if the case has the wrong name, you need to change the Case Name. In the first instance, you must always change the person’s name before you change the Case Name.

Step-by-Step: Changing the Case Name

1. Click on the WORK button on the CONNECTIONS Toolbar. 
   *The Assigned Workload displays.*

2. Click on the stage which requires a change to the Case Name.

3. Click on the Options menu and select Case (Stage) Name/CD. 
   *The Case (Stage) Name/CD window displays.*

4. Click on the drop-down arrow for the New Name field and select from the resulting list of principals in the case. 
   *You cannot enter a name here; you must select a name from the drop-down list.*

5. Click on the Save button. 
   *The Assigned Workload displays. The selected stage now reflects the new Case Name.*

ACS policies regarding naming cases have changed. The following rules now apply:

- Cases initiated by a call to the SCR must be named for the alleged subject of the report.
  - If there is more than one subject, the case must be named for the subject listed first on the intake report.
  - If a subsequent report is received while the original case is open, the case remains in the name of the original subject.
  - If a subsequent report is received and the original case is closed, the case is renamed based on the subject listed first on the new report.

- All non-CPS cases must be named for the individual requesting services.

- All cases where a child is freed or the child’s parentage is unknown must be named for the child.

New York City workers also need to record correct Community District information in the CD field.
Merge and Split Functions to Correct Duplicate and Accidentally Combined Records

The process of merging and splitting records is complicated and cannot always be fully undone. Notify your supervisor if you notice records that should be merged or split so that necessary corrections can be made.

The individual responsible for merging and splitting is subject to local district policy and procedure. This task may not fall under the scope of the individual worker’s responsibilities.

In your work with CONNECTIONS, you may come upon multiple records for the same person, or records for two separate persons that have been accidentally combined into one.

Duplicate records can be created during Intake if an Intake worker has limited or unknown demographics on a person and, therefore, cannot relate that person to an already existing person in CONNECTIONS. Duplicates can also result if you miss a potential match during a Person Search; you would then add this person to the case rather than relating to the existing person in the system. The opposite situation—accidentally combined records—can result if you merge records for two individuals who seem to be the same person but, in fact, are not. Regardless of the reason, duplicate records and accidentally combined records pose problems for accurate case management and need to be corrected once they are identified.

Duplicate and accidentally combined records are corrected in CONNECTIONS with the Merge and Split functions. A Merge joins two separate Person IDs or Case IDs into the same record. A Split separates cases or people that were merged in error.

The ability to perform Merge/Split functions is dependent on your role and level of security access. In order to perform a Person Merge or Split in a closed stage, you must have the MERGE/SPLIT Business Function and:

- be the historical Primary worker or Secondary worker; or
- be the historical Unit Approver or have a role above that of the Unit Approver in the unit of the Primary worker or Secondary worker and have the CASE/PERS SRCH Business Function; or
- have the ACCESS ALL DIST and CASE/PERS SRCH Business Functions (allowing access through a case search).

To perform a Person Merge or Split in an open stage, you must have the MERGE/SPLIT Business Function or be the Unit Approver or have a role above that of the Unit Approver in the unit of the Primary worker or Secondary worker and have the UNIT SUM ACCESS Business Function.
Person Merge/Split Functions

Before completing a Person Merge, a decision must be made regarding which person will be carried forward to further stages (the Merged Forward Person) and which person will be "retired" after the merge (the Merged Closed Person). The Merged Forward Person should be the person with the most history. This is generally the one with the Person ID number that has been in the system longer. It is important to understand how the merge affects each of these roles in CONNECTIONS.

The Merged Forward Person:
- is carried forward to subsequent CONNECTIONS stages;
- appears on the Person List in the current open stage, any closed stages and any future stages; and
- is identified by a check mark in the M/S column on the Person List.

The Merged Closed Person:
- is “retired” after the merge and information for the new Merged Forward Person is used in all open and closed stages;
- cannot be related to a new stage; and
- cannot be involved in future system events.

A Person Merge results in the following system changes:
- The Merge List on the Person Merge/Split window is updated to reflect the action taken.
- The Merged Forward Person inherits the demographics that have been selected and appear in all open stages.
- The Merged Closed Person is no longer linked to any of the stages that were open at the time of the merge. These will now be linked to the Merged Forward Person.
- System-generated Alert To-Dos are sent to the Staff To-Do List of the Primary and Secondary workers for any open stages that involve the Merged Forward Person or Merged Closed Person.

A Person Split results in the following system changes:
- The previously Merged Closed Person becomes active again in the database, but is not re-associated with any open stages.
- The previously Merged Closed Person's pre-merge demographics remain available in CONNECTIONS.
- The events/activities associated with the reactivated person (and approved prior to the merge) require data maintenance to be associated with that person again.
- Events that occurred while the merge was in effect are not associated with the reactivated person.
- System-generated To-Dos are sent to workers assigned to open stages associated with the previously merged person.

When merging two Person IDs:
Their age difference should be within five years.
If the Merged Closed Person is involved in an open Intake, the following message displays: “The closed person is in open stages. Merge with extreme caution. Continue?”
The Person Forward Selection Window

The Person Forward Selection window enables you to select specific person information that will applied to the Person Forward. The type of information you select—and which person you select it from—affects the information that is retained for the Person Forward.

- If you are selecting information from the Person Closed, the primary information for the Person Forward is end-dated and the information from the Person Closed is copied to the primary record.
- Valid person identifier, Person Detail FA Home, Language and Religion information is retained from the Person Forward, unless the field is blank. If the Person Forward does not have this information recorded, the information from the Person Closed is copied to the Person Forward.

If you have been given approval to merge or split person records, perform the following steps to complete this task.

Step-by-Step: Completing a Person Merge Within the Assigned Workload

1. From the Assigned Workload, select the stage containing the person information that requires merging. The Tasks... button enables.
2. Click on the Tasks... button. The Task List displays for the selected stage.
3. Click on the Maintain Person task. The List... button enables.
4. Click on the List... button. The Person List displays.
5. Click on the name of the person to be merged.
6. Click on the Options menu and select Person Merge/Split. The Person Merge/Split window displays. The highlighted name from the Person List pre-fills in the Merged Persons Closed section.
7. Enter the Person ID of the Merged Forward Person.

Person Merge Warnings and Error Messages:

When completing a person merge, you may see warnings and/or error messages. Warnings do not prevent you from completing a merge, but error messages do.

Reasons for Warnings:
- Both persons must be the same sex (if it is recorded).
- Both people must have a DOB that is within 5 years (if recorded).
- One of the persons is involved in a fatality report.

Reasons for Error Messages:
- Social Security numbers do not match.
- Medicaid number does not match.
- Entered ID is not found, verify ID.
- Services CIN must match.
- NYC Non-Service (NS) CIN’s must match (NYC only).
- Merge will cause person to be a subject and MA/AB child in the same Investigation stage.
- The ID Person entered has the status of person closed from a prior merge.
- The Merged Closed Person is in an open Intake or Investigation stage.
8 Click on the **Validate** button.
*The system checks for an open case and a valid Person ID. When the check is complete, the **Merge** button enables.*

9 Click on the **Merge** button.
*The following message displays:*
*“Merge ID# into ID#?”*
The first ID number listed is for the Merged Closed Person. The second ID number is for the Merged Forward Person.

**NOTE**: If you realize that you have made a mistake in selecting your persons, click on the **No** button.

10 Click on the **Yes** button.
*The Person Forward Selection window displays with the following information for both the Person Forward and the Person Closed:*
- Full Primary Name (First, Middle, Last, Suffix)
- Sex
- Ethnicity
- Race
- Marital Status
- DOB (including Approximate indicator, if applicable)
- DOD (including Approximate indicator and reason, if applicable)
- Primary Address
- Primary Phone

11 Select information from the **Person Forward Selection** window by clicking on the radio button next to each applicable field.
*The type of information you select—and which person you select it from—affects the information that is retained for the Person Forward.*

12 When you have made all of your selections from the **Person Forward Selection** window, click on the **OK** button.
*The Person Merge/Split window displays. The name of the person logged on and the date of the merge display in the **Staff NM Merge** and **Date Merge** fields.*

13 Click on the **Save** button.
*The change is saved in the system and the Person List displays.*
## Step-by-Step: Completing a Person Merge from the CONNECTIONS Toolbar

1. Click on the PERS button on the CONNECTIONS Toolbar.  
   *The Person Search window displays.*

2. Perform a Person Search (see “Person Search Methods” on page 46).

3. In the Person Search List, click on the person who is to be listed in the Merged Persons Closed section of the Person Merge/Split window.

4. Click on the Options menu and select Case List.  
   *The Case List displays.*

5. Click on the desired case to select it.

6. Click on the Summary button.  
   *The Case Summary window displays.*

7. Click on the applicable stage.

8. Click on the Options menu and select Person List.  
   *The Person List displays for the selected stage.*

9. Select a person from the Person List.

10. Click on the Options menu in the Person List and select Person Merge/Split.  
    *The Person Merge/Split window displays with the selected person’s name pre-filled in the Merged Persons Closed section.*

11. Review the Name and Person ID information in the Merged Persons Closed section for accuracy.

12. Enter the Person ID of the Merged Forward Person in the Forward section.

13. Click on the Validate button.  
    *The system checks for an open case and a valid Person ID. The Merge button enables.*

14. Click on the Merge button.  
    *The following message displays: “Merge ID# into ID#?”*  
    The first ID number listed is for the Merged Closed Person. The second ID number is for the Merged Forward Person.

**NOTE:** If you realize that you have made a mistake in selecting your persons, click on the No button.
15 Click on the Yes button. 
*The Person Forward Selection window displays with the following information for both the Person Forward and the Person Closed:*
- Full Primary Name (First, Middle, Last, Suffix)
- Sex
- Ethnicity
- Race
- Marital Status
- DOB (including Approximate indicator, if applicable)
- DOD (including Approximate indicator and reason, if applicable)
- Primary Address
- Primary Phone

16 Select information from the Person Forward Selection window by clicking on the radio button next to each applicable field. 
*The type of information you select—and which person you select it from—affects the information that is retained for the Person Forward. See page 129 for details.*

17 When you have made all of your selections from the Person Forward Selection window, click on the OK button. 
*The Person Merge/Split window displays. The name of the person logged on and the date of the merge display in the Staff NM Merge and Date Merge fields.*

18 Click on the Save button. 
*The change is saved in the system and the Person List displays.*
Completing a Person Split

Step-by-Step: Completing a Person Split

1. On the Assigned Workload, select the stage which contains the person information that was merged in error. The Tasks... button enables.

2. Click on the Tasks... button. The Task List displays for the selected stage.

3. Click on the Maintain Person task.

4. Click on the List... button. The Person List displays for the selected stage.

5. Click on the name of the person who was merged in error.

6. Click on the Options menu and select Person Merge/Split. The Person Merge/Split window displays. The system pre-fills the person’s name into the Merged Persons Closed section.

7. In the list section at the top of the window, select the merge you want to split. The system fills the merge information into the detail section of the window.

8. Click on the Split button. The following message displays: “Split ID# from ID#?” The first ID number listed is for the Closed Person. The second ID number is for the Forward Person.

9. Click on the Yes button.

10. Click on the Save button. The change is saved in CONNECTIONS. The Person List displays.

Things to Consider Before Splitting:

The Merge Forward Person cannot be deleted from the stages that were open at the time the Person Merge took place. The Merged Closed Person’s pre-merge information is not “reattached” by completing a Split. Follow-up demographics and case/stage maintenance are necessary to complete the process.

You need to record that person’s demographic information again and re-associate the person with the appropriate case(s)/stage(s).

To run the report:

1. Select the person on the Person List.

2. Click on the Reports menu and select the Person Data command. The following message displays: “The report has been launched. Check Report List window.”

3. Click on the OK button.

4. Click on the RPRTS button.

5. Select the Person Data Report and click on the Open button.

This provides a hard copy of all information stored in CONNECTIONS about a specified person including merge/split history and demographic changes.
Case Merge/Split Functions

The Case Merge/Split function allows you to merge two separate cases into one case, sharing the same CONNECTIONS Case ID, or to split a case that was previously merged. Both open and closed cases can be merged.

Case Merge

Case merges are most often completed by an SCR Intake worker when that worker identifies that the family reported in the current intake is already involved in an open case in CONNECTIONS. The new intake is considered a subsequent intake/report in the open case. When this information is verified, the SCR Intake worker merges forward the subsequent intake into the existing open CONNECTIONS case.

There will be other times when the SCR Intake worker does not merge the new Intake into an existing case, but you may find while providing services to a family that completing a case merge will allow you to manage the case better. In this situation, ask your supervisor for direction to determine if the proposed merge fits within the standards of your local district’s policies and procedures for case merges.

Merges are pending until after the batch update is run overnight. At that time, a series of edits and checks are performed by CONNECTIONS to verify that the two cases can be merged. You can identify whether a merge is still pending from the Merge/Split window or the Case List. On the Case List, “PF” indicates the Pending-From case and “PT” indicates the Pending-To case for merges pending batch update; this only displays on the Case List for the Pending-To case. On the Case Merge/Split window for either the Pending-To or Pending-From case, a red check displays in the PEND column.

After the batch update, the case that is Merged-From displays “MF” in the Merge column on the Case List; the case that is Merged-To displays “MT” in that column. Both Case IDs, when searched, point to the Merged-To Case.

Step-by-Step: Completing a Case Merge from the Assigned Workload

1. Click on the WORK button. The Assigned Workload displays.
2. Select the case to be merged.
3. Click on the Options menu and select Case Summary. The Case Summary window displays.
4. Click on the Options menu on the Case Summary window and select Case Merge/Split. The Case Merge/Split window displays.
5. Enter the Case ID number for the case you wish to merge.

When merging cases, warnings and/or error messages may display. Warnings do not prevent you from completing a merge, but error messages do. Carefully review and consider both error messages and warnings before proceeding.
merge in the Case Merged From section. 
*The Case Merged To field is pre-filled.*

6. Click on the **Validate** button.
*The system checks to see if the merge is possible and may display error messages or warnings (see the tip box at the bottom of the previous page). When the check is complete, the **Merge** button enables.*

7. Click on the **Merge** button.
*In the list at the top of the window, the merge displays with a red check mark in the **Pending** column.*

**NOTE:** If you realize that you have made a mistake in selecting your cases, click on the **Cancel** button. If you click on the **Yes** button at the prompt asking if you wish to exit without saving, the Case Merge/Split window closes and the merge is canceled.

8. Click on the **Save** button.
*The Case Summary window displays.*

9. Click on the **Close** button.
*The Assigned Workload displays.*

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**Case Split**

Case splits separate two cases that were previously merged. The actual split occurs during a batch process, since a series of edit checks must run to verify that the case can be split. If the pending split fails the edit checks in the batch run, you will need to process the split again. ADD Intake stages that are split will be re-opened and placed on the Assigned Workload of the Primary worker. An INT/INV stage that has been closed as a duplicate (DUP) cannot be split.

When you split an Intake stage from a case and progresses it prior to the nightly split batch update, CONNECTIONS determines if the stage is linked to any other stage. When the split batch update is run, the system moves all stages that are identified as belonging together.

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**Step-by-Step: Completing a Case Split**

1. Click on the **WORK** button.
*The Assigned Workload displays.*

2. Select the case to be split.

3. Click on the **Options** menu and select **Case Summary**.
*The Case Summary window displays.*

4. Click on the **Options** menu on the Case Summary window and select **Case Merge/Split**.
*The Case Merge/Split window displays.*
5 From the list section at the top of the window, click on the Case Name that was merged in error. The merge information for the selected case displays in the detail section at the bottom of the window.

6 Click on the Split button. A red check mark displays in the Pending column in the list section.

NOTE: If you realize that you have made a mistake in selecting the case to be split, click on the Cancel button. The following message will display: “Do you want to cancel? Unsaved data and/or narrative(s) will be lost.” If you click on the Yes button in response to the message, the Case Merge/Split window closes and the split is cancelled.

7 Click on the Save button. The Case Summary window displays.

8 Click on the Close button. The Assigned Workload displays.

Marking a Case as “Sensitive”

A sensitive case is one in which the reported person is an employee of the SCR or a local district worker. Under these circumstances, the case is typically marked “sensitive” by the SCR at Intake.

Occasionally, a local district may choose to mark a high-profile case as sensitive (e.g., a case involving a celebrity or other public figure).

In order to mark a case as “sensitive” (or remove the sensitive mark from a case), you must:

- have a role in the case; OR
- be in the unit hierarchy of a worker with a role in the stage; AND
- be assigned the MARK SENSITIVE Business Function.

Step-by-Step: Marking a Case as “Sensitive”

1 From the Assigned Workload, click on the case to be marked as “sensitive.”

2 From the Options menu, click on the Case Summary... command. The Case Summary window displays.
3 Click on the **Options** menu on the **Case Summary** window and select the **Special Handling**… command.

4 Click on the **Sensitive Case** checkbox.

5 In the narrative box directly below the **Sensitive Case** checkbox, record notes that identify the issues that led to marking the case as “sensitive.”

6 Click on the **Save** button.  
   *The Case Summary window displays.*

7 Click on the **Close** window to close the **Case Summary** window.  
   *The Assigned Workload displays.*

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**Consolidating Open Investigation Stages**

Consolidating Investigations is an optional procedure available to CPS investigators and is in response to the needs of the field, shrinking local district staff resources, Child and Family Service Review outcomes and New York State’s continued efforts to support strength-based child welfare practice and engagement of families.

OCFS has developed the following guidelines to support Consolidating Investigations. This procedure may occur only after a report has been progressed to the Investigation stage; it supports the consolidation of Subsequent report Investigations into an ongoing, open Investigation.

Consolidated Investigations are designed to:

- enhance family engagement strategies by fostering a more strength-based and minimally intrusive approach to child protective investigations;
- avoid unnecessary duplication of effort while maintaining the integrity of the investigation process;
- more accurately reflect New York State’s rate of repeat abuse and maltreatment, by combining multiple reports into the same Investigation stage; and
- support the ability to change an Intake report type to Duplicate after the report has been stage progressed.

Consolidating Investigations closes a Subsequent Investigation stage and consolidates it into an ongoing open Investigation stage. Consolidating Investigations differs from (and goes beyond the scope of) changing a report type to Duplicate.

Duplicate report types reflect specific report criteria currently applied at Intake by the SCR, while Consolidating Investigations reflects the knowledge of the investigating district. Investigations may be consolidated regardless of whether or not the Subsequent report meets the current Intake criteria for a Duplicate report.

Since the investigating district has direct knowledge of the children and adults listed in the report, the investigating district is in a better position to conclude when a newly assigned investigation is duplicative of an ongoing investigation. In these instances, the worker and
supervisor may decide to consolidate the investigations. It is important to consult the Guidelines for Consolidating Investigations (see page 140) before proceeding with this function.

Currently, for the SCR to determine that a report type is Duplicate, an open CPS investigation must exist when another report is registered involving the same or similar account of the incident, with no additional subject(s), allegation(s) or MA/AB child(ren), or the same or similar incident is reported with fewer subject(s), allegation(s) or MA/AB child(ren).

**CONNECTIONS System Criteria for Consolidating Investigations**
This section addresses the system criteria for Consolidated Investigations functionality. There are steps that must be taken and system edits that exist to support the appropriate consolidation of investigations.

The Consolidating Investigations functionality provides the ability to combine a Subsequent Investigation stage with an ongoing open Investigation stage that was received prior to the Subsequent in the same case by selecting the **Close as Duplicate** command from the **Options** menu on the **CPS Investigation Conclusion** window. The Intake stage will retain its INI (Initial) or SUB (Subsequent) stage type, since that stage is frozen. The frozen Intake report and Investigation stage remain case events to which you can easily navigate.

A supervisor must approve the Investigation stage closure reason in the same manner that all Investigation Conclusions are approved.
In order for a Subsequent or Initial investigation to be Closed as Duplicate and consolidated into the ongoing open investigation stage in CONNECTIONS, the following system criteria must apply:

- The prior and subsequent Investigation stages must be in the same open case.
- If the subsequent report is registered as Initial, it must be case merged prior to consolidating the investigations.
- The Intake date and time associated with the prior investigation must be the same as or earlier than that of the subsequent investigation.
- The subsequent report intake date must be within 53 calendar days from the prior report Intake date to support all due process for subjects of reports.
- The process of consolidating investigations must be completed within six (6) calendar days of the subsequent report intake date.
- The Safety Assessment(s) in the subsequent Investigation can have any status.
- The status of the Risk Assessment Profile in the subsequent investigation must be NEW or PROC (In Process).
- The prior Investigation Conclusion cannot be approved or pending supervisory approval.
- If a Subsequent Investigation has an event in REJT (Rejected) status, that Subsequent Investigation cannot be Closed as Duplicate and consolidated into the ongoing open investigation.
- All Alleged Subjects, MA/AB Roles and Other Persons named in the subsequent investigation must be listed in or added to the prior investigation, before the subsequent investigation can be “closed as duplicate” and consolidated into the ongoing open investigation.
- All allegation lines (i.e., Subject/Child/Allegation) in the subsequent investigation must be listed in or added to the prior Investigation, before the subsequent investigation can be Closed as Duplicate and consolidated into the ongoing open investigation.
- A Fatality Investigation in which the 24-Hour Fatality Report and/or the 30-Day Fatality Report associated with the subsequent report has been started (in a status other than NEW) cannot be Closed as Duplicate and consolidated into the ongoing open Fatality Investigation.
- A DOA/Fatality allegation can only be added to an Investigation stage at SCR Intake. Local district CONNECTIONS users cannot add a fatality allegation to an open investigation.
- The system will allow a Day Care/Foster Care Investigation originally registered as Initial or Subsequent to be Closed as a Duplicate and consolidated into the ongoing open investigation. Note: OCFS recommends the exclusion of DC/FC reports from this procedure until all local policies have been reviewed by the Regional Offices.
- IAB Investigations cannot be Closed as Duplicate.
- In NYC cases, a “High Priority” Investigation can only be Closed as Duplicate and consolidated into another “High Priority” Investigation stage. A “Non-High Priority” Investigation can be Closed as Duplicate and consolidated into a “High Priority” Investigation stage.
Guidelines for Consolidating Investigations
There are two key considerations when deciding whether or not to consolidate a Subsequent Investigation stage into an ongoing open Investigation stage:

➢ How much time remains in the prior ongoing open Investigation stage to adequately investigate and determine any new allegations?

Example: An initial report was registered on January 1, 2003 alleging Lack of Supervision. A subsequent report was registered on February 20, 2003 alleging Excessive Corporal Punishment; Fractures; and Lacerations, Bruises, Welts. There are 10 days left before the Investigation Conclusion is due on the prior report (day 53). Consider whether or not 10 days is enough time to adequately investigate the new allegations (Excessive Corporal Punishment; Fractures; and Lacerations, Bruises, Welts) and complete all required case activities.

➢ Should the new report be maintained as a separate Investigation?

Example: An initial report was registered on May 7, 2003 alleging Inadequate Guardianship. The report involves a rat-infested home and rats in the infant’s crib at night. A subsequent report was registered on June 24, 2003 alleging ongoing sexual abuse of the 5-year-old girl by the father. Local district CPS protocols dictate that all alleged sexual abuse reports be forwarded to the District Attorney’s office. Consider whether or not the sexual abuse report should be maintained as a separate investigation, taking into account the time remaining until the Investigation Conclusion is due on the prior (Initial) report.

Additional considerations may include:

• Are any specialized protocols or administrative structures in place that support maintaining a separate Investigation?

• Are there any new subjects or other persons named who, by law, require written notification of the existence of a CPS report?

• Who are the new subjects and what is their relationship to the family?

• Should the new subjects be tracked in a separate report (e.g., a relative or non-family member who should not have access to information contained in a prior report)?

• Are new allegations contained in the subsequent report?

• Do the new allegations involve additional children?

• What is the severity of the new allegations?

• If supportive district(s) (secondary, tertiary) assignment and involvement is necessary, is there enough time remaining in the prior report’s allowable determination timeframe to involve the supportive district(s) and complete a comprehensive Investigation?
• Is the prior report about to be unfounded and the subsequent report contains new allegations, which may require further investigation?

• Does the subsequent report contain new information that would warrant a separate investigation?

• Should the report investigation remain separate due to confidentiality issues? (These may include a domestic violence shelter address or safe location for victims of domestic violence, or the need to prevent new subjects access to earlier report information.)

• Is the new report being referred to the District Attorney’s office? If yes, should the subsequent report investigation remain separate (e.g., the prior report will be unfounded or contains minor allegations not relative to the current circumstances/allegations)?

• If a Risk Assessment Profile (RAP) was completed and approved on a prior report, is there a need for a new RAP?
  
  Note: A subsequent report may contain new information relevant to the RAP Risk Elements. In order to complete a new RAP and capture the new information garnered in the Subsequent Investigation, the Subsequent Investigation must remain separate from the prior Investigation.

Note for Supervisors:

If you submit a Consolidated Investigation for approval while an Investigation Conclusion (for an ongoing open Investigation stage in the same case) is pending approval, you need to approve the Consolidated Investigation before approving the Investigation Conclusion.

If the supervisor attempts to approve the Investigation Conclusion first under these circumstances, the following message displays:

“Approve PEND Close as Dup stage prior to approving this INV stage.”

Clicking on the OK button closes the message box.

Canceling a Pending Consolidation

If you consolidate investigations in error, your supervisor must reject the pending Consolidated Investigation that you submitted for approval. The status of the Consolidated Investigation will change from PEND to REJT.

If you need to change the date of the consolidation or select a different ongoing open Investigation stage (if any exist that meet the consolidation criteria), s/he can navigate from the rejected task on the Staff To-Do List and make the necessary changes to these fields. You would then need to resubmit the Consolidated Investigation for supervisory approval.

Resubmission of a rejected consolidation must occur within the six (6) day time limit.

Practice Considerations After Consolidating Investigations

This section is intended to highlight activities that you and your supervisors must accomplish once your supervisor has approved the decision to consolidate the investigations. When incorporating new information into an ongoing open Investigation stage, you and your supervisors must complete all required activities and documentation associated with a child protective investigation within the allowable determination timeframe of the previous report.
Additional case activities may be warranted based on new information or circumstances previously not addressed. These may include the following:

- Assess the current safety of all children in the home and document the Safety Assessment findings in case progress notes or via completion of an updated Safety Assessment in CONNECTIONS.
- Document in case progress notes the reason for the decision to consolidate the Subsequent Investigation into an ongoing open Investigation.
- Add any new subjects, MA/AB children, allegations and other persons named in the subsequent report with a Role of “Unknown” or “No Role” to the ongoing open Investigation stage. Complete case maintenance as necessary.
- Inform family members of the subsequent report and that it has been consolidated with the ongoing open investigation.
- Provide notification letters to new subjects and other persons named in the subsequent report within seven (7) days of the Intake date.
- Conduct additional interviews/home visits with new subjects, additional children, new sources or collateral contacts.
- Modify the most recent pending Risk Assessment Profile to reflect any new information or circumstances.
- If applicable, document Mandated Reporter(s) information associated with the subsequent report, in case progress notes.
- If requested, provide a summary of the findings to the Mandated Reporter(s) associated with the subsequent report.
- Notify supportive district worker(s) (i.e., secondary, tertiary) in both Investigation stages that the investigations have been consolidated and discuss investigative activities that must be completed.

When a stage is closed as a Duplicate Investigation, the Determination field on the CPS Investigation Conclusion window will automatically populate with “Suspended” and the field will disable, preventing any modification of the information.

You need to associate the Subsequent Investigation stage with the ongoing Investigation stage. The Duplicate Stage ID field will contain a drop-down list of open, active investigations in the case, provided those investigations meet all of the following conditions:

- The ongoing stage’s Intake date is on or before the Subsequent Investigation stage’s Intake date.
  - The ongoing stage’s Intake date is less than 53 days old.
  - The ongoing stage is open and has not been submitted for approval.
  - The ongoing stage is not involved in a pending case split.
  - Both stages share at least one person in common.
  - Both stages have the same subject and child, if the case has a DOA/Fatality allegation.
• When you select a stage in the **Duplicate Stage ID** field, **CONNECTIONS** will verify that the following are true:

• All individuals, except for those with a role of **Reported in Error** in the Duplicate stage, are included in the original (going forward) stage.

  —**AND**—

• All of the allegations associated with those individuals in the Duplicate stage are included in the original (going forward) stage.

Otherwise, the following error messages will display, preventing you from closing the stage as a Duplicate investigation:

<table>
<thead>
<tr>
<th>Circumstance</th>
<th>Error Message</th>
</tr>
</thead>
<tbody>
<tr>
<td>A person in the Duplicate stage is missing in the original (going forward)</td>
<td>“All individuals in the Duplicate stage must be in the original stage.”</td>
</tr>
<tr>
<td>stage that person has a role other than <strong>Reported in Error</strong>.</td>
<td></td>
</tr>
<tr>
<td>The allegations in the Duplicate stage do not exist in the original</td>
<td>“Allegation mismatch – All allegations in Duplicate must be in original stage.”</td>
</tr>
<tr>
<td>(going forward) stage.</td>
<td></td>
</tr>
<tr>
<td>The Duplicate stage is a High Priority stage, but the original (going</td>
<td>“Selected stage is not high priority – stage cannot be duplicated.”</td>
</tr>
<tr>
<td>forward) stage is not.</td>
<td></td>
</tr>
<tr>
<td>No stages in the case meet the criteria to allow a Duplicate.</td>
<td>“No stages in case meet criteria to allow a Duplicate.”</td>
</tr>
</tbody>
</table>

If any of these error messages displays, you need to click on the **OK** button to close the message box. **CONNECTIONS** clears the “Suspended” value in the **Determination** field and the “Closed as Duplicate” value in the **Closure Reason** field. In addition, the **Save** button enables, allowing you to save the Narrative, as well as the **Investigation Begun** and **Investigation Completed** information that may have been recorded.

Closing a stage as a Duplicate Investigation requires supervisory approval. A system edit prevents interim save capability once the **Determination** field reads “Suspended” and the **Closure Reason** field reads “Closed as Duplicate.” If you attempt to close the stage as Duplicate, but is not yet ready to submit the closure for supervisory approval, you must click on the **Cancel** button to exit the window.

The supervisor’s approval of the Duplicate closure will generate an event on the Duplicate stage’s **Event List**. If the supervisor approves the Duplicate closure while other approval events for that stage are in any status other than APRV, the status for each of those events will be converted to SUSP (Suspended).
Step-by-Step: Consolidating Investigations

1. Click on the **WORK** button.  
*The Assigned Workload displays.*

2. Click on the stage to be consolidated.

3. Click on the **Tasks**… button.  
*The Task List displays.*

4. Click on the **Investigation Conclusion** task.

5. Click on the **New** or **Detail**… button.  
*The CPS Investigation Conclusion window displays.*

6. Click on the **Options** menu and select **Close as Duplicate**.

7. Record the **Investigation Begun** date.

8. Record the **Investigation Completed** date (the date on which you are closing the stage as a Duplicate).  
*CONNECTIONS generates an overall investigation determination of “Suspended.”*  
The **Closure Reason** field automatically populates as “Closed as Duplicate.”

9. Click on the drop-down arrow for the **Duplicate Stage ID** field and select the Stage ID of the original (going forward) stage from the resulting list.

10. Click on the **Narrative** button.  
*The CPS Investigation Conclusion narrative displays as a Microsoft Word document.*

11. Record the following statement in the narrative:  
“For information regarding the allegation(s) contained in this associated Intake Report, please see the Investigation Summary Report for Investigation (INV) Stage ID __________.”
(Enter the INV Stage ID for the open Investigation stage.)  
*Recording a narrative is required for ACS workers.*

12. Click on the **File** menu and select **Close**.  
*The CPS Investigation Conclusion window displays.*

13. Click on the **Submit** button to save the information to the database and submit the stage for supervisory approval.  
*The To-Do Detail window displays.*

14. Click on the **Save** button to send the Approval Task To-Do to the supervisor.
Once the stage has been approved by the supervisor, its stage type will automatically change to DUP (Duplicate). The Intake stage will retain its INI (Initial) or SUB (Subsequent) stage type, since that stage is frozen. Security access to the Duplicate investigation will be linked to the original (going forward) investigation.

Local Data Maintenance

Throughout the Intake and Investigation processes, you should make sure that case information is recorded in CONNECTIONS accurately and in a timely manner. You may occasionally encounter situations in which case information for a closed Investigation stage needs to be corrected. For example, a person’s demographic information might have been recorded incorrectly, or perhaps allegations were omitted in error.

The Local Data Maintenance (LDM) function in CONNECTIONS provides the mechanism for viewing and correcting information for closed Investigation stages.

The multi-tabbed Local Data Maintenance window enables designated workers to view and correct information in closed Investigation stages. This window is used to add and relate persons to closed investigations, as well as to correct allegations, person demographic information and investigation conclusion details.

The LDM window contains four tabs:

- Person Demographics
- Add/Relate Person
- Allegations
- Investigation Conclusions

These tabs enable depending on how the LDM window is opened and the Business Function Profile of the worker opening the window. Two Business Functions are associated with the Local Data Maintenance function:

- Maintain Closed Investigation
  (This Business Function is available only for designated CPS supervisors and individuals above them in their respective Unit Hierarchy)
- Maintain Closed Person Demographics

The Maintain Closed Investigation function is used exclusively to correct errors or oversights in the original investigation. The original investigation narrative must support these corrections. This function should not be used to record new information about an investigation that is learned after the investigation has been closed. In this situation, a new report needs to be made to the SCR.

The Maintain Closed Person Demographics function can be used to correct demographic information due to a data-entry error in the original investigation, or due to the availability of additional information that was obtained prior to the stage closing, but inadvertently left out.
Examples of appropriate use of the LDM function include:

**Allegation Substantiation Corrections**
One or more of the original allegations were substantiated and should have been unsubstantiated (or vice versa) and the original narrative supports the corrected decision. It is important to remember that if the subject has received a letter (either a Notice of Indication from the local district or a Notice of Unfounding from the SCR) based on the original determination, the district is responsible for sending a corrected letter.

**Allegation Association Corrections**
The original allegations and substantiations were not correctly associated with the appropriate child and/or subject (e.g., “allegations should have been substantiated for the mother and unsubstantiated for the grandmother, not vice versa”; or “bruises should be substantiated for the 8 year old and unsubstantiated for the 5 year old, not vice versa”). Remember, the original narrative must support the corrected information. Corrected notification letters need to be sent, as appropriate.

**Adding Individuals and/or Allegations**
The original report from the SCR listed two children left unsupervised. There were actually three children left unsupervised, but the case worker forgot to add the third child while the investigation was open. Again, the original narrative must support the corrected information. If additional subjects or “other persons named” are added to the closed investigation, appropriate notification letters need to be sent.

**Accessing the LDM Window**
Two paths provide access to the LDM window:

- Via the Case Summary window
- Via the Event List

Since the case containing the stage to be corrected is a closed case, it does not display on the Assigned Workload. Therefore, you need to conduct a Case Search.

---

**Step-by-Step: Opening the LDM Window from the Case Summary Window**

1. Click on the CASE button. 
   *The Case Search Criteria window displays.*

2. Enter search criteria in the appropriate fields. 
   *For detailed information about conducting a Case Search, see “Conducting Case Searches” on page 62.*
3 Click on the **Search** button.  
*The Case List displays, containing the results of the search.*

4 Click on the appropriate case to select it from the **Case List.**  
*The Summary window enables.*

5 Click on the **Summary** button.  
*The Case Summary window displays.*

6 Click on the INV stage to be viewed/corrected to select it from the list.

7 Click on the **Options** menu and select either the **Maintain Closed Person Demographics**... or the **Maintain Closed Investigation**... command, as appropriate.  
*Each of these commands enables only if you meet certain access requirements. In addition, tabs on the LDM window enable or disable depending on the path used to access the window (see the table below). Selecting either command opens the LDM window in Modify mode.*

<table>
<thead>
<tr>
<th>Case Summary Window &gt; Options Menu</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maintain Closed Person Demographics</td>
</tr>
<tr>
<td>Business Function Required</td>
</tr>
<tr>
<td>MAINT CLSD PERS</td>
</tr>
<tr>
<td>Additional Access Requirements</td>
</tr>
<tr>
<td>Investigation Stage (CPS or IAB) is closed and Worker must be from same district/agency as Primary worker when stage was closed and either:</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>LDM Tab(s) Enabled</td>
</tr>
<tr>
<td>Person Demographics</td>
</tr>
</tbody>
</table>

---

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Opening the LDM window via the Maintain Closed Investigation… command from the Options menu on the Case Summary window generates a Local Data Maintenance event. The event displays on the Event List with one of the following event descriptions:

- **Maintain Closed CPS Investigation**
  This event is generated when you access a closed CPS Investigation stage in the LDM window and any information is modified and saved.

- **Maintain Closed IAB Investigation**
  This event is generated when you access a closed IAB Investigation stages in the LDM window and any information is modified or saved.

If the LDM window is opened via the Maintain Closed Person Demographics… command, no event is generated.

---

### Step-by-Step: Opening the LDM Window from the Event List

1. **Conduct a Case Search.**
   *Follow Steps 1-3 from “Opening the LDM Window from the Case Summary Window” on page 146.*

2. **Click on the appropriate case to select it from the Case List.**

3. **Click on the Events… button.**
   *The Event List displays.*

4. **Click on an LDM event to select it from the list.**
   *The Type column of the event will read “Local Data Maintenance” and the Description column will read “Maintain Closed CPS Investigation.”*

5. **Click on the Detail… button.**
   *The LDM window displays in view-only mode. None of the elements on the window can be modified. The Add/Relate Person tab and most of the buttons on the window are disabled.*

As is the case with most other Investigation stage events (like Investigation Conclusion), LDM events are displayed or filtered on the Event List in accordance with your security. You must have the appropriate CPS Business Functions in addition to jurisdictional, role or unit hierarchy access to the case. Since access to the LDM window from the Event List is view-only, the MAINT CLSD INV Business Function is not required. Here’s a general rule of thumb for LDM access: If your security credentials allow you to see the Investigation Conclusion event for a stage, you will be able to see and access the LDM event.

When an LDM event is created, it has a **Status** of “PROC” (in process). Only one PROC Local Data Maintenance event can exist for a closed Investigation stage at a time. Modifying a stage that already has a PROC LDM event does not generate another event or change the status of the existing event. The **Status** of the LDM event changes to “COMP” (complete) as part of the process of closing the LDM window (see “Closing an LDM Session” on page 172).
The LDM Window Layout

You can think of the LDM window as being organized into three sections: the Heading and Footer sections contain elements that are present no matter which section of the LDM window is being used; the Tabbed section comprises the main body of the LDM window.

The Heading

The Heading is always present when the LDM window is open. It includes the following information:

- Case Name
- Case ID
- Stage ID
- Report Date (the Intake report date)
- Case Status
- Event Status
- Final Risk Rating
- Elevated Risk Exists label (if any Elevated Risk Elements were selected on the RAP)

The Event Status that displays depends on how—and under what circumstances—the LDM window was opened. This status is modified by CONNECTIONS when changes are saved in the LDM window.

- If the LDM window is opened from the Event List, the Event Status field displays the status (either “PROC” or “COMP”) of the event that was selected on the Event List.
- If the LDM window is opened via the Maintain Closed Investigation... command from the Options menu on the Case Summary window, the Event Status displays “PROC” if an In-Process event is associated with the closed Investigation stage. Otherwise, the Event
**Status** reads “NEW.” In this case, if any changes are saved on the LDM window, the **Event Status** will update from “NEW” to “PROC.”

- If the LDM window is opened via the **Maintain Closed Person Demographics…** command from the **Options** menu on the **Case Summary** window, the **Event Status** will be blank. (Remember, the Maintain Closed Person Demographics function does not generate an LDM event.)

**The Footer**

The footer is always present when the LDM window is open. The footer contains only the **Close** button, which is used to close the LDM window. When the LDM window closes, either the **Event List** or the **Case Summary** window displays, depending on manner in which the LDM window was accessed. The closing process also gives you the opportunity to save any unsaved changes to the LDM window and to update the LDM event status to COMP. (The closing process is covered in more detail on page 172.)

**The Tabs**

The information contained in the LDM window is organized into sections, which are represented by file tabs:

- Person Demographics
- Add/Relate Person
- Allegations
- Investigation Conclusions

The information in any of the tabs can be accessed by clicking directly on the tab. Tabs can be accessed in any order.

Information recorded in the LDM window is stored in the CONNECTIONS database during the Save process. When you re-open the LDM window, it is “refreshed” with the most current information from the CONNECTIONS database. This information can be reviewed and, if necessary, corrected further.
The Person Demographics Tab

The Person Demographics tab enables you to view and correct information about persons associated with a closed Investigation stage.

By default, this is the active tab whenever the LDM window is first opened. This tab contains two grids.

The upper grid contains the following information about all individuals associated with a closed Investigation stage:

- Primary Name
- Person ID
- DOB (Date of Birth)
- T (Date of Birth Type)
- Age
- Marital Status
- Sex
- Ethnicity
- Race
- Language
- Religion
- DOD (Date of Death)
- Approx. DOD
- Phone Number
- Extension
- Phone Type
- Relationship/Interest
- Role

A person’s information on this tab cannot be modified if that individual is associated with any open, non-ARI stage. If you attempt to do so, the following message displays:

“Can’t modify demographic information of people in open stages. Person member of Stage ID: ###”

Updating a person’s Date of Birth on the LDM window changes the person’s Date of Birth in all other stages with which that individual is associated. Keep in mind that, since a person in open stages cannot be modified, the affected stages will all be closed stages.

Contact the Primary worker associated with the open stage to discuss any changes. Whether a person’s information can be modified will change as stages associated with that individual are opened and closed.

The Age field cannot be modified if there is an exact date of birth listed in the DOB field. If corrected exact date of birth information becomes available, correct the DOB field; the Age field will update automatically. If the T (Date of Birth Type) field is marked “A” (approximate) or “E” (estimated), the Age column can be modified. When the Age field is modified, the DOB recalculates. If new exact date of birth information is recorded in the DOB field, be sure to change the date of birth type to be blank (which indicates that the date of birth is exact).

All columns in the upper grid can by modified by clicking directly...
in the respective grid cell and typing in the data, *with the exception of the following columns:*

<table>
<thead>
<tr>
<th>Column</th>
<th>Modified by…</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person ID</td>
<td>Cannot be modified</td>
</tr>
<tr>
<td>Race</td>
<td>Race selection box (lower right corner of the <strong>Person Demographics</strong> tab)</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>Ethnicity drop-down list and selection box (lower half of the <strong>Person Demographics</strong> tab)</td>
</tr>
<tr>
<td>Phone, Extn, Type</td>
<td><strong>Maintain Primary Address and Phone</strong> window, accessed via Address/Phone button elsewhere on <strong>Person Demographics</strong> tab</td>
</tr>
<tr>
<td>Role</td>
<td>Automatic (re)calculation when changes to the <strong>Allegations</strong> tab are saved</td>
</tr>
</tbody>
</table>

Before changing a person’s name on the **Person Demographics** tab, it’s a good idea to conduct a Person Search to determine if the new name is known to CONNECTIONS. If the name is known, use the Relate function on the **Add/Relate Person** tab, rather than changing the name on the **Person Demographics** tab. (For more information about the **Add/Relate Person** tab, see page 157.) After the individual is related to the closed stage, both individuals (the one who was originally on the Person List and the one you just related) will display. You will need to perform a Person Merge (see page 128 for more information on Person Merging).

To select a person for modification, click in that person’s row on the grid. An arrow displays to the left of the row to indicate that the person is selected.

When a person is selected in the upper grid, the *lower grid* displays all person identifiers (SSN, CIN, etc.) for that individual. Each identifier appears in its own row on the lower grid. An arrow displayed to the left of the row indicates that the identifier is currently selected for editing. New identifiers can be added by typing into the bottom-most row (which is marked with a star) on the lower grid. Adding a new row with the same identifier **Type** as an existing row (that does not have an end-date) sets the End Date of the existing row to the current date.

The table at the top of the next page indicates the information displayed in the lower grid and the method by which the information is modified.

<table>
<thead>
<tr>
<th>Column</th>
<th>Modified by…</th>
</tr>
</thead>
<tbody>
<tr>
<td>ID Invalid Flag</td>
<td>Can only be marked (using the drop-down arrow that appears when you click in the cell); cannot be removed. Marking the flag as Invalid will set the end date of that row to the current date.</td>
</tr>
<tr>
<td>ID Type</td>
<td>Can be selected for new rows using the drop-down arrow that appears when you click in the cell. This field cannot be modified for existing rows.</td>
</tr>
</tbody>
</table>
Race and ethnicity information for the individual selected in the upper grid can be modified using the Race and Ethnicity fields in the lower right corner of the tab. The table below indicates the circumstances under which these fields are enabled and how information can be modified:

<table>
<thead>
<tr>
<th>Field</th>
<th>Enabling</th>
<th>Modification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethnicity (drop-down field)</td>
<td>Enables when a person is selected in the upper grid.</td>
<td>Updates the Ethnicity column in the upper grid. This field displays “NR” when the Ethnicity column in the upper grid reads “Not Reported.”</td>
</tr>
<tr>
<td>Ethnicity (list box)</td>
<td>Enables when a person is selected in the upper grid AND “Hispanic or Latino Origin” displays in the Ethnicity drop-down.</td>
<td>Click on an origin to select it from the list. Multiple origins may be selected.</td>
</tr>
<tr>
<td>Race (list box)</td>
<td>Enables when a person is selected in the upper grid.</td>
<td>Updates the Race column in the upper grid. Click on a race to select it from the list. Multiple races may be selected. If more than one Race is selected in this field, the upper grid displays “Multiple.”</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Column</th>
<th>Modified by…</th>
</tr>
</thead>
<tbody>
<tr>
<td>ID Number</td>
<td>Can be modified by clicking and typing directly in the grid. Cannot be modified in a row for which an End Date exists.</td>
</tr>
<tr>
<td>Start Date</td>
<td>Automatically set to the current date when a new ID type is added.</td>
</tr>
<tr>
<td>End Date</td>
<td>Automatically set to the current date when the ID Invalid Flag is selected (marked) or when a new row with the same ID Type is added.</td>
</tr>
<tr>
<td>Comments</td>
<td>Can be modified by clicking and typing directly in the grid. Cannot be modified in a row for which an End Date exists.</td>
</tr>
</tbody>
</table>
The **Person Demographics** tab also contains three buttons that display at the bottom of the tab:

- **Address/Phone**
  - This button opens the *Maintain Primary Address and Phone* window for the closed Investigation stage, enabling you to modify the Primary Address or Primary Phone information for all persons associated with the closed Investigation stage.

  If you click on the **Address/Phone** button with unsaved changes pending on the LDM window, the following message displays: “Please save or cancel changes before maintaining address information.” Click on the **OK** button to close the message box. You can then click on the **Save** button to save your changes to the database or click on the **Cancel** button to exit the **Person Demographics** tab without saving your changes.

  If changes are saved and an in-process LDM event does not already exist, an LDM event is created. (This is only true if the LDM window was opened via the **Maintain Closed Investigation** command. No events are generated if the LDM window is opened via the **Maintain Closed Person Demographics** command.)

- **Save**
  - This button saves changes made on the tab. It is disabled until changes are made on the tab. Once you have saved information, the button disables again until the next time changes are made to the tab.

- **Cancel**
  - This button cancels all changes made to the tab since the last save. It is disabled until changes are made on the tab.

  If you click on this button, the following message displays: “Your changes will be lost. Continue?”

    - Click on the **Yes** button to discard any unsaved changes.
    - Click on the **No** button to leave the changes as you recorded them. (You will need to use the **Save** button to save the changes to the database.)

To correct person demographic information in the upper grid, simply click in a grid cell for an associated individual and either type the correct information into the cell OR, if a drop-down arrow displays in the cell, click on the drop-down arrow and select from the resulting list. Remember to save each change.
Step-by-Step:
Correcting/Updating Person Date of Birth Information
on the LDM Window

1 Click on the DOB grid cell (containing the existing Date of Birth information) for the individual whose information requires correcting/updating.
   The existing DOB information highlights and an arrow (▶) displays to the left of the respective person’s name, indicating that the person is selected.

2 Type the correct exact date of birth in the cell.

3 Click on the Save button.
   The following message displays:
   “Changes have been saved.”
   The Age field updates automatically to correspond with the data in the DOB field.
   If you attempt to access another field without saving, the following message displays: “Please save person demographic information.”
   Click on the OK button to close the message box.

4 If the DOB Type field reads “A” (approximate) or “E” (estimated), click in the cell to reveal the drop-down arrow.

5 Click on the drop-down arrow and select the blank at the top of the resulting list.
   The blank indicates that the information in the DOB field is exact.

6 Click on the Save button.
   The following message displays: “Changes have been saved.”
   If you attempt to access another field without saving, the following message displays: “Please save person demographic information.”
   Click on the OK button to close the message box.

7 To correct/update information in another field in the upper grid, select the grid cell for that field.
   Type corrected/updated information directly in the selected cell OR, if a drop-down arrow displays, click on the drop-down arrow and select from the resulting list. Be sure to click on the Save button after each change.

8 If you are finished correcting information on the Person Demographics tab, either click on another tab (to correct information on a different tab) or close the LDM session (see “Closing an LDM Session” on page 172 for details).

---

If a child’s age is corrected and results in an age older than 18 years for a CPS Familial/FC-DC case (or older than 21 years for an IAB case), the following message displays when you click on the Save button:

“Age over <18 or 21> years as of Intake. Continue with Save?”

---

If an Investigation stage was closed with the Fatality – No Surviving Children closure reason, the Date of Birth (DOB) of any person may not be changed to younger than 18 years old before the date of Intake. If you attempt to do this, the following message displays:

“Cannot update or add person less than 18 years of age. The stage was closed with Fatality – No Surviving Children.”

The only exception to this occurs if the person has a Date of Death (DOD) or is a subject in an allegation.
Step-by-Step: Correcting/Updating Race and Ethnicity Information on the LDM Window

1. Open the LDM window via the Case Summary window. See the step-by-step instructions on page 146. By default, the Person Demographics tab displays when the LDM window is opened.

2. Click on the gray box to the left of the name of the person whose information requires correction. An arrow (▼) displays to the left of the name, indicating that the person is selected.

3. To change ethnicity, click on the drop-down arrow for the Ethnicity field and select from the resulting list. Select either “Hispanic or Latino Origin” or “Non-Hispanic or Latino Origin,” as appropriate.

4. To specify categories within Hispanic or Latino origin, click on an origin’s checkbox from the list below the Ethnicity field. In order to select an origin in this field, “Hispanic or Latino Origin” must display in the Ethnicity field. An “X” displays in a specific origin’s checkbox when it has been selected. To clear a selection, click on the box again to remove the “X.” Multiple origins may be selected from the list box.

5. Click on the Save button to save the changes to the Ethnicity field. The following message displays: “Changes have been saved.”

6. In the Race field, click on a race’s checkbox from the list to select it. An “X” displays in the checkbox when it has been selected. To clear a selection, click on the box again to remove the “X.” Multiple races may be selected from the list box.

7. Click on the Save button to save the changes to the Race field. The following message displays: “Changes have been saved.”

8. If you are finished correcting information on the Person Demographics tab, either click on another tab (to correct information on a different tab) or close the LDM session (see “Closing an LDM Session” on page 172 for details).
The Add/Relate Person Tab

The Add/Relate Person tab enables you to:

- add new persons to CONNECTIONS and to closed Investigation stages;
- search for persons already in the CONNECTIONS database; and
- relate persons already in the CONNECTIONS database.

This tab disables and cannot be viewed when the LDM window is opened in view-only mode via the Event List.

Before a person can be related or added to a closed Investigation stage, you need to perform a Person Search on the individuals’ name. For this reason, the Add/Relate Person tab is formatted similarly to the Person Search window.

Conducting a Person Search on the Add/Relate Person Tab

The search functionality in LDM does not allow you to view details of individual Person Search results beyond what appears in the Results List in the lower half of the Add/Relate Person tab. You cannot select a result and navigate to the Case List, Case Composition window, etc., within LDM. Because of this limitation, you should conduct a more comprehensive Person Search from the CONNECTIONS Toolbar prior to entering LDM. In the Person Search window, you can confirm either the Person ID for a known individual, or verify that there is no match for a new individual in the database. Once the Person Search results are verified through the Toolbar search, the known person can be related or the new person added through LDM.

The Search Type field displays in the upper left corner of the tab. Click on the drop-down arrow for this field and select from the resulting list. The default Search Type is “Phonetic Name” when the tab is first opened.

The Add/Relate Person tab includes fields for the following search criteria:

- First Name
- Middle Name
- Last Name
- DOB (Date of Birth)
- Age
- Race
- Sex
- Phone
- Address Type
- Street
- PO Box/Apt
- City
- State
- County
- ZIP Code
- CD (NYC addresses only)
- SSN
- CIN
- Person ID
As on the Person Search window, the fields required to enable a search depend on the Search Type that has been selected. The type of search chosen also determines which additional search criteria may be entered. Required fields highlight in yellow; these fields represent the minimum amount of information needed to perform a search. When sufficient information is entered to perform a search, the Search button enables.

Search results display in the Person Search List in the lower section of the tab. The following fields display in the Person Search List:

- Match Name
- Person ID
- Race
- DOB
- County
- Ethnicity
- T (DOB type)
- Street Address
- SSN
- Sex
- City
- Primary Name
- Match (Match Type)
- Score

When the search is complete, a search result message displays in the Person Search List title bar. The message that displays is dependent on the results returned and the type of search conducted:

- Phonetic Name Search Results Returned
- Phonetic Address Search Results Returned
- Exact Results Returned
- No Results Returned

Adding or Relating a Person on the Add/Relate Person Tab

Once you have performed the Person Search and determined if the individual exists in the CONNECTIONS database, you need to add or relate that person to the stage, as appropriate.

Relating a Person

If one of the persons returned in the search results matches the person entered in the search criteria, that individual can be selected by clicking on the respective row on the Person Search List. Once the search has been performed and a person has been selected from the Person Search List, the Relate button enables. If any information on the Add/Relate Person tab is changed after the search, the Relate button disables until another search is performed.

**Step-by-Step: Relating a Person on the Add/Relate Person Tab**

1. Click on the drop-down arrow for the Search Type field and select from the resulting list. 
   *The default Search Type is “Phonetic Name.” Required fields highlight in yellow.*

2. Enter search criteria in the applicable fields.
3 Click on the **Search** button. The results display in the Person Search List in the lower section of the **Add/Relate Person** tab.

4 To select the person who is to be related, click on the gray box to the left of the person’s name on the Person Search List. To conduct another search, click on the **Clear** button. The Person Search List will remain populated with the results of the previous search.

5 Click on the **Relate** button. A validation is performed, comparing the information of the person selected in the Person Search List with the search criteria entered. The validation includes DOB, Sex, County, Relationship/Interest and Role (Abused Child vs. Alleged Subject). If any of these comparisons produces a mismatch, a message displays to that effect. The message provides you with the opportunity to continue with the relate function or cancel.

When a Relate is completed, the new information is saved to the CONNECTIONS database and the **Person Demographics** tab displays. The person just related is selected on the tab and the data for that individual reflects the updated information. The following message displays: “Primary Address from related person used.”

**Adding a Person**

If no records are located for a Phonetic Name search, or if none of the search results match the person entered in the search, the person needs to be added to the CONNECTIONS database and to the closed Investigation stage.

The **New** button on the **Add/Relate Person** tab opens the **Add Person** window. This window is pre-filled with the data entered into the search criteria on the **Add/Relate Person** tab. All fields can be modified, except the **First**, **Middle** and **Last** name fields and the **Role** field. Values for the Rel/Int, Ethnicity, Race and either DOB or Age fields must be recorded before you can add the new person to the CONNECTIONS database.

The layout of the **Add Person** window is similar to the **Person Detail** window that is accessed for open Investigation stages via the **Maintain Person** task on the **Task List**. (See “Updating the Person Detail Window” on page 111.)

◆ The **Role** field defaults to “Unknown”; this value cannot be changed.

◆ The Approx. **DOB** checkbox enables when you record a DOB.
Step-by-Step: Adding a Person on the Add/Relate Person Tab

1. Click on the drop-down arrow for the Search Type field and select from the resulting list. The default Search Type is “Phonetic Name.” Required fields highlight in yellow.

2. Enter search criteria in the applicable fields.

3. Click on the Search button. The results display in the Person Search List in the lower section of the Add/Relate Person tab.

4. If the individual to be added is not listed in the search results, or if no results return, click on the Add button. The Add Person window displays.

   Note: The New button enables only after a Phonetic Name search has been performed. The button remains disabled after any other type of search. If any information on the tab is changed after the Phonetic Name search, the New button disables again until another Phonetic Name search is conducted.

5. Complete the Add Person window by recording information in the appropriate fields. Fields are completed by:
   —typing directly in the field;
   —clicking on the drop-down arrow and selecting from the resulting list; or
   —clicking on a checkbox.

   After all required fields are completed, the Save and Cancel buttons enable at the bottom of the tab.

6. Click on the Save button to add the person to the closed Investigation stage. The information is saved to the CONNECTIONS database and the Person Demographics tab displays. The person you just added is selected on the tab and the data for that individual reflects the updated information. If the address fields were left blank when you added the person on the Add Person window, the following message displays: “No primary address added for new person.” Clicking on the Cancel button clears the fields on the Add Person window and displays the Add/Relate Person tab.

Keep in mind that the name fields on the Add Person window cannot be modified. If the person’s name is incorrect, you need to click on the Cancel button on the Add Person window, update the person’s name on the Add/Relate Person tab, conduct another Phonetic Name search and click on the New button again.
The Allegations Tab

The Allegations tab enables you to:

- view, correct or add allegation information;
- delete allegations other than those recorded at Intake; and
- view, correct, add or delete injury details for specific allegations.

Remember, Local Data Maintenance is a corrective process only. Examples of appropriate use of the LDM function include:

<table>
<thead>
<tr>
<th>Allegation</th>
<th>Substantiation Corrections</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>One or more of the original allegations were substantiated and should have been unsubstantiated (or vice versa) and the original narrative supports the corrected decision. It is important to remember that if the subject has received a letter (either a Notice of Indication from the local district or a Notice of Unfounding from the SCR) based on the original determination, the district is responsible for sending a corrected letter.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Allegation</th>
<th>Association Corrections</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The original allegations and substantiations were not correctly associated with the appropriate child and/or subject (e.g., “allegations should have been substantiated for the mother and unsubstantiated for the grandmother, not vice versa”; or “bruises should be substantiated for the 8 year old and unsubstantiated for the 5 year old, not vice versa”). Remember, the original narrative must support the corrected information. Corrected notification letters need to be sent, as appropriate.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Adding Individuals and/or Allegations</th>
</tr>
</thead>
<tbody>
<tr>
<td>The original report from the SCR listed two children left unsupervised. There were actually three children left unsupervised, but you forgot to add the third child while the investigation was open. Again, the original narrative must support the corrected information. If additional subjects or “other persons named” are added to the closed investigation, appropriate notification letters need to be sent.</td>
</tr>
</tbody>
</table>

The upper grid of the Allegations tab lists the following information for all allegations for the Investigation stage:
<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>MA/AB Child</td>
<td>The MA/AB Child column displays the names and Person ID numbers of every child listed in the stage identified as an MA/AB child. If this information was not recorded at Intake, clicking on the drop-down arrow displays a list containing the names and Person ID numbers of every child listed in the stage. Select from this list to identify an individual as an MA/AB child for a new or corrected allegation. These fields cannot be modified if the allegation was recorded at Intake.</td>
</tr>
<tr>
<td>Alleged Subject</td>
<td>The Alleged Subject column displays the names and Person ID numbers of every person listed in the stage who is identified as an Alleged Subject. If the allegation was not recorded at Intake, clicking on the drop-down arrow displays a list containing the names of every person not identified as an MA/AB child. Select from this list to identify an individual as an Alleged Subject for a new or corrected allegation. These fields cannot be modified if the allegation was recorded at Intake.</td>
</tr>
<tr>
<td>Allegation</td>
<td>The Allegation column displays the allegations associated with each MA/AB Child. If the allegation was not recorded at Intake, clicking on the drop-down arrow displays a list containing all possible allegations. Select from this list to add a new allegation or correct an existing allegation. These fields cannot be modified if the allegation was recorded at Intake.</td>
</tr>
<tr>
<td>Unsub/Sub</td>
<td>When selected, the Unsub/Sub column displays a drop-down list with two choices: Substantiated or Unsubstantiated. For allegations recorded at Intake, this is the only field that can be modified on the Allegations tab for the selected Investigation stage.</td>
</tr>
<tr>
<td>Stage</td>
<td>This field specifies the stage (INT or INV) in which the allegation was recorded. This field cannot be modified.</td>
</tr>
</tbody>
</table>

The lower grid of the Allegations tab displays injury details for a selected allegation. In order to view injury details, an allegation must be selected in the upper grid.
Step-by-Step:
Adding a New Allegation on the LDM Window

1. Click on the Allegations tab to open it.

2. Click in the blank, bottom-most line of the upper grid to add an allegation. *This line is marked with a star. If necessary, use the vertical scroll bar on the right side of the tab to display the blank line.*

3. Click on the drop-down arrow for the MA/AB Child and select from the resulting list.

4. Click on the Alleged Subject field and select from the resulting list.

5. Click on the Allegation field and select from the resulting list. *If you select an allegation in which injury information should be recorded, follow the instructions for “Adding or Correcting Injury Information on the LDM Window” on page 164. See the table on page 227 for a complete list of allegations.*

6. Click on the Unsub/Sub field and select from the resulting list.

7. Click on the Save button to save the allegation to the database. *You must save after adding each allegation or making changes to any row on the Allegations tab in order for the changes in that row to be stored in the CONNECTIONS database. If you attempt to access another row before clicking on the Save button, a message displays, reminding you to save your changes before proceeding.*

8. When you have finished making all of the necessary corrections for this LDM session, proceed with closing the session (see page 172).

Step-by-Step:
Correcting an Allegation on the LDM Window

1. Click on the Allegations tab to open it.

2. Click on the gray box to the left of an existing allegation. *A pencil symbol displays in the gray box, indicating that the row is selected.*

3. Click on the drop-down arrow for the MA/AB Child, Alleged Subject, Allegation and/or Unsub/Sub field(s), as appropriate, and select from each resulting list. *If the allegation was recorded during the INT stage, only the determination can be changed. If you select an allegation in which injury information should be recorded, follow the instructions for “Adding or Correcting Injury Information on the LDM Window” on page 164. See the table on page 227 for a complete list of allegations.*
4 Click on the **Save** button to save the allegation to the database. You must save after adding each allegation or making changes to any row on the **Allegations** tab in order for the changes in that row to be stored in the **CONNECTIONS** database. If you attempt to access another row before clicking on the **Save** button, a message displays, reminding you to save your changes before proceeding.

5 When you have finished making all of the necessary corrections for this LDM session, proceed with closing the session (see page 172).

**Adding or Correcting Injury Information on the LDM Window**

When an allegation is selected in the *upper grid* of the **Allegations** tab, an arrow displays to the left of that allegation row and the *lower grid* displays the following information for all injuries associated with that allegation:

- Injury Side
- Injury Area
- Injury Type
- Injury Cause
- Comments

---

**Step-by-Step: Adding Injury Information for New Allegation on the LDM Window**

1. Add a new allegation in the upper grid or select an existing allegation. See “Adding a New Allegation on the LDM Window” on page 163 for step-by-step instructions.

2. In the blank row (marked with a star) in the *lower grid*, click on the drop-down arrow for the **Injury Side**, **Injury Area**, **Injury Type** and **Injury Cause** fields and select from each resulting list. *The drop-down arrow displays when you click in each associated cell.*

3. Click in the **Comments** field and type directly into the field to record comments for the associated injury.

4. Click on the **Save** button. *The following message displays: “Changes have been saved.”*

5. To add another injury for this allegation, repeat **Steps 2** through **4** above. *You need to click on the **Save** button after adding each row to the lower grid. If you do not save after adding each row, a message displays, reminding you to save the changes.*

6. When you are finished adding and saving injury information, you can proceed to another allegation or tab, or close the LDM session (see page 172).
Step-by-Step: Modifying Injury Information for Allegation on the LDM Window

1. Click on the gray box to the left of an allegation in the upper grid to select it. The injury information currently recorded for that allegation displays in the lower grid.

2. In the corresponding row in the lower grid, click on the drop-down arrow for the Injury Side, Injury Area, Injury Type and Injury Cause fields and select from each resulting list to modify the injury information, as appropriate. The drop-down arrow displays when you click in each associated cell.

3. Click in the Comments field and type directly into the field to modify or record new comments for the associated injury.

4. Click on the Save button. The following message displays: “Changes have been saved.”

5. When you are finished modifying and saving injury information, you can proceed to another allegation or tab, or close the LDM session (see page 172).

Step-by-Step: Deleting an Allegation on the LDM Window

1. Click on the gray box to the left of an allegation in the upper grid to select it. Only allegations added during the INV stage or through LDM can be deleted.

2. Click on the Delete button in the lower left corner of the Allegations tab. The following message displays: “Delete the selected allegation?”

3. Click on the Yes button. The following message displays: “Delete successful.”

4. Click on the Save button. The following message displays: “Changes have been saved.”

If an Investigation stage was closed with the Fatality – No Surviving Children closure reason, you cannot delete the last allegation against a subject who was born less than 18 years before the date of Intake. Deleting this last allegation would change the person’s role from Subject to Child. If you attempt to delete the last allegation, the following message displays: “Cannot remove allegation.”
If you are retaining an allegation, but you need to delete an injury associated with that allegation, proceed with the following step-by-step instructions.

### Step-by-Step: Deleting Injury Details from an Allegation on the LDM Window

1. Click on the gray box to the left of an allegation in the *upper grid* to select it.
2. Click on the gray box to the left of an injury row in the *lower grid* to select the injury to be deleted.
   
   *Make sure you select the injury in the lower grid before deleting; if an allegation is selected in the upper grid, but no injury row is selected in the lower grid, the allegation itself will be deleted, rather than the injury.*

3. Click on the **Delete** button in the lower left corner of the **Allegations** tab.

   *The following message displays:*
   
   “Delete the selected injury?”

4. Click on the **Yes** button.

   *The following message displays:*
   
   “Delete successful.”

5. Click on the **OK** button.

6. Click on the **Save** button.

   *The following message displays: “Changes have been saved.”*

After saving changes to the **Allegations** tab, attempting to open a tab other than the **Investigation Conclusions** tab or attempting to close the LDM window will automatically open the **Investigation Conclusions** tab. This allows for the review of any changes made to the Overall Determinations and the updating of the Investigation Conclusions Narrative.

If you need to cancel changes you’ve made to the **Allegations** tab since the last save, click on the **Cancel** button. The following message displays: “Your Changes Will Be Lost. Continue?”

- Clicking on the **Yes** button discards any unsaved changes.
- Clicking on the **No** button abandons the cancellation process. You can then use the **Save** button to save your changes on the **Allegations** tab.

Here are a few additional tips to keep in mind regarding the **Allegations** tab:

- The High Priority (NYC only) indicator, Roles and Overall Determinations for the stage are re-calculated when changes to the **Allegations** tab are saved.
- If the Overall Determination for the stage changes as a result of corrections/updates made to the **Allegations** tab, the system clears the Current Closure Reason on the **Investigation Conclusions** tab. You need to open the **Investigation Conclusions** tab and select a new Current Closure Reason for the stage (see “Correcting/Updating the Closure Reason and the Investigation Conclusions Narrative” on page 170).
- Other tabs of the LDM window disable when there are unsaved changes on the **Allegations** tab.
• If you click on the **Close** button when there are unsaved changes on the **Allegations** tab, the following message displays: “**Save changes in progress?**”
  - Clicking on the **Yes** button saves the changes and displays the **Investigation Conclusions** tab.
  - Clicking on the **No** button discards your changes and closes the LDM window.
• If the LDM window is opened in view-only mode via the **Event List**, no fields on the **Allegations** tab are modifiable; the only active button is the **Close** button.

The Investigation Conclusions Tab

The **Investigation Conclusions** tab enables you to:

- view original, previous and current Closure Reasons and Determinations for the closed Investigation stage;
- modify current Closure Reasons for the closed Investigation stage;
- view Investigation Conclusion narrative for the closed Investigation stage; and
- append LDM comments to the end of the Investigation Conclusion narrative (previously recorded narrative content is write-protected).

The layout of the **Investigation Conclusions** tab is different from the other three tabs; rather than having **upper** and **lower** grids, the **Investigation Conclusions** tab has **left** and **right** grids. The **left grid** displays information about Investigation Determinations; all of the information in the left grid is view-only.

<table>
<thead>
<tr>
<th>Original Determination</th>
<th>This field is view-only and displays the original determination. The information cannot be modified.</th>
</tr>
</thead>
</table>
| Current Determination  | This field displays the most recent saved determination for the stage. It is view only; the information cannot be modified.  
  Determination is calculated based on the allegations displayed on the **Allegations** tab. |
|                        | - When a new “current” determination is calculated, the previous “current” determination is added to the **Previous Determinations** list box (see below) with the current system date and the name of the worker who made the change. |
|                        | - When an Investigation stage is first closed, the **Current Determination** and the **Original Determination** are the same. |
| Previous Determinations/ Date/ Changed By | Information about Previous Determinations is contained in the columns on the left side of the tab. This information includes **Previous Determination** (the determination type), **Date** (the date on which the determination was changed) and **Changed By** (the name of the worker who made the change). The information in this section is view-only; it cannot be modified. |
The following fields only display for INV stages if the stage was closed with a WMS Case Number prior to Build 18 Implementation:

**WMS Case Number**

This field enables if the stage’s County code is in the range of either 01-58 or 70-74 and one of the following was selected as the current **Closure Reason:**

- Open – Court Ordered Services
- Open – Court Ordered Supervision
- Open – Voluntary Services
- Open – Voluntary Placement
- Open – Court Ordered Placement

If the **WMS Case Number** field is cleared when the WMS number is required by the stage’s district (based on the current **Closure Reason**), the field will highlight in yellow and the following message displays:

“WMS Case Number required.”

The new WMS Case Number will not be saved to the database automatically; you must click on the **Save** button on the **Investigation Conclusions** tab in order to save the new WMS Case Number, validation indicator, date of validation, and the district code of the Primary worker of the stage when it was closed.

**WMS # Validated (checkbox)**

This button enables only when the WMS number has been changed (and not yet validated); the **WMS # Validated** checkbox is never enabled, since the system will populate this checkbox automatically when the **WMS Case Number** is validated. If you change the information in the **WMS Case Number** field, this checkbox will be unchecked automatically.

This checkbox will not display on the **Investigation Conclusions** tab for IAB Investigations.

**Validate WMS button**

If the new value in the **WMS Case Number** field begins with the letter S, it is a potential WMS Case Number and the **Validate WMS** button enables. Changing the field to any value that does not begin with the letter S will turn the field red and disable both the **Validate WMS** and **Save** buttons on the tab.

When you click on the **Validate WMS** button, LDM will query the legacy system to verify if the entered WMS Case Number is valid and/or currently active in the stage’s district. If the WMS Case Number is valid and active, the **WMS # Validated** checkbox populates automatically and the **Validate WMS** button disables.

This button will not display on the **Investigation Conclusions** tab for IAB Investigations or for Build 18 Implemented Districts.
The right side of the tab displays information about Closure Reasons:

<table>
<thead>
<tr>
<th><strong>Original Closure Reason</strong></th>
<th>This field is view-only. The information cannot be modified. All INV stages submitted for closure after Build 18 was implemented for any district will use the new closure reasons.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current Closure Reason</strong></td>
<td>This field displays the most recent saved Closure Reason for the stage. The information in this field can be changed by clicking on the drop-down arrow for the field and selecting a new Closure Reason from the resulting list. Only the new Closure Reasons display on the list.</td>
</tr>
<tr>
<td></td>
<td>• If you change an “Open” Closure Reason (e.g., “Open – CPS required”) to a “Closed” Closure Reason (e.g., “Closed – No services required”)—or vice versa—the following message displays: “Remember to update the Case Status, if necessary.” The message does not display if an “Open” Closure Reason is changed to another “Open” Closure Reason (or if a “Closed” Closure Reason is changed to another “Closed” Closure Reason).</td>
</tr>
<tr>
<td></td>
<td>• When a new “Current” Closure Reason is recorded and saved, the previous “Current” Closure Reason is added to the Previous Closure Reason list with the current system date and the name of the worker who made the change (see below).</td>
</tr>
<tr>
<td></td>
<td>• The first time an Investigation stage is closed, the Current Closure Reason and the Original Closure Reason are the same.</td>
</tr>
<tr>
<td></td>
<td>• If an open FSI or FSS was created from the Investigation stage and the Current Closure Reason is changed to “Closed – No services required,” “Closed – Refused services,” Closed – Unable to contact/moved out of jurisdiction” or “Closed – Services refused/unable to take or continue legal action,” the following message displays: “Determination or Closure Reason inconsistent with existing FSI/FSS.”</td>
</tr>
<tr>
<td><strong>Previous Closure Reasons/Date/Changed By</strong></td>
<td>Information about Previous Closure Reasons is contained in the columns on the right side of the tab. This information includes Previous Closure Reason (the closure type), Date (the date on which the closure reason was changed) and Changed By (the name of the worker who made the change). The information in this section is view-only; it cannot be modified.</td>
</tr>
</tbody>
</table>
Four buttons display at the bottom of the Investigation Conclusions tab in LDM:

**Narrative**
This button opens the Investigation Conclusion narrative.

**Risk Comments**
This button opens the Current Risk Comments window. If a closed stage has an associated RAP with a Final Risk Rating of High or Very High and you change the current Closure Reason, you may need to record High Risk Comments for the new Closure Reason. If the stage already has High Risk Comments recorded for the Current Closure Reason, you may be able to add comments. You will also be able to view the High Risk Comments associated with the Previous Closure Reason.

When changes or additions are completed in the Additional Risk Comments field, clicking on the OK button will store the changes and close the window. The OK button does not save the changes, but stores them locally until you click on the Save button on the Investigation Conclusions tab.

This button will not display on the Investigation Conclusions tab for IAB Investigations.

**Save**
This button saves the information recorded on the tab to the database.

**Cancel**
This button cancels any unsaved changes, including unsaved comments recorded on the Current Risk Comments window.

If the Overall Determination for the stage changes as a result of modifications to the Allegations tab, the following system edits will require action before you can close the LDM window:

- The system will clear the Current Closure Reason field on the Investigation Conclusions tab. If you click on the Save button without selecting a new Current Closure Reason, the following message displays: “Please select a Closure Reason before saving.”
- The Narrative button disables until a new Current Closure Reason is selected.

---

**Step-by-Step: Correcting/Updating the Closure Reason and the Investigation Conclusions Narrative**

1. Click on the Investigation Conclusions tab to open it.
2. Click on the drop-down arrow for the Current Closure Reason field and select from the resulting list.
   - The Narrative button enables. If you click on the Save button on the Investigation Conclusions tab without opening the Investigation Conclusion narrative (or try to close the LDM window before updating the narrative), navigation to other tabs or windows is disabled and the following message displays:
     
     “Changes to Allegations and Investigation Conclusions must have supporting documentation in the Conclusions Narrative.”
3 Click on the **Narrative** button.
*The Investigation Conclusion narrative displays as a Microsoft Word document. All narrative information currently included in the document is view-only.*

4 Scroll to the end of the narrative document.  
*The following text displays at the end of the write-protected section of the narrative:*  

“Narrative entered by <worker name>  
<(worker’s Person ID)> on <date> at <time>.”

5 Enter new comments after the above text.

6 Click on the **File** menu and select **Close**.  
*The following message displays:*  

“Save changes?”

7 Click on the **OK** button.  
*The changes are saved to the CONNECTIONS database and the following message displays:*  

“Changes have been saved.”

8 When you have finished correcting and saving information on this tab, you can select another tab or proceed with the LDM closing process (see page 172).
Closing an LDM Session

When you have recorded (and saved) necessary corrections to the closed Investigation stage, you can end the LDM session by clicking on the **Close** button in the lower right corner of the LDM window and responding “Yes” to the LDM-Complete Event.

The LDM session can be closed once all necessary changes have been made. If a session is closed “in process,” only the LDM window closes and you may return later to finish correcting information for a closed Investigation stage.

---

**Step-by-Step: Closing an LDM Session**  
(LDM Accessed via the Case Summary Window)

1. Click on the **Close** button in the lower right corner of the LDM window.  
   *If any unsaved changes exist on the active tab, the following message displays: “Save changes in progress?”*  
   —Click on the **Yes** button to save the changes.  
   —Click on the **No** button to discard changes.

   *If the LDM window was opened via the Maintain Closed Investigation command (which creates an LDM event) and any changes were made to the LDM window, the following message displays: “Is LDM complete?”*  
   —Click on the **Yes** button to update the LDM event status to “COMP.”  
   —Click on the **No** button to leave the event status as “PROC.”

   **Note:** Neither of these messages displays if the LDM window is opened in view-only mode.

2. Click on the **Close** button to close the **Case Summary** window.  
   *The Case List displays.*

3. Click on the **Close** button to close the **Case List**.  
   *The Case Search Criteria window displays.*

4. Click on the **Cancel** button to close the **Case Search Criteria window.**

---

**Step-by-Step: Closing an LDM Window**  
(LDM Accessed via the Event List)

1. Click on the **Close** button in the lower right corner of the LDM window.  
   *The Event List displays.*

2. Click on the **Close** button to close the **Event List**.  
   *The Case List displays.*

3. Click on the **Close** button to close the **Case List**.  
   *The Case Search Criteria window displays.*

4. Click on the **Cancel** button to close the **Case Search Criteria window.**
LDM and the Notice of Unfounding

To allow for potential LDM changes to closed Investigation stages, the generation of Notices of Unfounding by batch process is delayed until 14 days after the Investigation Conclusion is approved. A Notice of Unfounding will *not* be generated if an in-process LDM event exists.

If an unfounded Investigation stage contains an in-process LDM event that was initiated *less* than 14 days after the Investigation closing date, the Notice of Unfounding is not generated until 14 days after the LDM event status is updated to “COMP.”

The local district is responsible for creating and sending the Notice of Unfounding as a result of LDM changes to the determination that occur more than 14 days after the closing date.

A person who is younger than 18 years and is a non-confirmed subject in an unfounded Investigation stage must receive a Notice of Unfounding.
Module 9:
Documenting and Concluding an Investigation

Concluding an Investigation is required within 60 days from the date of Intake. Five important decisions that are part of this conclusion consist of the following:

1. Safety Assessment
2. Risk Assessment Profile
3. Each allegation is either substantiated or unsubstantiated
4. The report is either Indicated or Unfounded
5. The case is either Closed or Opened for services

The guidelines for the Elements of Abuse and the Elements of Maltreatment, as well as the guidelines regarding who can be considered a subject, must be followed when concluding the investigation. Each element of the definition must be satisfied. These guidelines can be found in Appendix C of this guide.

During your investigation you will use CONNECTIONS to record the tasks you have completed, including the beginning and end dates of the investigation, the recommended reason for closing the Investigation stage of the case, all recorded information that supports that determination, and your prepared narrative summarizing your work in the investigation.

These tasks serve seven important functions:

- By recording information related to the child(ren)’s safety, you are documenting your assessment of whether a child is safe or unsafe. If unsafe, document what interventions have been used to protect the child(ren).
- By recording the tasks you completed and the dates of the investigation, you document your compliance with legal requirements pertaining to an investigation.
- By recording information related to the presence or absence of risk factors in the family, you are using a research-based assessment tool to calculate the level of risk and the likelihood of recurrence of child abuse and maltreatment.
- The information you record about the allegations and any related injuries helps you determine whether or not to substantiate the allegations and provides documentation that supports that substantiation.
- By preparing a full narrative of your investigation, you provide a historical record of your analysis and decision making. This narrative is a part of the official case record and may be available to courts and others who may need it.
- By recording a reason for closing the investigation stage, you determine what happens next for the case (e.g., whether it remains open for services or is closed altogether).
- By using the statutory definitions of subject, abuse and maltreatment (see Appendix C), you can make sure the facts of the case support these definitions.

An investigation is only one stage in the life of a case. The people linked to the stage that you are working on may show up in future cases or stages. What you do at this point in the process ensures your work on this stage can be used in the future.
By the end of this module, you will be able to:

- record case information in the Child Protective Record Summary;
- complete a Safety Assessment;
- add and update information about allegations and record injury information;
- answer the Investigation Actions Questions;
- complete the *CPS Investigation Conclusion* window;
- submit a concluded stage for supervisory approval;
- print the Notice of Indication; and
- print the Mandated Reporter Letter.
Recording Progress Notes

Progress notes are kept on all child protective investigations and open child welfare services cases, providing documentation of all casework activities associated with CPS investigations and provision of services. Progress notes document the timely activities of casework staff and the information acquired during these activities. They also capture the decision-making and actions by you and other staff or service providers to provide for the safety, permanency and well being of children and to reduce the risk of future abuse or maltreatment. Progress notes include all contacts and attempted contacts made by the you or other district or agency staff assigned to the case. A listing of the types of contacts to be recorded in progress notes can be found in Appendix D1.

There are some security measures to keep in mind when recording progress notes. Some of you may be authorized to complete your job functions outside of the office (e.g., using a laptop computer, cellular phone or handheld devices); when working from a remote location, the following security controls need to be considered and are not limited to:

- the existing physical security of the remote location;
- the communication security requirements;
- the sensitivity of the information that will be accessed and transmitted; and
- the threat of unauthorized access.

See your supervisor or CONNECTIONS Security Coordinator for more information regarding this.

Portable computer devices should not be used to store or transmit non-public information without protective measures in place. When using mobile computing devices such as laptops, Personal Digital Assistants (PDAs) and cellular phones, take special care to ensure that information is not compromised.

When traveling, do not check transportable electronic devices in airline luggage systems if they contain or can access confidential information. Confidential information should be removed on a regular basis.

Dial-up modems should not be connected to computer systems that are on a LAN or another internal communication system, unless approved by OCFS. Also, no wireless network or wireless access point should be installed without performing a risk assessment and obtaining appropriate written approval from the OCFS Information Security Officer.

Anti-virus software will protect against the vast majority of viruses and other vulnerabilities, but it’s not fool-proof. Everyone has a responsibility to ensure proper precautions are taken to protect the network and ensure viruses don’t get in or get spread.

Progress notes begin on the case initiation date or upon receipt of a report of suspected abuse or maltreatment for child protective service cases, and continue until the case is closed to all child welfare services. Progress notes need to be recorded as soon as possible after the event occurred or the information is received to ensure an accurate, contemporaneous account of the event.

An important confidentiality impact should be noted: The name or other information identifying the reporter and/or the source of a report of suspected child abuse or maltreatment, as well as the agency, institution, organization and/or program with which such persons are associated,
must only be recorded or documented in Investigation stage Progress Notes, and any such note must be identified by recording the “reporter/source” as Other Participant.

This information should not be included elsewhere in the record (that is, it should not be included in other narrative areas of the Investigation stage, such as Safety Assessment, Risk Assessment, Investigation Actions, Investigation Conclusion; nor any Initial, Comprehensive, Reassessment or Plan Amendment FASP; nor any progress notes not maintained by the Child Protective Service).

Your ability to access, view and maintain progress notes is dependent on a number of factors. There are three distinct security rights that you need in order to work with progress notes in CONNECTIONS. Your role in the stage and your need to complete certain tasks dictates the rights that are assigned to you.

In order to create notes, you must be:
- assigned a role in the stage;
- within the assigned worker’s unit hierarchy;
- assigned the ENTER PROG NOTE Business Function; or
- assigned a Progress Notes Task To-Do.

In order to modify notes, you must be:
- the progress note’s Author; or
- the progress note’s Entered By person.

If the author has been identified as “Other,” then only the Entered By person can modify a note.

In order to view notes, you must have access to the Child Protective Record Summary (CPRS).

There are times when someone other than a worker or supervisor, such as clerical staff, will record progress notes in CONNECTIONS. Those workers are assigned the ENTER PROG NOTE Business Function, which enables them to create and/or modify progress notes for a stage. Workers with this Business Function will access the progress notes from the Case Summary window; only the Progress Notes tab will be accessible in the CPRS. If that same type of worker receives a user-generated Task To-Do to complete a progress note, s/he will have access only to the Progress Notes Detail window and Progress Notes tab. All other tabs will be disabled.

At times, stage assignments may change during the course of an investigation. For example, Worker “A” unassigns Worker “B” (who is the author of notes in draft status) from the stage. When Worker “A” clicks on the Save button, the following warning displays:

“You are about to remove a worker who has DRAFT Progress Notes in this stage. Continue?”

- Clicking on the Yes button will save the reassignment. The Author of the note will no longer be able to access the notes. If the Entered By person has the ENTER PROG NOTE business function, s/he will still be able to modify notes.
- Clicking on the No button will not save the reassignment; you will be returned to the Assign window.

There are some additional security guidelines to keep in mind when working with confidential information. Avoid using Internet, third-party or wireless fax services to send or receive faxes
containing confidential information. If it is necessary to send confidential information via fax, be sure to verify the phone number prior to sending the fax and contact the recipient to ensure the fax is picked up immediately. Also, avoid sending teleconference call-in numbers and passwords to a pager if sensitive information will be discussed in the conference; confirm that all participants are authorized to participate prior to starting any discussion.

Precautions need to be taken when exchanging information over the telephone. Take care that you are not overheard when discussing confidential matters on the telephone. You should avoid leaving sensitive or confidential messages on voicemail systems. Take extra precautions when using mobile devices in public areas outside of the workplace. Any use of wireless or cellular phones should be avoided when discussing sensitive or confidential information.

Accessing Progress Notes to Create or Modify a Note
There are three primary ways to access Progress Notes to create or modify a note:

**CPRS Task**
- From the Task List for an Investigation stage, select the Child Protective Record Summary task and click on the Detail… button.
- Click on the Progress Notes tab. The Progress Notes Detail window displays.

**Task To-Do**
- From the Case To-Do List or Staff To-Do List, select the Progress Notes Task To-Do and click on the Navigate… button. The Progress Notes Detail window displays.

**Case Summary Window**
- From the Case Summary window, click on the Options menu and select the Enter Progress Notes command. The Progress Notes Detail window displays.

Accessing Progress Notes to View Notes
There are four primary ways to access Progress Notes to view notes for open stages.

**CPRS Event**
- From the Event List, select a CPRS event and click on the Detail… button.
- Click on the Progress Notes tab.
- Select a note from the Progress Notes tab.
- Click on the View Note button.

**CPRS Task**
- From the Task List for an Investigation stage, select the Child Protective Record Summary task and click on the Detail… button.
- Click on the Progress Notes tab.
- Select a note from the Progress Notes tab.
- Click on the View Note button.
Task To-Do

- From the Case To-Do List or Staff To-Do List, select the Progress Notes Task To-Do and click on the Navigate... button. The Progress Notes tab displays.
- Select a note from the Progress Notes tab.
- Click on the View Note button.

Case Summary Window

- From the Case Summary window, click on the Options menu and select the Enter Progress Notes command. The Progress Notes tab displays.
- Select a note from the Progress Notes tab.
- Click on the View Note button.
The Progress Notes Tab

The Progress Notes functionality has two main components: The Progress Notes Detail window, which is used to record and modify individual progress notes, and the Progress Notes tab itself, which is used to search for notes, as well as to sort and filter the search results.

Progress Notes Detail Window

The creation of a new note is completed via the Progress Notes Detail window. Modifying, duplicating, saving and printing progress notes can also be completed on this window. The window is separated into two main parts:

- You'll use the data fields to record contact-specific data, such as who was contacted, when and where the contact was made. Some data fields are system-populated, others are required, and still others are optional.

- You'll use the narrative to record clear, descriptive and factual information about the events, conversations and resolutions that took place during the contact. Your impressions or opinions, and relevant information to support these, can also be expressed and should be labeled as such, as well as the participation and perceptions of family members in the planning for services. The narrative has a text tool control feature, which enables you to use certain Microsoft Word-like formatting and functionality. See page 193 for a complete listing of the features that are available.

The Type, Method of Contact and Author fields are required for all notes. Based on the selections made for Type and Method of Contact:

- some fields are required;
- some fields are enabled or disabled; and
- some of the choices in the drop-down lists may change.

For a listing of types of information that are recorded in CONNECTIONS, see Appendix D1.

All CPS staff must record any identifying information related to contacts with the reporter/source in Investigation stage progress notes only, selecting Reporter/Source in the Other Participant field on the Progress Notes Detail window.

Information identifying the reporter/source, including the agency, institution, organization, and/or program with which such person(s) is associated should not be documented in any other part of the Investigation stage, including Safety Assessments, the Risk Assessment Profile, Investigative Actions, or Investigative Findings.
The following fields display on the Progress Notes Detail window:

**Event Date**
The date the contact took place; this is a required field for any note (except those with a Type of “Summary”). Clicking on the checkbox will populate this field with a check mark. The Event Date field defaults to today’s date. If you’d like to change that date to a date in the past, click on the drop-down arrow and select a date from the calendar.

**Type**
Indicates the type of contact made. This is a required field. You can select one or more Type(s) for a note, but you must select at least one type. If you select more than one, “multiple” displays in the field. See the table on page 188 for a list of possible types.

**Method of Contact**
Describes how or by what means the contact was made (e.g., Face to Face, Phone). This field is required and contains a drop-down list with options. Methods are available based on the Type of contact you select. See page 188 for a list of possible methods and situations when certain choices are available.

**Time**
The time the contact occurred in hours and minutes (with AM and PM [e.g., 1:00 PM], or military time [e.g., 13:00]).

**Unannounced Visit**
Indicates that contact was made without a prearranged appointment. This checkbox is enabled only when the Type of contact is “Attempted Casework Contact” or “Casework Contact.”
**Location of Contact**

Identifies where the contact took place. You select the location from a drop-down list. For a list of possible choices, see page 188. There are times when this field is required, enabled or disabled, depending on the responses you select in other fields. See Appendix D2 for details.

**Family Participant/Focus**

This field contains the list of persons identified on the Person List who are part of any concurrently open stages. It is system-populated and cannot be modified. Two checkboxes within this field can be selected:

- The **Family Participant** (FP) checkbox allows you to indicate which family participant(s) were present at the contact. There are times when this checkbox is required, enabled or disabled, depending on the responses you select in other fields. See Appendix D2 for details.

- The **Focus** checkbox allows you to indicate which individual(s) from the Person List is the focus of a particular contact. There are times when this checkbox is required, enabled or disabled depending on the responses you select in other fields. See Appendix D2 for details.

**Family Participants** are any family members who are present at the contact (e.g., a phone call from the biological father or a family visitation with the mother); the **Focus** refers to the individual(s) about whom the contact occurred. For example, if you, the teacher and the mother met to discuss the child’s Independent Education Plan (IEP), the mother would be the Family Participant and the child would be the Focus (even though he was not present), because the purpose of the meeting was to discuss his IEP. The teacher would be included as an **Other Participant**.

This field also features the **All** button, which applies only to the **Family Participant** field. It enables you to select all of the individuals in the family for that note’s contact. This can be a time-saver, since you do not need to select each person individually. If, for example, all family members except one or two were present for the contact, you can click on the **All** button to select everyone in the family, then click on the corresponding checkbox(es) to **deselect** the few individuals who were not present.

You cannot save a progress note without selecting a Family Participant (or Other Participant) when one is required; the **Save as Draft** and **Save as Final** buttons do not enable until a Family Participant or Other Participant is selected.

**Other Participant**

This field contains a list (by category, not name) of others outside the Person List for the case who may be participants or contacts involved in the case. You can select one or more participants on the **Other Participant** window for each note. If you select more than one, “multiple” displays in the field. For a list of possible choices, see page 188. There are certain situations when this field is...
required, enabled or disabled; Appendix D2 identifies these circumstances.

**Author**
This required field indicates the person who made the contact or directly acquired the information being written about. The list of choices will be comprised of the assigned worker(s) in the district/agency, anyone assigned in or out in that unit, and “Other.” When the Entered By worker is an assigned worker, the Author field will default to the name of that worker. You can select a different Author, if necessary.

**Entered By**
This field contains the system-populated name (based on Person ID) of the worker recording the note in CONNECTIONS.

**Dist./Agy**
This system-populated field indicates the code of the District/Agency of the worker in the Entered By field.

**Entry Date**
This field reflects the date the window is first accessed. This date is system-filled and cannot be modified.

**Purpose**
The purpose of, or reason for, the contact. (See page 188 for a drop-down list of possible choices and for direction regarding when some of these choices will be available.) You can select more than one Purpose for a note. If you select more than one, “multiple” displays in the field. See Appendix D2 for details regarding when this field is enabled or disabled.

**Progress Notes Narrative**
In this required field, the Author or Entered By person documents all of the details pertaining to the note.

The following buttons display at the bottom of the Progress Notes Detail window:

**Copy Note**
Clicking on this button initiates the action of copying a saved note. This button is disabled when you open the Progress Notes Detail window in modify mode and make changes. The button enables when:

- a note is selected on the Progress Notes tab or displayed in the Progress Notes Detail window; and
- the open “copied to” Investigation stage has the same Case ID as the “copied from” Investigation stage.

For more information, see “Copying Progress Notes” on page 201.

**New Note**
Clicking on this button clears the existing fields to allow you to create a new note without needing to close the Progress Notes Detail window.

This button is disabled on the Progress Notes Detail window, except when viewing an existing note.

**View Existing Notes**
This button enables when you open the Progress Notes Detail window but you have not made any changes to a note. Once you make changes, this button disables. Clicking on this button
displays the Progress Notes tab; you can then select a note to view.

**Save as Draft**

This button enables when you create a new note and record all required fields, or when you modify data within an existing “Draft” note and all of the required fields are populated. Clicking on this button saves the note in draft status. Notes are in draft status for a maximum of 15 calendar days. (See “Saving Progress Notes” on page 195.) This button enables even if the Date has not been recorded (but all other required fields have been recorded); however, if you click on the Save as Draft button under these circumstances, the following message displays: “Date is required.”

**Save as Final**

This button enables when you create a new note and record all of the required fields, or when you modify data within an existing “Draft” note and all of the required fields are populated. Clicking on this button saves the note as “Final,” which “freezes” the note. None of the entries can be modified; however, addenda can be added. (See “Adding an Addendum to a Frozen Note” on page 199.)

**Cancel**

Clicking on this button cancels the creation of the note. Unsaved information is discarded and the Progress Notes Detail window closes. This button enables only if unsaved changes exist.

**Show Instructions**

This button displays district-specific Progress Note Instructions. When creating a new Progress Note, the Show Instructions button disables until the Type, Method of Contact and Purpose fields are completed.

**Hide Instructions**

This button hides district-specific Progress Note Instructions when they are displayed. The Hide Instructions button displays when you are recording a new progress note and you have already clicked on the Show Instructions button.
The Progress Notes tab is comprised of three sections: the Search Progress Notes filter fields at the top of the tab, the search results grid in the middle, and buttons along the bottom.

The fields at the top of the window are the search filters that can be selected. You can select one, several or all of the search filters for a search list. (See “Searching for Progress Notes” on page 178.) These filters comprise the bulk of the columns of the search results grid located in the middle of the tab.

- **From Event Date** and **To Event Date**: Filters within the range of dates you select in the search criteria. To search for one specific event date, enter the same date in both fields. To search on an open-ended date, enter the date in the From Event Date field and leave the To Event Date field blank. All progress notes from that date forward will return in the search. Conversely, the same procedure can be performed with the To Event Date; all of the notes from that date back will return in the search.

- **Type**: Filters the search results by type of contact as selected from the Type window. For a list of possible Type choices, see page 188.

- **Author**: Filters by the author of the note. You select an author from a drop-down list populated with the name(s) of anyone who has already authored a note in the stage.

- **Family Part. (participant)**: Filters the search results by family participant selected from the drop-down list consisting of all persons in the stage.

- **Method**: Filters the results by the Method of Contact from a drop-down list containing possible methods. See page 188 for a list of possible methods.
Entered By

Filters the search list by Entered By person; the drop-down list is comprised of the workers who have recorded notes.

Other Part.
(participant)

Filters the search (by category, not name) by others outside the Person List for the case who may be participants or contacts involved in the case. You select the Other Participant’s category, not name, from a drop-down list. For a list of possible choices, see the table on page 188.

Purpose

Filters the results by the Purpose of the contact. For a list of possible purposes in the drop-down list, see page 188.

District/Agency

Filters the search results by the code of the District/Agency of the Entered By worker.

Focus

Filters the results by the person who is the focus of the note. You select from a drop-down list comprised of possible focuses.

Location

Filters the results by the Location of the contact. For a list of possible locations in the drop-down list, see page 188.

The search results grid displays many of the fields listed above, as well as fields on the Progress Notes Detail window. (Many of these fields are listed on both the Progress Notes tab and the Progress Notes Detail window.) For a complete list, see the field descriptions above and on page 181. There are three filters that do not display on either the Progress Notes Detail window or the Progress Notes tab in the search filters, but they do display in the search results grid:

- **Note Status** indicates whether the note is in “Final” or “Draft” status.
- **Addendum** indicates whether or not an addendum has been added to the note. (For more information, see “Adding an Addendum to a Frozen Note” on page 199.)
- **Copied From** indicates the stage from which the note was copied. This never prints on any of the Progress Notes Data Reports. (For more information, see “Copying Progress Notes” on page 201.)

Several buttons display on the Progress Notes tab:

- **Refresh List** Refreshes the progress notes search list to the default display list of notes and removes the search criteria or sorts. Once search criteria or sorts have been selected, this button enables.
- **Search** Initiates the progress notes search after search criteria have been selected.
- **Sort** Opens the Sort window, where you can select up to three sort criteria at a time. See “Sorting Progress Notes” on page 197 for more information.
View Note
Once you have selected a specific note, click on this button to view the details of that note.

New Note
Opens a blank Progress Notes Detail window.

Edit Note
Begins the process of modifying a note that you have selected from the search results list. You can only edit notes in “Draft” status and you must be the Entered By person or Author of the note.

Copy Note
Copies a note that you have selected from the search results list. The button enables when:

• a note is selected on the Progress Notes tab or displayed in the Progress Notes Detail window; and
• an open “copied to” Investigation stage has the same Case ID as the “copied from” Investigation stage;

Select All
Selects all of the progress notes in the results list, allowing you to print all of the notes at once.

Print Note(s)
This button opens the Print Notes window for the selected note(s). Notes can be printed to include only the data fields (which generates the Progress Notes Data Report) or both the data fields and narrative. Clicking on the OK button on the Print Notes window displays the selected notes in the CPRS Report Viewer.

Several fields on the Progress Notes tab and Progress Notes Detail window contain drop-down lists that are common across all stages:

- Type
- Method
- Location
- Other Participant
- Purpose
The table below contains all possible options for a particular field. The choices that are available for Location, Purpose and Other Participant depend on what you select for Type and Method. (These situations are described below the table.) For further clarification regarding when to use certain values, consult your local district’s procedures and guidelines, and/or your supervisor.

<table>
<thead>
<tr>
<th>Type</th>
<th>Method</th>
<th>Location</th>
<th>Other Participant</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Conference</td>
<td>Face to Face</td>
<td>Adoptive Home</td>
<td>Community Resource</td>
<td>Adoption Activities</td>
</tr>
<tr>
<td>Casework Contact</td>
<td>Mail</td>
<td>Congregate Care Facility</td>
<td>Indian Tribe/Council</td>
<td>Pre-Adoption Activities</td>
</tr>
<tr>
<td>Collateral Contact</td>
<td>Fax</td>
<td>Court</td>
<td>Juvenile Detention</td>
<td>Aftercare Services</td>
</tr>
<tr>
<td>Court</td>
<td>Phone</td>
<td>Day Care</td>
<td>Law Enforcement</td>
<td>Assessment</td>
</tr>
<tr>
<td>Family/Primary Discharge</td>
<td>E-mail</td>
<td>Foster Home</td>
<td>Legal/Attorney</td>
<td>Counseling</td>
</tr>
<tr>
<td>Resource Visititation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sibling Visitation</td>
<td>Other</td>
<td>Hospital/Health Facility</td>
<td>Medical</td>
<td>Child Preparation</td>
</tr>
<tr>
<td>Other Visitation</td>
<td></td>
<td>LDSS Office/Field Office</td>
<td>Mental Health</td>
<td>Crisis Intervention</td>
</tr>
<tr>
<td>Summary</td>
<td></td>
<td>OMH Facility</td>
<td>Probation</td>
<td>Educational Planning</td>
</tr>
<tr>
<td>Supervisor/Managerial Review</td>
<td></td>
<td>OMRDD Facility</td>
<td>Service Provider</td>
<td>Employment/Training</td>
</tr>
<tr>
<td>Attempted Casework Contact</td>
<td></td>
<td>Service Provider/Contract Agency</td>
<td>School Staff</td>
<td>Family Planning</td>
</tr>
<tr>
<td>Attempted</td>
<td></td>
<td>Precinct/Law Enforcement Office</td>
<td>Alcohol/Other Drug Service</td>
<td>Housing</td>
</tr>
<tr>
<td>Family/Primary Discharge</td>
<td></td>
<td>Parent’s Home</td>
<td>Volunteer/Mentor</td>
<td>Independent Living Services</td>
</tr>
<tr>
<td>Resource Visititation</td>
<td></td>
<td>Prison</td>
<td>Foster/Adoptive Parent</td>
<td>Coordinate/Monitor</td>
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<td>Notice/ Approval</td>
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<td>Public Location</td>
<td>Relative</td>
<td>Case Planning</td>
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<td>Relative’s Home</td>
<td>Primary Resource Person</td>
<td>Parent Training</td>
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<td>School</td>
<td>Caseworker</td>
<td>Permanency Consultation Placement</td>
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<td>Shelter-Domestic Violence</td>
<td>Supervisor</td>
<td>Investigation(^{7,9})</td>
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<td>Case Address</td>
<td>Reporter/Source(^{6})</td>
<td>Review Notes(^{1})</td>
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<td>Congregate Care Staff</td>
<td>Review Case(^{1})</td>
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<td>Other</td>
<td>Day Care Staff</td>
<td>24 Hour(^{2,3})</td>
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<td>Day Care Provider</td>
<td>48 Hour(^{3,4})</td>
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<td>Administrator</td>
<td><em>Initial</em>(^{7,8,9,10})</td>
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<td>Purpose</td>
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<td>10 Day&lt;sup&gt;4,6,10&lt;/sup&gt;</td>
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<td>72 Hour Elevated Risk Child Safety Conference&lt;sup&gt;6&lt;/sup&gt;</td>
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<td>72 Hour Post Placement Safety Conference&lt;sup&gt;6&lt;/sup&gt;</td>
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<td>30 Day Elevated Risk Permanency Conference&lt;sup&gt;6&lt;/sup&gt;</td>
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<td>40 Day&lt;sup&gt;6,10&lt;/sup&gt;</td>
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<td>45 Day FSU Conference&lt;sup&gt;6,10&lt;/sup&gt;</td>
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<td>Replacement&lt;sup&gt;6&lt;/sup&gt;</td>
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<td>Critical Case Planning&lt;sup&gt;6&lt;/sup&gt;</td>
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<td>Court Extension Review&lt;sup&gt;6&lt;/sup&gt;</td>
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<td>45 Day FSU Conference&lt;sup&gt;6&lt;/sup&gt;</td>
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<td>Type</td>
<td>Method</td>
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<td>Other Participant</td>
<td>Purpose</td>
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<td>Protective Placement</td>
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<td>Decision Making</td>
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<td>Voluntary Placement</td>
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<td>Decision Making</td>
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<td>Persons in Need of Supervision (PINS)</td>
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<td>Family Team Conference follow-up</td>
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<tr>
<td>Return of Child During Trial Discharge</td>
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<tr>
<td>Request to file FCA Article 10 Petition on Voluntary Placed Child</td>
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<td>Homemaking Services</td>
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<td>Day Care Services for Child In Care</td>
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<td>Consent for Medical Care/ HIV testing</td>
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<td>Special/Exceptional Board Rate</td>
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<td>Suspend Payment/Lift Suspended Payment (Other than Trial Discharge)</td>
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<td>Out of State Visits</td>
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<td>Initiate Interstate Compact</td>
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<td>Termination or Limitation of Parental Visitation</td>
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<td>Request for Utilization Review Level of Care Exceptions</td>
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<td>Change PPG</td>
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<td>Enlistment in the Armed Forces or Job Corps</td>
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<td>Marriage</td>
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<td>Report of Accident or Illness</td>
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<td>Other</td>
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<td>Preventive Services Are Started/ Ended for a Child</td>
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<td>Case is Closed to CPS</td>
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<tr>
<td>Child is Entering or Re-entering Foster Care</td>
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<tr>
<td>Child is Moved from One Foster Care Setting to Another</td>
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<tr>
<td>Type</td>
<td>Method</td>
<td>Location</td>
<td>Other Participant</td>
<td>Purpose</td>
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<td>Child Becomes Legally Freed for Adoption¹¹</td>
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<td>Trial Discharge¹¹</td>
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<td>Final Discharge¹¹</td>
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</tbody>
</table>

* See the note below regarding these purposes. Refer to Appendix D3 for complete information on notations regarding these purposes.

Some choices are available on the Progress Notes Detail window only under specific circumstances:

- **Review Note** and **Review Case** are only available as choices for Purpose when the **Type** is “Supervisor/Managerial Review” for all stage types.

- **24 Hour** is available as a choice for **Purpose** when the **Type** is “Casework Contact” or “Attempted Casework Contact” only for Investigation (INV) stages.

- **Reporter/Source** is available as a choice for **Other Participant** only for CPS Investigation stages. It is not available for Family Services Stages.

- A **Summary** note may not be selected in the **Type** field until a Progress note has been recorded with **Casework Contact** selected in the **Type** field and **24 Hour** selected in the **Purpose** field. If you try to complete a **Summary** note before completing a **24 Hour** note the following message displays: “**24 Hour** note must be completed prior to creating a **Summary** note.”

**HIGHER-LEVEL EDITS**

There are higher-level edits and values that some districts may request. These edits are additional requirements that are in place when the Primary worker in the stage is a member of a district which has requested higher-level edits. For these districts, the **Time** field must be completed. These edits affect the choices that are available to the worker, depending on responses made to specific fields:

- 48 Hour will be available as a choice for **Purpose** when the **Type** is Casework Contact, Attempted Casework Contact or Collateral Contact.

- Review Note, Review Case, Initial, 48 Hour, 5 Day, 10 Day, 25 Day, 30 Day, 50 Day and 55 Day are only available as choices for **Purpose** when the **Type** is Supervisor/Managerial Review.
Creating a New Progress Note

Notes are created throughout the course of the Investigation by workers in primary districts, workers in supportive districts, and supervisors. New notes are created from the Progress Notes Detail window and are used to collect data specific to a note or casework contact, such as who was contacted, when and where the contact was made and what occurred during the contact.

| Upon Entering the Progress Notes Detail window, the following data fields are… |
|-------------------------------------------------|-------------------------------------------------|
| …system populated and can’t be changed: | …enabled and can be recorded in any order: |
| • Family Participant/Focus list | • Event Date |
| • Entered By | • Type of Contact |
| • Dist./Agy. | • Progress Note narrative |
| • Entry Date | • Author |

The **Type**, **Method of Contact** and **Author** fields are required for any note. Depending on the selections you make for **Type** and **Method of Contact**, other fields may also be required. See Appendix D2 for details about which fields are required and when.

The type of contact, such as “Attempted Casework Contact,” is recorded in the **Type** field. When you click on the **Type** button, the **Type** window displays; containing a list of all possible types of contact. There are two buttons at the bottom of this window: **OK** and **Cancel**. When you open the window, the **OK** button is disabled and the **Cancel** button is enabled. You can select one or more valid types by clicking on the corresponding checkbox(es). Once you select a Type, the **OK** button enables. When you click on the **OK** button to close the **Type** window, the **Method of Contact** field enables on the Progress Notes Detail window.

For supervisors, “Supervisor/Managerial Review” in the **Type** field is available to document supervisory activities related to an investigation.
The **Method of Contact** field contains a drop-down list in which the options available are dependent on what you recorded in the **Type** field. Once you record these two components, additional fields are required, conditionally required, enabled or disabled. See Appendix D2 regarding required fields.

The person recording the new note must identify the Author of the note from the drop-down list in the **Author** field. The options in this list are: assigned worker(s) in the district/agency; anyone assigned in or out of the Author’s unit; and “Other.” When the Entered By person is an assigned worker, the **Author** field defaults to the name of that worker. This value is modifiable.

The Narrative field, with a limit of 100 pages per note, is blank and can be recorded at any time. The narrative has some of the same functionality as Microsoft Word: print, preview, Spell Check, copy, paste, cut, bold, italics, underline, align left, align right, center, justify, numbering, bullets and zoom.

When creating a new note, the **Copy Note**, **New Note** and **View Existing Note** buttons are **disabled**. Once you complete all required fields and the narrative, the **Save as Draft** and **Save as Final** buttons enable on the **Progress Notes Detail** window.

If the **Date** is not recorded, the **Save as Draft** and **Save as Final** buttons enable (provided all other required fields and the narrative have been completed), but clicking on either of these buttons displays the following message:

“**Date is required.**”

The **Cancel** button enables once you start recording a new note.

---

**Step-by-Step:**
**Creating a Progress Note**

1. Open a blank **Progress Notes Detail** window. (For methods of accessing the **Progress Notes Detail** window, see page 178.)
   *The Author field pre-populates with the name of the worker logged on to CONNECTIONS; to change this information, click on the drop-down list for the Author field and select a different author from the resulting list.*

2. In the **Event Date** field, click on the checkbox for the current date to accept that date.
   *To select a different date, click on the drop-down arrow and select from the resulting calendar.*

3. In the **Type** field, click on the ellipsis (…) button.
   *The Type window displays.*

4. Select one or more types by clicking on the checkbox(es).
   *The OK button enables.*

---

For the data fields on the **Progress Notes Detail** window, the Primary worker’s district edits and data values take precedence over the Secondary worker’s district edits.

You cannot record progress notes when an approval for stage closure is pending; you must invalidate the pending approval to record the note.
5 Click on the **OK** button.  
*The Progress Notes Detail window displays with the **Method of Contact** field highlighted in yellow.*

6 Click on the drop-down arrow for the **Method of Contact** field and select from the resulting list.

7 Put a check in the **Unannounced Visit** checkbox, if applicable.  
*This field only displays when the Type is Casework Contact or Attempted Casework Contact.*

8 In the **Time** field, enter the time of the contact.

9 Click on the drop-down arrow for the **Location of Contact** field and select from the resulting list.  
*This field may or may not be enabled, depending on the Type and/or Method of contact.*

10 In the **Family Participant/Focus** field, select the appropriate individuals as the family participant(s) and/or focus(es) of the contact by clicking on the respective checkboxes. (See page 182.)  
*This field may or may not be enabled, depending on the Type and/or Method of Contact.*

11 In the **Other Participant** field, click on the ellipsis (…) button and select one or more other participants by clicking on the checkbox(es).  
*The Other Participant field contains a list of individuals that are not on the Person List who may be participants or contacts involved in the stage.*

12 Click on the **OK** button.

13 In the **Purpose** field, click on the ellipsis (…) button.  
*The Purpose window displays.*

14 Select one or more purposes by clicking on the checkbox(es).  
*The **OK** button enables.*

15 Click on the **OK** button.  
*The Progress Notes Detail window displays.*

16 Record the narrative of the progress note in the **Narrative** field.

17 Click on the **Save as Draft** or **Save as Final** button.  
*(See the tip box at right.)*  
*The following message displays:  
“Changes Have Been Saved.”*

18 Click on the **OK** button.  
*The Progress Notes tab displays.*
While creating a note, if you attempt to modify an existing value for Method of Contact, the following message displays:

“Changing METHOD may clear the user entered data fields that are inconsistent with the new METHOD. Continue making changes?”

- Clicking on the Yes button clears all recorded data fields on the Progress Notes Detail window that are inconsistent with the new Method of Contact (except for the narrative).
- Clicking on the No button cancels the action without clearing any of the data fields.

In both situations, you remain on the Progress Notes Detail window. If you changed the Method of Contact, you need to re-record information in the fields that were cleared by CONNECTIONS.

Appendix D2 provides an in-depth look at the fields that are enabled, disabled or required, depending on the selection of other fields. The columns indicate the fields on the Progress Notes Detail window; the rows indicate the possible responses to Type and Method that affect whether the field is enabled, disabled or required.

**Saving Progress Notes**

There are two ways to save a note: as “Draft” and as “Final.”

**Save as Draft**

Notes can be saved in Draft status for up to 15 calendar days. Modifications can be made only during the Draft period. If you have not saved the note as “Final” by the end of the 15-calendar-day Draft period, the note automatically saves as “Final.” When you save a note in Draft status, the newly saved note displays in the search results list on the Progress Notes tab. The Note Status column populates with “Draft.”

**Save as Final**

Progress notes should be saved as “Final” as soon as possible. To save a note as “Final,” click on the Save as Final button. You can save a note as “Final” at any time during the 15-calendar-day Draft period. Notes in Draft status are automatically saved as “Final” at the end of the 15-calendar-day period. Once a note is in Final status, it displays in the search results list on the Progress Notes tab. The Note Status column populates with “Final.” A note saved as “Final” freezes; modifications can no longer be made to the note. Only an addendum can be appended to the end of the frozen note. When a stage is closed, CONNECTIONS converts any Draft notes to Final status.

As part of the nightly batch update, CONNECTIONS identifies any notes that have been in Draft status for 15 calendar days and changes the status to “Final.” Each time a note is saved, CONNECTIONS keeps a historical record of when notes are saved and by whom.

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\[CONNECTIONS\ Step-by-Step Guide: Training for CPS Workers\]

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(rev 03/01/2007)
Searching for Progress Notes

Workers and supervisors may find it useful to search for notes (e.g., you may want to view notes that have already been recorded in CONNECTIONS to review what has occurred throughout course of the investigation; your supervisor may want to view previously recorded notes when approving work). You conduct a progress notes search on the Progress Notes tab.

There are three ways to begin a search:

- Access the Progress Notes tab in view-only mode through the CPRS event on the Event List.
- Select the Child Protective Record Summary task from the Task List, then click on the Progress Notes tab.
- Select the Enter Progress Notes command from the Options menu on the Task List.

By default, when you access the Progress Notes tab, the search results grid displays all of the progress notes for the stage. The most recent notes display at the bottom of the list.

You may want to view notes that contain certain criteria. For example, you may want to display only the notes in which a particular family member is the focus. Use a progress notes search to display only those notes with the focus on that family member. Searching retrieves a list of existing progress notes for a stage.

Once you have selected a note, the View Note, Copy Note and Print Note(s) buttons enable. If the note you selected is in Draft status, the Edit Note button also enables. The Search button enables once the search criteria is selected.

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Step-by-Step: Searching for Progress Notes

1. Click on the Progress Notes tab in the CPRS. The Progress Notes tab displays with a list of notes that have been saved for that stage.

2. Enter search criteria in the data fields in the upper half of the window. Multiple fields can be used to search for notes; however, keep in mind that the more search criteria you enter, the more limited your search will be.

3. Click on the Search button. The search results display with all notes that match the search criteria.
Sorting Progress Notes

By default, progress notes are sorted in descending order by Event Date and Time (i.e., notes with most recent Event Dates and/or Times are listed above notes with older Event Dates and/or Times). However, notes with no Event Date (“Summary” Type are the only progress notes that do not require an Event Date) display above all other notes in the list, sorted based on Entry Date/Time. Along with the default sort, there are two methods available for sorting the notes:

- In the search results list, click on the desired column heading by which you want to sort the notes. The list displays in ascending order.
- Click on the Sort button to open the Sort Notes window. Select up to three sort criteria. Select ascending or descending order for each sort within the Sort Notes window.

Progress notes are sorted by any column heading on the grid. Sorting also provides the ability to select the Note Status, Addendum and Copied From fields, which are included in the search results grid, but not on the Progress Notes Detail window.

**Step-by-Step: Sorting Progress Notes**

1. To sort the existing columns in descending order, from the Progress Notes tab, click on the column heading by which you wish to sort. *The column sorts in descending order.*

   —OR—

   To sort notes in ascending order and/or by multiple criteria, click on the Sort button. *The Sort Notes window displays.*
2 Select up to three sort criteria in the three sort fields by clicking on the corresponding drop-down arrow and selecting from each resulting list.

3 To specify Ascending or Descending order, click on the corresponding radio button.

4 Click on the OK button to complete the sort. *The Progress Notes tab displays with the list sorted.*

Within the list of notes, you can select one, several or all of the notes. To select one note at a time, simply click on each note to highlight it. To select all of the notes, click on the Select All button. Once you have selected a note, it can be copied, printed, viewed, modified, saved and/or deleted, depending on the status of the note (Draft or Final) and whether or not you are the Author or Entered By person. Copying, viewing, modifying and deleting notes can be performed only when one note is selected. When you select progress notes for printing, they will print as one document, listed from oldest to newest.

**Viewing Existing Notes**

You can view existing progress notes by clicking on the View Existing Notes button on the Progress Notes Detail window. This button returns you to the Progress Notes tab.

Once you have conducted a search of progress notes, you can also view a note by selecting it from the search results and clicking on the View Note button on the Progress Notes tab. The note displays in view-only mode. There are a series of buttons that display at the bottom of the Progress Notes Detail window. These buttons allow you to move sequentially back and forth through all the notes in read-only mode. A count field displays the number of the current note and the total number of notes.

While you are viewing the note, the Save as Draft, Save as Final and Cancel buttons are disabled. Depending on your security rights, the Copy Note and New Note buttons may or may not be enabled.

---

**Step-by-Step:**

**Viewing an Existing Progress Note**

1 From the Progress Notes Detail window, click on the View Existing Notes button. *The Progress Notes tab displays.*

—OR—

From the Progress Notes tab, complete the progress notes search. (See the Step-by-Step instructions on page 196.)

2 Click on the note to be viewed.

3 Click on the View Note button. *The Progress Notes Detail window displays with the contents of the selected note.*
Modifying Progress Notes

Progress notes can only be modified while in Draft status. Once a note has been saved as “Final,” it can no longer be modified; only an addendum may be made. If you change the Type of contact, CONNECTIONS will clear all of the worker-recorded data, with the exception of the narrative. If you modify Method of Contact, the system will clear all fields that are inconsistent with the new Method.

Step-by-Step: Modifying a Progress Note

1. From the Progress Notes tab, click on the Draft note to be modified. Only the Entered by person or Author can modify the note.

2. Click on the Edit Note button. The Progress Notes Detail window displays for the selected progress note.

3. Make the necessary modifications. Once all of the required fields are recorded, click on the Save as Draft button.

   —OR—

   Click on the Save as Final button. The Progress Notes tab displays.

Adding an Addendum to a Frozen Note

To modify notes that are in Final status, addenda are necessary. Addenda can only be added to notes in open stages. A note can have multiple addenda.

Addenda can be added by the Progress Note’s Author, by anyone in the Author’s unit hierarchy and by the Progress Note’s Entered By person.

Addenda are added to the bottom of the narrative of the original note. The new text is time-stamped with the name and ID of the logged-on worker. All previously recorded text in notes and addenda are locked for edit while a new addendum is being created. Once you start typing, the View Existing Notes, Copy Note and New Note buttons disable, while the Save as Final and Cancel buttons enable.

Since supervisors cannot modify their workers’ notes, they use addenda to modify a note completed by their workers.
Step-by-Step: Recording an Addendum to a Progress Note

1. From the Progress Notes tab, click on a note in Final status.

2. Click on the Options menu and select Add Addendum.
   The Progress Notes Detail window displays for the selected Progress Note. 
   All existing fields and the narrative are locked for edit.

3. Record text at the bottom of the existing narrative.

4. Click on the Save as Final button.
   The following message displays:
   “Changes Have Been Saved.”
   The note is stamped with the time and date and the name of the Entered-by person.

5. Click on the OK button.
   The Progress Notes tab displays.

6. Once an addendum has been added to a progress note, the Addendum column of the search grid is flagged with a “Y,” indicating an addendum exists for the note. For notes that do not have addenda, the column is flagged with an “N.”

Printing Progress Notes

The Progress Notes window provides the availability to view and print one, several or all progress notes in the stage. Notes print as one document, listed from oldest to newest. For samples of printed progress notes, see Appendix D3.

Step-by-Step: Printing Progress Notes from the Progress Notes Tab

1. From the Progress Notes tab, click on each note to be printed.
   To select multiple notes, hold down the Ctrl key as you select each note.
   —OR—
   Click on the Select All button to select all notes.

2. Click on the Print Note(s) button.
   You can also click on the File menu and select the Print command.
   The Print Notes window displays.

3. Click on the corresponding radio button to print Data Fields and Narrative or Data Fields Only and then click on the OK button.
   The Print Preview window displays. Printing only the data fields generates the Progress Notes Data Report.

4. Click on the Print button.
Step-by-Step:
Printing Progress Notes from the Progress Notes Detail Window

1  From the Progress Notes Detail window, click on the File menu and select the Print command. The Print Notes window displays.

2  Click on the corresponding radio button to print Data Fields and Narrative or Data Fields Only and then click on the OK button. The Print Preview window displays.

3  Click on the Print button.

Copying Progress Notes

Notes in either “Draft” or “Final” status can be duplicated to one or more other open Investigation stages within the same case. The ability to copy notes improves efficiency by saving you, or any other person with the appropriate security, from needing to record the same information more than once for the same case. You can copy a note simultaneously to more than one stage. However, you can only copy one note at a time. Copying a note duplicates all of the data fields and the narrative.
In order to copy a note, all of the following must apply:

- The worker must have saved the progress note.
- The progress note’s Event Date must be on or after the Intake (INT) Start Date of the Investigation (INV) stage to which the note is being copied.
- The original stage’s District/Agency must be the same as the “copied to” stage’s District/Agency.
- The original note’s Participant(s) or Focus must be part of the “copied to” Investigation stage.
- The Entered By worker or the Author of the original note must be assigned as the Primary or Secondary worker of the “copied to” Investigation stage, or be part of the unit hierarchy of the worker(s) assigned to the Investigation stage.

System edits prevent you from copying another worker’s note to a different stage. If you attempt to do so, the following error message displays:

“No open stages meet the criteria to add a copy of the selected note. Cannot copy Progress Note.”

---

**Step-by-Step: Copying a Progress Note**

1. From the Progress Notes Detail window, click on the **Copy Note** button.
   —OR—
   From the Progress Notes tab, select the note to be copied and click on the **Copy Note** button. The Copy Note window displays with a list of possible open stages within the case to which you have modify rights.

2. Select the stage(s) to which you want to copy the note by clicking in the corresponding checkbox(es). The **Save button** enables.

3. Click on the **Save** button.
   The following message displays:
   “Progress Note has been copied.”

4. Click on the **OK** button.
   The Progress Notes tab displays. The note is copied to the selected stage(s) and displays in Draft status (even if it was in Final status in the copied from stage). The **Entry Date** field fills with today’s date (the date the note was copied). This is also the first day of the 15-calendar-day “Draft” period.
Deleting Draft Progress Notes

The situation may arise when you determine that it would be more efficient to delete an erroneous note, rather than try to modify it. Provided the note is in Draft status, it can be deleted. If you have the ability to modify notes, you can delete notes. Only one note may be deleted at a time. Notes can only be deleted from the Progress Notes Detail window.

**Step-by-Step: Deleting a Progress Note**

1. From the **Progress Notes** tab, click on a note in Draft status to select it.

2. Click on the **Edit Note** button.  
   *The Progress Notes Detail window displays for the selected note.*

3. Click on the **Options** menu and select **Delete Draft Note**.  
   *The following message displays: “Are you sure you want to delete this Progress Note?”*

4. Click on the **Yes** button to delete the note.  
   *The following message displays: “Progress Note has been Deleted.”*

5. Click on the **OK** button.  
   *The Progress Notes tab displays; the deleted note is no longer included on the list.*

Deleted notes are **completely removed** from CONNECTIONS and **cannot be recovered**. **There is no historical record of deleted notes.**
Completing a Safety Assessment

The first priority after receiving a report from the State Central Register (SCR) is to assess each child’s safety. The safety assessment process is documented by completing the Safety Assessment in CONNECTIONS. The purposes of this assessment are to ascertain whether there are any safety concerns, if any children are likely to be in immediate danger of serious harm, and to determine what interventions can be initiated or should be maintained to provide appropriate child protection. When child safety has been addressed, then a risk assessment of future abuse and maltreatment, a comprehensive assessment of family functioning, and a thorough investigation of reported allegations can proceed.

Safety Assessments are completed:

- Within seven (7) days from receipt of an Initial or Subsequent report of suspected child abuse/maltreatment
- Within twenty-four (24) hours from receipt of a Fatality report, if there are surviving siblings, and when completing a 30-day child fatality report
- Within seven (7) days of the completion and submission of the Investigation Conclusion
- As part of the Family Assessment and Service Plan (FASP), completed at each Initial, Comprehensive and Reassessment FASP

Safety vs. Risk

To support the child welfare goals of safety, permanency and well-being for children and their families, two assessments are completed during the course of every CPS Investigation, addressing safety and risk. Safety refers to the immediate danger of serious harm; risk refers to the likelihood of future abuse or maltreatment.

<table>
<thead>
<tr>
<th>Safety</th>
<th>Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety deals with present or impending danger.</td>
<td>Risk is the likelihood that a child may be abused or maltreated in the future.</td>
</tr>
<tr>
<td>Safety factors pose a threat of immediate harm.</td>
<td>Risk Elements identify significant behaviors and circumstances within a family unit that create different levels of risk to the child.</td>
</tr>
<tr>
<td>Safety factors pose a threat of serious harm.</td>
<td>Risk may be very high even if the report is unfounded; conversely, risk may be low even if the report is indicated.</td>
</tr>
<tr>
<td>In order to control for safety, there must be an assessment of the need for immediate interventions, as well as strengths, resources or protecting factors present in the home.</td>
<td>Risk may be reduced with appropriate services, changes in the caretaker’s behavior, and family or community support.</td>
</tr>
</tbody>
</table>
Safety Assessments are recorded directly in the CPRS, accessed from the **Child Protective Record Summary** task on the **Task List**. Safety Assessments can also be accessed from the **Staff To-Do List** or **Event List**.

The Safety Assessment process in CONNECTIONS is a two-tiered decision-making process; first, you identify the applicable Safety Factors, you then select those factors (if any) that place the children in immediate danger. In addition, you record a safety decision and any interventions put into place to support the safety of the child(ren).

The ability to create, modify, view or submit the Safety Assessment in CONNECTIONS is defined as follows:

- The Primary worker assigned to the stage (or a member of the Primary worker’s unit hierarchy) can **create**, **modify** and **submit** the Safety Assessment.
- The Secondary worker assigned to the stage (or a member of the Secondary worker’s unit hierarchy) can **create**, **modify** and **submit** the Safety Assessment.
- Any worker who has been assigned a Safety Assessment Task To-Do can **modify** the Safety Assessment.
- Anyone with the appropriate security to open the **Child Protective Record Summary** window in view-only mode can **view** the Safety Assessment.

The navigational path for accessing the **Safety Assessment** tab is determined by your role and whether you are accessing the Safety Assessment in view-only or modify mode.

---

### Step-by-Step: Accessing the Safety Assessment Tab in Modify Mode (from the **Task List**)

1. From the **Assigned Workload**, click on the stage for which the Safety Assessment needs to be completed.  
   *The **Tasks…** button enables.*

2. Click on the **Tasks…** button.  
   *The **Task List displays*. *

3. Click on the **Child Protective Record Summary** task.

4. Click on the **Detail…** button.  
   *The **CPRS displays*. *

5. Click on the **Safety Assessment** tab.
Step-by-Step: Accessing the Safety Assessment Tab in Modify Mode
(from the Staff To-Do List or Case To-Do List)

1. Click on the Task To-Do associated with the Safety Assessment you need to complete.
   The Navigate… button enables.

2. Click on the Navigate… button.
   The CPRS displays with the Safety Assessment tab active.

Step-by-Step: Accessing the Safety Assessment Tab in View-Only Mode
(from the Event List)

1. From the Assigned Workload, click on the stage for which the Safety Assessment is to be viewed.

2. Click on the Options menu and select the Event List… command.
   The Event List displays.

3. Click on the CPRS event for the Investigation stage.

4. Click on the Detail… button.
   The CPRS displays.

5. Click on the Safety Assessment tab.
Safety Assessment Tab

The Safety Assessment tab lists all Safety Assessments for a stage, including the assessment date, assessment type, event transaction date, event status and decision. From this tab, you can:

- create a new Safety Assessment;
- modify/view an existing Safety Assessment;
- print an existing Safety Assessment;
- assign a Safety Assessment Task To-Do to another worker;
- submit a completed Safety Assessment for approval;
- view the approval status of a completed and submitted Safety Assessment; and
- access context-sensitive Online Help information.

The following buttons display at the bottom of the Safety Assessment tab:

**To Do**
Creates a Task To-Do for the Safety Assessment.

**Submit**
Submits the Safety Assessment to the supervisor for approval; enables only when the selected Safety Assessment has a status of COMP.

**Approval Status**
Opens the Approval Status window, which displays the status of a submitted Safety Assessment. Enables only when the selected Safety Assessment is in PEND, REJT or APRV status (See "Using the Event List" on page 39 for a list of statuses and their definitions.)
**New**
Opens the *Safety Assessment* window. If a completed and approved Safety Assessment exists for a stage, the new Safety Assessment will be pre-populated with the Safety Factors, Safety Decisions, Safety Interventions and narratives recorded in the most recently approved Safety Assessment.

**Detail**
Opens the selected Safety Assessment.

**Print**
Opens the *Print Preview* window from which you can print the selected Safety Assessment.

---

**Step-by-Step: Opening the Safety Assessment Window**

1. From the *Safety Assessment* tab in the CPRS, click on the **New** button to record a new Safety Assessment.  
   *The Safety Assessment window displays.*  
   —OR—  
   From the *Safety Assessment* tab in the CPRS, click on an existing Safety Assessment from the list and click on the **Detail** button.  
   *The Safety Assessment window displays for the selected Safety Assessment. Safety Factors identified by the SCR at Intake display with a check mark to the left of each selected Safety Factor if this is the first time accessing the Safety Assessment since Stage Progression.*

---

**To open the Safety Assessment tab in Modify mode, see the Step-by-Step instructions starting on page 205.**
The Safety Assessment Window

The Safety Assessment window is divided into three sections:

- The Header contains the Date and Type fields, which are completed by clicking on each field’s drop-down arrow and selecting from the resulting list. The header is always visible, regardless of which tab is open.

- The Tabbed section contains four tabs: Safety Factors, Mitigating Strengths/Resources, Safety Decision and Safety Interventions.

- The Footer, which is always visible, regardless of which tab is open, contains the following buttons:
  
  **Complete?** Checks the Safety Assessment to verify if all required elements have been completed. If all elements have been completed, “YES” displays to the right of this button; if any required elements have not been completed, a message displays indicating what information is missing.

  **Save** Saves work you have recorded in the Safety Assessment and closes the Safety Assessment window. When you click on this button, the following message displays: “Changes have been saved.”

  **Save and Submit** Saves work you have recorded in the Safety Assessment and submits the Safety Assessment to your supervisor for approval. This button enables only if “YES” displays next to the Complete? button.
When you click on the **Save and Submit** button, the following message displays:

*This action will close this window. Do you wish to continue?*

- Click on the **Yes** button to continue the submission process.
- Click on the **No** button to cancel the submission process.

If you click on the **Yes** button in response to the message, the following message displays:

*Changes have been saved.*

When you click on the **OK** button in response to this message, the CPRS will close and a *To-Do Detail* window displays. Click on the **Save** button to submit the Task To-Do.

**Cancel**

Closes the window and discards any unsaved data. When you click on this button, the following message displays if there is any unsaved data:

*Do you want to cancel? Unsaved data and/or narrative(s) will be lost.*

- Click on the **Yes** button to discard the unsaved changes and close the *Safety Assessment* window.
- Click on the **No** button to leave the window open without discarding the unsaved changes.

**Creating a New Safety Assessment**

During the Intake stage, the SCR worker may select certain Safety Factors based on information provided by the reporting source. These Safety Factors recorded at Intake are carried over into the Safety Assessment for the Investigation stage. Within seven (7) days of the Intake, the Primary worker assigned to investigate the report needs to complete a Safety Assessment. Based on the information collected during the course of your investigation, you should review each Safety Factor and decide whether to maintain the factor, deselect the factor or add a new factor.

Consider how recent the circumstance, condition or behavior associated with each safety factor is. Is the circumstance, condition or behavior currently present, likely to occur in the immediate future, or has it occurred in the recent past? The safety factors should not automatically be equated with the presence of an “immediate danger of serious harm.” Rather, they should be viewed as “red flag alerts,” due to present identified circumstances, conditions or behaviors.

All existing Safety Assessments must be in PEND or APRV status in order to begin a new Safety Assessment.
When you create a new Safety Assessment by clicking on the New button on the Safety Assessment tab, the information from the previously approved Safety Assessment is carried forward into the new Safety Assessment. All data is pre-populated, but you can modify this information in the current Safety Assessment. You must select a Type from the drop-down list and select a date from the Date field, which pre-fills with the current date. You can accept the current date, or change it by either using the drop-down arrow or typing directly in the field. The date should reflect when you actually assessed the safety of the child(ren).

---

**Step-by-Step: Starting a New Safety Assessment**

1. From the Safety Assessment tab, click on the New button. The Safety Assessment window displays. Safety Factors identified by the SCR at Intake display with a check mark to the left of each selected Safety Factor.

2. Click on the drop-down arrow for the Type field and select from the resulting list. The Types most frequently used by CPS workers are CPS 7 day (used within seven days of the date of Intake) and Inv. Determination (used within seven days prior to submitting the Investigation Conclusion for supervisory approval). Additional Safety Assessments are completed if safety issues arise at any point during the investigation.

3. By default, the current date displays in the Date field. To change this date, either type a date directly into the field or click on the drop-down arrow for the Date field and select from the resulting calendar.

   *Continue with “Step-by-Step: Recording Safety Factors” on page 214.*

---

**Tabs on the Safety Assessment Window**

The Safety Assessment window contains four tabs:

- Safety Factors
- Mitigating Strengths/Resources
- Safety Decision
- Safety Interventions

The tabs provide convenient access to information contained in the Safety Assessment. The tabs can be accessed/viewed in any order.
Safety Factors Tab

The upper half of the tab contains a list of **Safety Factors** with corresponding checkboxes. Select one or more Safety Factors from the list, as applicable. If no Safety Factors are present, click on the **No Safety Factors Identified** checkbox. Selecting this checkbox disables the Safety Factors. If you select any Safety Factors, the **No Safety Factors Identified** checkbox disables.

The selected Safety Factors display in the grid in the lower half of the tab. You need to review these Safety Factors and select (by clicking on the corresponding checkbox) those, if any, that place the child(ren) in immediate danger of serious harm. You are not required to select any factors from the immediate danger factors list.

Use the **Comment** field on the right side of the tab to record a description of the relevant behaviors and/or circumstances related to the selected Safety Factors. If you attempt to navigate to another tab before recording Comments, the following message displays:

“**You must comment on the selected Safety Factors.**”

You will still be able to navigate to other tabs, but you will not be able to complete and submit the Safety Assessment until comments are recorded. If you select **No Safety Factors Identified** on this tab, you do **not** need to record comments.
When you open the 7-Day Safety Assessment for an Investigation stage, the Comment field is highlighted in yellow (indicating that it is a required field), since Safety Factors were recorded by the SCR at Intake. If you deselect all of the SCR-recorded Safety Factors, the Comment field is no longer highlighted in yellow and the No Safety Factors Identified checkbox enables. If you select any Safety Factors, the Comment field will once again highlight in yellow.

Safety Factors

- Caretaker(s) previously committed or allowed abuse or maltreatment of a child(ren), and the caretaker’s prior response to that incident was not commensurate with the severity of the abuse or maltreatment.
- Caretaker(s) currently abuses alcohol, to the extent that it seriously affects his/her ability to supervise, protect or care for the child(ren).
- Caretaker(s) currently abuses drugs, to the extent that it seriously affects his/her ability to supervise, protect or care for the child(ren).
- Child(ren) has experienced or is likely to experience physical or psychological harm, as a result of domestic violence in the household.
- Caretaker(s)'s apparent or diagnosed mental health status or developmental disability seriously affects his/her ability to supervise, protect or care for the child(ren).
- Caretaker(s) is violent and appears out of control.
- Caretaker(s) appears unwilling and/or unable to meet the child(ren)'s basic needs for food, clothing, shelter and/or medical care.
- Caretaker(s) appears unwilling and/or unable to provide adequate supervision of the child(ren).
- Caretaker(s) likely caused serious physical harm to the child(ren) or has made a plausible threat of serious harm.
- Caretaker(s) views, describes or acts toward the child(ren) in predominantly negative terms and/or has extremely unrealistic expectations of the child(ren).
- Child(ren)'s current whereabouts cannot be ascertained and/or there is reason to believe the family is about to flee or refuses access to the child(ren).
- Child(ren) has been or is suspected of being sexually abused and the caretaker(s) is unable or unwilling to provide adequate protection of the child(ren).
- The physical living conditions are hazardous.
- Child(ren) is afraid of and/or extremely uncomfortable around people living in or frequenting the home.
- Child Has Positive Toxicology for drugs and/or alcohol. (NYC Required)
- Child(ren) is on Sleep Apnea Monitor. (NYC Required)
- Weapon noted in CPS report or found in the home. (NYC Required)
- Other (specify in comments).
- No Safety Factors Identified.

For examples and definitions of the Safety Factors, see Appendix E1: CPS Safety Factor Definitions.
Step-by-Step: Recording Safety Factors

1 On the Safety Assessment window, click on the corresponding checkbox in the Safety Factors list to select those you have identified during your investigation. As each Safety Factor is selected, it displays automatically in the Immediate Danger list at the bottom of the window. To deselect a Safety Factor, click on its corresponding checkbox to remove the check mark.

—OR—

If no safety factors apply, click on the No Safety Factors Identified checkbox. The Safety Factors disable.

2 In the Comments field on the right side of the window, record comments regarding behavior or circumstances that relate to the selected Safety Factors.

When any Safety Factors have been identified, you must record in the Safety Factors Comments window a brief description of the specific individual, behavior, condition and/or circumstance(s) associated with the identified Safety Factor(s).

3 Review the Safety Factors displayed in the Immediate Danger list at the bottom of the window; click in the corresponding checkbox(es) to select those (if any) that place the child(ren) in immediate danger of serious harm.

4 Click on the Save button to save the information and keep the Safety Assessment window open. The following message displays: “Changes have been saved.”

—OR—

Click on the File menu and select Save and Stay to save the information to the database and leave the Safety Assessment window open.

5 Click on the OK button. The Safety Assessment tab displays.

Continue with “Step-by-Step: Recording Mitigating Strengths/Resources” on page 215.
Mitigating Strengths/Resources Tab

The second tab on the Safety Assessment window is the Mitigating Strengths/Resources tab. This tab allows you to record a narrative describing any family strengths and/or neighborhood or community resources available and how they mitigate or address safety concerns for the child(ren). You may record this narrative at any time during the Safety Assessment. This text field has an unlimited amount of space.

This window features the Text Control functions, which work similarly to many of the basic formatting functions in Microsoft Word, such as bold, italics, bulleted and numbered lists, copy/paste and Spell Check.

A system edit requires you to record a narrative on the Mitigating Strengths/Resources tab if you select Safety Decision #2. (See page 217.) You can save the Safety Assessment while it is in process, but it will not be considered “complete” until the narrative is recorded. For all other Safety Decisions, the recording of this narrative may be required by local district policy and procedure, but is not required by the system. (See “Safety Decisions” on page 217.)

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Step-by-Step: Recording Mitigating Strengths/Resources

1. Click on the Mitigating Strengths/Resources tab.
2. Record a narrative regarding the strengths and resources of the family.
3 Click on the **Save** button to save the information to the database and close the *Safety Assessment* window.

—OR—

Click on the **File** menu and select **Save and Stay** to save the information to the database and leave the *Safety Assessment* window open. 

*The following message displays:*

“Changes have been Saved.”

4 Click on the **OK** button.

*Continue with “Step-by-Step: Recording the Safety Decision” on page 218.*

### Safety Decision Tab

The third tab on the *Safety Assessment* window is the **Safety Decision** tab. The Safety Decisions provide you with decisions that are consistent with casework practice. A Safety Decision is your conclusion regarding whether the child is safe in the home. You use all of the other components of the Safety Assessment to support this decision: the assessment of immediate danger of serious harm; family strengths and/or family, neighborhood or community resources that mitigate or address safety concerns; and safety interventions that have been initiated. Once you have completed the **Safety Factors** tab, you can complete the **Safety Decision** tab. Only one Safety Decision can be selected.
Safety Decisions

1. No safety factors were identified at this time. Based on currently available information, there are no child(ren) likely to be in immediate danger of serious harm. (You, the worker, do not select this decision; it is pre-filled by the system if No Safety Factors Identified is selected on the Safety Factors tab.)

2. One or more safety factors are present, however, these factors do not place a child in immediate danger of serious harm, and/or the existence of family strengths, resources or other mitigating circumstances utilized prior to DSS involvement has effectively removed the threat of immediate danger for the child(ren).

3. One or more safety factors are present, which place a child in immediate danger of serious harm, and controlling safety interventions have been initiated by DSS. Based on the controlling safety interventions, the child(ren) will remain in the home at this time.

4. One or more safety factors are present, which place a child’s life or health in imminent danger and removal to foster care or an alternative placement (or continued placement) is the only controlling safety intervention possible for one or more of the children.

5. One or more safety factors are present, which place a child in immediate danger of serious harm, but caretaker(s) has refused access to the child or fled, or child’s whereabouts are unknown. Appropriate legal/investigative actions are being taken.

On this tab, you must select one and only one Safety Decision from the list.

- If you selected the No Safety Factors Identified checkbox on the Safety Factors tab, the checkbox for Safety Decision #1 is automatically selected on the Safety Decision tab; all other Safety Decisions are disabled.

- If you select any Safety Factor other than No Safety Factors Identified, Safety Decision #1 is disabled.

- If you select Safety Decision #4 (see Safety Decisions above), the Placement window opens automatically. (See “The Placement Window” on page 219.) You must complete the Placement window in this situation.

The following conditions apply to the Safety Decision tab:

- You must select at least one Safety Factor (or the No Safety Factors Identified checkbox) on the Safety Factors tab before selecting a Safety Decision on the Safety Decision tab. If you navigate to the Safety Decision tab and have not yet recorded a Safety Factor (or selected the No Safety Factors Identified checkbox), the following message displays:

  “You must select at least one Safety Factor before selecting a Safety Decision.”

- A system edit allows only one Safety Decision to be selected. You may change the selected Safety Decision by clicking on a different one, which clears the checkbox for
the previous choice. A Safety Decision must be selected before you can submit the Safety Assessment for approval.

- If you select Safety Decision #3, you must select at least one safety intervention (on the Safety Interventions tab) other than “Placement – Foster Care” or “Placement – Alternate Caregiver.” (See “Safety Interventions Tab” on page 221.)

- If you select Safety Decision #2, you must record a Mitigating Strengths/Resources narrative.

<table>
<thead>
<tr>
<th>Step-by-Step: Recording the Safety Decision</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  Click on the Safety Decision tab.</td>
</tr>
<tr>
<td>2  Select the appropriate Safety Decision by clicking on its corresponding checkbox. If you selected the No Safety Factors Identified checkbox on the Safety Factors tab, Safety Factor #1 is selected automatically and all other Safety Factors are disabled.</td>
</tr>
<tr>
<td>3  Complete the required fields and windows, based on the Safety Decision you select. If you selected Safety Decision #2, continue with “Step-by-Step: Recording Mitigating Strengths/Resources” on page 215. If you selected Safety Decision #3, continue with “Step-by-Step: Recording Safety Interventions” on page 222. If you selected Safety Decision #4, continue with “Step-by-Step: Recording Placement Information” on page 220.</td>
</tr>
<tr>
<td>4  Click on the Save button to save the information and close the Safety Assessment window. -OR- Click on the File menu and select Save and Stay to save the information to the database and leave the Safety Assessment window open. The following message displays: “Changes have been Saved.”</td>
</tr>
<tr>
<td>5  Click on the OK button. Continue with “Step-by-Step: Saving and Submitting the Safety Assessment” on page 223.</td>
</tr>
</tbody>
</table>
**The Placement Window**

The *Placement* window allows you to select, from a list of all children in the stage, those who have been placed. This window is unique in that comments are required for any checkbox *not* selected, rather than those that *are* selected.

The *Placement* window is divided into two sections. The left side of the window lists all of the children in the stage, with a corresponding checkbox next to each child’s name. The right side of the window contains a text field where you must identify the protecting factors that allow each child that was not placed to remain safely in the home. To indicate that a child has been removed from the home, select the child’s name by clicking on his/her corresponding checkbox, as appropriate.

If you select Safety Decision #4 (see page 217) on the *Safety Decision* tab, the *Placement* window will open automatically.

Three buttons display at the bottom of the *Placement* window:

- **The Spell Check** button enables you to check the narrative for spelling errors.
- **The OK** button closes the *Placement* window and returns you to the *Safety Decision* tab on the *Safety Assessment* window. The information recorded on the *Placement* window is not saved until you click on the **Save** button (or select the **Save and Stay** command from the **File** menu) on the *Safety Assessment* window.
- **The Cancel** button closes the *Placement* window and returns you to the *Safety Decision* tab on the *Safety Assessment* window. If there are any unsaved changes on the window, they are discarded.

To review or change the placement information, click on the *Placement* button on the *Safety Decision* tab. If any children remain in the home, you need to record comments regarding why the child(ren) can remain safely in the home.
If the Placement window is accessed in view-only mode, only the checked children (those who were placed) display. The wording above the list field and the text field on the window changes when in view-only mode. The following displays above the list field:

“Children listed were placed or remain in foster care or alternative placement.”

The following message displays above the text field:

“Description of the protecting factors that allow child(ren) to safely remain in home.”

---

**Step-by-Step: Recording Placement Information**

1. On the Placement window, click on the checkbox next to the name of each child who has been placed in foster care or alternative placement.  
   *In order for this window to display, you must select Safety Decision #4 on the Safety Decision tab.*

2. In the Comments field, record the protecting factors that allow each child to remain safely in the home, if applicable.

3. Click on the OK button.  
   *The Safety Assessment window displays.*
Safety Interventions Tab

If you determine that the child(ren) are not safe in the current home environment, use the **Safety Interventions** tab to select interventions that control for the immediate health and safety of the child(ren). You can select one or more Safety Interventions from the list, indicating which intervening action has been taken to support the child’s safety based on the Safety Factors and Safety Decisions you selected. Each Safety Intervention you select must be supported by comments.

The **Safety Interventions** tab is divided into two sections. The left side contains a list of interventions designed to control for the immediate health and safety of the child(ren). The right side contains a text field for recording comments that describe how the selected interventions control for the immediate health and safety of the child(ren).

The following conditions apply to the **Safety Interventions** tab:

- If you select one or more Safety Interventions, you must record **Comments**. You can save without comments, but the Safety Assessment will not be complete and cannot be submitted for approval. Only one comment is required, even if you select multiple Safety Interventions.

- If you selected Safety Decision #3 on the **Safety Decision** tab, you must select at least one Safety Intervention other than “Placement - Foster Care” or “Placement - Alternate Caregiver.”

For definitions and explanations of Safety Interventions, see “Appendix E2: CPS Safety Interventions Definitions” on page 321.
**Safety Interventions**

- Intensive Home Based Family Preservation Services
- Emergency Shelter
- The non-offending caretaker is moving to a safe environment with the children.
- Authorization of emergency food/cash/goods
- Judicial Intervention
- Law Enforcement Involvement
- Emergency Medical/Mental Health Services
- Immediate and regulated in-home supervision/monitoring
- Emergency Alcohol Abuse Services
- Emergency Drug Abuse Services
- Correction or removal of hazardous/unsafe living conditions
- Placement - Foster Care
- Placement - Alternate Caregiver
- Use of family, neighbors or other individuals in the community as safety resources (specify)
- Alleged perpetrator has left the home voluntarily, current caretaker will appropriately protect the victim with CPS monitoring
- Alleged perpetrator has left the home in response to legal action
- Other (specify)

---

**Step-by-Step: Recording Safety Interventions**

1. Click on the **Safety Interventions** tab.

2. Select an intervention by clicking on its corresponding checkbox.  
   *More than one Safety Intervention can be selected.*

3. Record **Comments** regarding the interventions you selected and how those interventions control for the safety of the child(ren).

6. Click on the **Save** button to save the information and close the **Safety Assessment** window.
   —OR—
   Click on the **File** menu and select **Save and Stay** to save the information to the database and leave the **Safety Assessment** window open.  
   *The following message displays:*  
   “Changes have been Saved.”

4. Click on the **OK** button.
Saving and Submitting the Safety Assessment

The Safety Assessment must be complete before you can Save and Submit it for supervisory approval. The Complete? button on the Safety Assessment window provides you with an easy method of determining whether the Safety Assessment is complete. When you click on the Complete? button, CONNECTIONS verifies that all required components of the Safety Assessment have been completed. If the Safety Assessment is complete, “Yes” displays next to the Complete? button and the Save and Submit button enables. If the Safety Assessment is not complete, a message displays, indicating the item(s) requiring completion.

In order to complete the Safety Assessment, the following conditions apply:

- If any Safety Factor(s) are selected other than No Safety Factors Identified, comments must be recorded.
- If any Safety Interventions are selected, comments must be recorded.
- If No Safety Factors Identified is selected on the Safety Factors tab, Safety Decision #1 is automatically selected.
- If Safety Decision #2 is selected, the Mitigating Strengths and Resources narrative must be recorded.
- If Safety Decision #3 is selected, at least one Safety Intervention must be selected other than Placement – Foster Care or Placement – Alternative Caregiver.
- If Safety Decision #4 is selected, the Placement window must be completed.
- If any children listed on the Placement window remain unselected, comments must be recorded.
- A Safety Decision must be recorded.
- The Date and Type fields must be completed.

Step-by-Step: Saving and Submitting a Completed Safety Assessment

1. On the Safety Assessment window, click on the Complete? button. If all required components have been completed, “Yes” displays next to the Complete? button. Otherwise, a message displays, indicating the components that have not yet been completed.

2. Click on the Save and Submit button. The following message displays: “The Action will close this window. Do you wish to Continue?”

3. Click on the Yes button to continue. The following message displays: “Changes have been saved.”

4. Click on the OK button. The To-Do Detail window displays.

5. Click on the Save button. The Task List displays.
**Printing the Safety Assessment**

There may be times when you need to print a hard copy of the Safety Assessment. For example, your local district may require that a hard copy of the Safety Assessment be kept in the external case file, or perhaps the document is needed in court.

Any worker who has access to the Safety Assessment via the CPRS can print the Safety Assessment. Safety Assessments can be printed from the Safety Assessment tab, Safety Assessment window or Generate Report window.

Using the Generate Report button, you can specify which CPRS tabs to print (instead of having to print the entire CPRS). You can print a single Safety Assessment, a series of Safety Assessments or all Safety Assessments for the investigation stage from the Safety Assessment tab. You can also print a report of all Safety Assessments for the Investigation stage from the Generate Report window.

Once you select the Safety Assessment(s) to be printed from the Safety Assessment tab, click on the Print button to preview the selected Safety Assessment(s) in Report Viewer. Click on the Print button in the lower left corner of the Report Viewer window to print the selected Safety Assessment(s).

**Viewing or Modifying an Existing Safety Assessment**

To modify an existing Safety Assessment, you need to navigate to the Child Protective Record Summary task via the Task List, Staff To-Do List or Case To-Do List, then click on the Safety Assessment tab (if it is not already the active tab) once the CPRS opens. If you access a Safety Assessment via the Event List, the Safety Assessment is in view-only mode and the To-Do, Submit and New buttons are disabled.

To modify a Safety Assessment, its status must be PROC, COMP, PEND or REJT. (See “Using the Event List” on page 39 for a complete list of statuses and their definitions.) Safety Assessments in APRV status are view-only and cannot be modified.

If you access the Safety Assessment in modify mode after it has been saved and submitted for supervisory approval (PEND status), the following message displays:

“Saving will invalidate the pending approval. Do you wish to continue?”

- Click on the Yes button to open the Safety Assessment in modify mode; any changes you save to the Safety Assessment will invalidate the pending approval.
- Click on the No button to open the Safety Assessment in view-only mode.

You **must** resubmit the Safety Assessment if you invalidate a pending approval.
Step-by-Step:
Viewing/Modifying an Existing Safety Assessment

1. Click on the WORK button on the CONNECTIONS Toolbar.
   The Assigned Workload displays.

2. Click on the stage for which you want to view/modify the existing Safety Assessment.
   The Tasks… button enables.

3. Click on the Tasks… button.
   The Task List displays.

4. Click on the Child Protective Record Summary task.

5. Click on the Detail… button.
   The CPRS displays.

6. Click on the Safety Assessment tab.

7. Select the Safety Assessment you want to view or modify.

8. Click on the Detail button.
   If the selected Safety Assessment Status is “PEND”, the following message displays:
   “Saving will Invalidate the Pending Approval. Continue in Modify Mode?”

9. Click on the Yes button to make modifications.
   The selected Safety Assessment displays.

10. View information as desired, then click on the Cancel button.
    —OR—
    Record information as necessary, then click on the Save button.

Viewing the Intake Narrative from the Safety Assessment Tab

At the time of Intake, the SCR worker records a narrative of the report that includes as much information as is known by the reporter at the time of the call. The Intake Narrative enables you to refer back to the original report narrative when conducting an investigation. You can view the Intake Narrative in the CPRS by clicking on the Intake Narrative button in the CPRS footer, or by selecting the Intake Narrative command from the Options menu on the Safety Assessment window.
Safety Assessment for Case

The **Safety Assessment for Case** task on the *Task List* enables you to review all Safety Assessments completed for every stage in a case. The details of each safety assessment can be reviewed from the list. You can only modify an assessment for the stage you are currently in; all other Safety Assessments are in view-only mode.

<table>
<thead>
<tr>
<th>Step-by-Step: Accessing All Safety Assessments for a Case</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Click on the <strong>WORK</strong> button on the CONNECTIONS Toolbar. <em>The Assigned Workload displays.</em></td>
</tr>
<tr>
<td>2. Click on a stage to select it. <em>The <strong>Tasks</strong>... button enables.</em></td>
</tr>
<tr>
<td>3. Click on the <strong>Tasks</strong>... button. <em>The Task List displays for the selected stage.</em></td>
</tr>
<tr>
<td>4. Click on the <strong>Safety Assessment for Case</strong> task.</td>
</tr>
<tr>
<td>5. Click on the <strong>List</strong>... button. <em>The Safety Assessment for Case window displays.</em></td>
</tr>
<tr>
<td>6. Select a safety assessment from the list. <em>The <strong>Detail</strong>... button enables.</em></td>
</tr>
<tr>
<td>7. Click on the <strong>Detail</strong>... button. <em>The CPRS displays with the <strong>Safety Assessment</strong> tab active.</em></td>
</tr>
</tbody>
</table>
| 8. To close the Safety Assessment window, click on the **Cancel** button. *The Safety Assessment for Case window displays.*  
---**OR**---  
Click on the **Close** button to close the CPRS. *The Task List Displays.* |
| 9. Click on the **Close** button. *The Assigned Workload displays.* |
Maintaining Allegations

While investigating the allegations that have been recorded during the Intake stage, you may also uncover new allegations. These allegations must be recorded in CONNECTIONS. Always review new information with your supervisor to determine whether a new report should be made to the SCR, or if the new allegation(s) should be added to the current investigation stage. You cannot add the allegation of DOA/Fatality; a subsequent report must be made to the SCR in that circumstance. In CONNECTIONS, you need to record whether or not some credible evidence exists to support the allegations. “Some credible evidence” means there is evidence worthy of belief.

The following table lists each allegation and its corresponding CONNECTIONS code. (See Appendix F for allegation definitions.)

<table>
<thead>
<tr>
<th>Allegation</th>
<th>CONNECTIONS Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abandonment</td>
<td>ABAN</td>
</tr>
<tr>
<td>Burns/Scalding</td>
<td>BURN</td>
</tr>
<tr>
<td>Child's Drug/Alcohol Misuse</td>
<td>CDRG</td>
</tr>
<tr>
<td>Choking/Twisting/Shaking</td>
<td>CHTS</td>
</tr>
<tr>
<td>Educational Neglect</td>
<td>EDNG</td>
</tr>
<tr>
<td>Emotional Neglect</td>
<td>EMOT</td>
</tr>
<tr>
<td>Excessive Corporal Punishment</td>
<td>EXCP</td>
</tr>
<tr>
<td>DOA/Fatality</td>
<td>FATL</td>
</tr>
<tr>
<td>Fractures</td>
<td>FRAC</td>
</tr>
<tr>
<td>Inadequate Guardianship</td>
<td>INGD</td>
</tr>
<tr>
<td>Inadequate Food, Clothing, Shelter</td>
<td>IFCS</td>
</tr>
<tr>
<td>Internal Injuries</td>
<td>IINJ</td>
</tr>
<tr>
<td>Inappropriate Custodial Conduct</td>
<td>INCC</td>
</tr>
<tr>
<td>Inappropriate Isolation/Restraint</td>
<td>ISOL</td>
</tr>
<tr>
<td>Laceration, Bruises, Welts</td>
<td>LABW</td>
</tr>
<tr>
<td>Lack of Medical Care</td>
<td>LMED</td>
</tr>
<tr>
<td>Lack of Supervision</td>
<td>LSUP</td>
</tr>
<tr>
<td>Malnutrition/Failure to Thrive</td>
<td>MITT</td>
</tr>
<tr>
<td>Parent's Drug/Alcohol Misuse</td>
<td>PDRG</td>
</tr>
<tr>
<td>Poisoning/Noxious Substances</td>
<td>PONX</td>
</tr>
<tr>
<td>Swelling, Dislocation, Sprain</td>
<td>SWDS</td>
</tr>
<tr>
<td>Sexual Abuse</td>
<td>SXAB</td>
</tr>
<tr>
<td>Other</td>
<td>XOTH</td>
</tr>
</tbody>
</table>
Step-by-Step: Opening the Allegation List

1. Click on the **WORK** button on the CONNECTIONS Toolbar.  
   *The Assigned Workload displays.*

2. Click on a stage to select it.  
   *The **Tasks**... button enables.*

3. Click on the **Tasks**... button.  
   *The Task List displays for the selected stage.*

4. Click on the **Maintain Allegation** task.

5. Click on the **List**... button.  
   *The Allegation List displays for the selected stage.*

The steps you take at this point depend upon what you want to add or change. The following section groups these steps by larger tasks.

---

Step-by-Step: Substantiating/Unsubstantiating Allegations

1. On the **Allegation List**, click on an allegation to select it.

2. Click on the **Detail**... button.  
   *The Allegation Detail window displays for the selected allegation.*

3. Click on the drop-down arrow for the **Unsub/Sub** field and select **Substantiated** or **Unsubstantiated**, as appropriate.

4. Click on the **Save** button.  
   *The Allegation List displays.*

5. Click on the **Close** button.  
   *CONNECTIONS displays the following message:  
   “Calculating overall roles and determination.”*  
   *The Task List displays.*

You can address multiple allegations with the same determination:

1. From the **Allegation List**, click on each allegation to be addressed with the same determination.

2. Click on the **Detail**... button.  
   *A blank Allegation Detail window displays.*

3. Click on the drop-down arrow for the **Unsub/Sub** field and select from the resulting list.

4. Click on the **Save** button.  
   *The Allegation List displays.*

---
Step-by-Step: Recording Injuries for an Allegation

1. Select an allegation from the Allegation List.

2. Click on the Detail… button.
   The Allegation Detail window displays for the selected allegation.

3. Click on the Injury… button.
   The Injury List/Detail window displays for the selected allegation.

4. Record injury information by completing the Side, Area, Type and Cause fields in the center section of the window. Click on the drop-down arrow for each field and select from the resulting list.

5. If you want to add comments, record them in the Comments field.
   The Comments field is limited to 80 characters. A brief description of the injury, or the known cause, can be recorded in this field. A full description must be documented in the CPRS (Progress Notes tab) for this investigation.

6. Click on the Add button.
   The injury is added to the list section at the top of the window.

7. Click on the OK button.
   The Allegation Detail window displays.

8. Click on the Save button.
   The Allegation List displays.

9. If you are done maintaining allegations, click on the Close button.
   The Task List displays.

Step-by-Step: Adding Allegations

1. Click on the New button on the Allegation List.
   An empty Allegation Detail window displays for the selected stage.

2. Complete the fields on the window by clicking on the drop-down arrow for each field and selecting from the resulting list. The fields you must complete at this time are highlighted in yellow: MA/AB Child, Allegation and Alleged Subject. Be sure to address all additional allegations that have been added or modified.

You can record multiple injuries for the same allegation.

1. After recording an injury and clicking on the Add button, click on the Clear button to clear the fields on the Injury List/Detail window.

2. Record new injury information, and then click on the Add button.

3. Click on the OK button when you have recorded all injuries.
3 If appropriate, record a determination by clicking on the drop-down arrow in the Unsub/Sub field and selecting from the resulting list.

4 Click on the Save button.
   The Allegation List displays with the new allegation added to the list.

5 If you are done maintaining allegations, click on the Close button.
   The Task List displays.

---

Step-by-Step: Modifying Reported Injuries for an Allegation

1 From the Allegation List, click on an allegation to select it.
   The Detail... button enables.

2 Click on the Detail... button.
   The Allegation Detail window displays for the selected allegation.

3 Click on the Injury... button.
   The Injury List/Detail window displays for the selected allegation. All injuries already reported for this allegation are listed in the top section of the window.

4 Click on the injury in the list section that needs to be modified.
   The injury information displays in the fields in the detail section at the bottom of the window.

5 Change information in a field by clicking on the drop-down arrow for that field and selecting from the resulting list.

6 Record a brief description in the Comments field.
   The Comments field is limited to 80 characters. A brief description of the injury, or the known cause, can be recorded in this field. A full description must be documented in the CPRS (Progress Notes tab) for this investigation.

7 Click on the Modify button.
   The updated injury information displays in the list section.

8 Click on the OK button.
   The Allegation Detail window displays.

9 Click on the Save button.
   The Allegation List displays.

10 If you are done maintaining allegations, click on the Close button.
    The Task List displays.
Deleting Allegations that Were Added in Error During the Investigation Stage

If an allegation is added to a report in error during the Investigation stage, those erroneous allegations can be deleted from the stage. For example, you may have intended to select the “Inadequate Guardianship” allegation, but accidentally selected the “Fractures” allegation in the Allegation field on the Allegation Detail window.

Only allegations recorded in error during the Investigation stage may be deleted. All other allegations must be either substantiated or unsubstantiated in the Allegation Detail window.

---

**Step-by-Step:**
Deleting Allegations Added in Error During the Investigation Stage

1. In the Allegation List, click on an allegation to select it. 
   *The Detail… button enables.*

2. Click on the Detail… button. 
   *The Allegation Detail window displays for the selected allegation.*

3. Click on the Delete button. 
   *CONNECTIONS displays the following message: “Are you sure you want to delete this record?”*

4. Click on the Yes button. 
   *The allegation is deleted. The Allegation List displays.*

5. If you are done maintaining allegations, click on the Close button.

---

**Viewing Allegation Information in the CPRS**

The Allegations tab in the Child Protective Record Summary lists all allegations for the report. It includes two grids, as well as access to the Injury Comments and Reporter/Source information.

A check mark in the Comments column in the lower grid identifies that there are comments listed for the associated injury.

Clicking on the Reporter/Source button on the Allegations tab displays demographic information about the Reporter and/or Source of the Child Protective Report associated with this Investigation stage.
Fatality Reports

Reports from the SCR that identify a fatality require a special response. In addition to the tasks you complete in a typical investigation, you must complete both a 24-Hour Fatality Report and a 30-Day Fatality Report. You must also complete an expedited safety assessment within 24 hours, in addition to your 7-Day safety assessment. The following steps guide you through these special tasks.

24-Hour Safety Assessment

Follow instructions for a safety assessment in the “Completing a Safety Assessment” section on page 214. In the Reason field, select Alleged Child Fatality.

<table>
<thead>
<tr>
<th>Step-by-Step: Adding Fatality Information to a Child’s Record</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Click on the WORK button on the CONNECTIONS Toolbar. The Assigned Workload displays.</td>
</tr>
<tr>
<td>2 Click on a stage to select it from the list. The Tasks… button enables.</td>
</tr>
<tr>
<td>3 Click on the Tasks… button. The Task List displays for the selected stage.</td>
</tr>
<tr>
<td>4 Click on the Maintain Person task.</td>
</tr>
<tr>
<td>5 Click on the List… button. The Person List displays for the selected stage.</td>
</tr>
<tr>
<td>6 Click on the name of the child who died. The Detail… button enables.</td>
</tr>
<tr>
<td>7 Click on the Detail… button. The Person Detail window displays for the selected child.</td>
</tr>
<tr>
<td>8 Click on the drop-down arrow for the Reason field and select the reason for the child’s death.</td>
</tr>
<tr>
<td>9 Confirm that the recorded date of death in the DOD field is correct. This field is pre-filled with information collected during Intake.</td>
</tr>
<tr>
<td>10 Click on the Save button. The Person List displays.</td>
</tr>
</tbody>
</table>
Step-by-Step: Completing the 24-Hour Fatality Report

1. On the Person List, click on the name of the child who died. The Detail… button enables.

2. Click on the Detail… button. The Person Detail window displays for the selected child.

3. Click on the Options menu and select 24 Hour Fatality Summary Doc… The Output Launch window displays with the Output Type field pre-filled with the title of the report.

4. Click on the Document button. The Child Fatality Summary Report (24 Hours) opens as a Microsoft Word document. The report is pre-filled with demographic information recorded in CONNECTIONS.

5. Respond to each item in the report, in the section entitled “Staff Completed Information.”

---

Be certain to document as much information that is known at the time. Issues to be recorded in the Staff Completed Information include:

A. Cause and Circumstances Surrounding the Death. This includes a description of what is known about the cause of death, the circumstances leading up to the death, the name and address of the medical examiner or coroner and the date the medical examiner or coroner was notified.

B. Living Arrangements and Status of Surviving Siblings. This is a description of the condition and location of the surviving siblings.

C. Law Enforcement Involvement. This includes all information regarding actions taken or planned by the police and/or the district attorney. The name of the precinct, officer’s name, address, phone number of the police department and the date the district attorney was notified.

D. Other Comments

E. Will case be submitted to Child Fatality Review Team?

---

6. To close the Fatality Report, click on the File menu in the Word document window and select Close. The Output Launch window displays. The report does not need to be completed in one sitting. If you have not completed the report, you can close and save your work before submitting it to your supervisor.
7 When you have completed the report, click on the **Output Completed** checkbox.

8 Click on the **File** menu and select **Save and Submit**.
   *The To-Do Detail window displays, which serves as a request for your supervisor to review and approve the Fatality Report.*

9 Click on the **Save** button.
   *The To-Do is sent to your supervisor’s Staff To-Do List.*

**Completing the 30-Day Fatality Report**

Follow the same procedures as for the 24-Hour Fatality Report, but select **30 Day Fatality Summary Doc…** from the **Options** menu in the **Person Detail** window. When the 30-Day Fatality Summary document opens in Microsoft Word, complete **Section C: Staff Completed Information (30 Day)**. The report pre-fills with all information contained in the 24-Hour Fatality Report.

*The 24 Hour Fatality Report must be completed prior to starting the 30 Day Fatality Report.*

Follow the same directions as in the 24-Hour Fatality Report and update any information that was not known or is more current than at the time of the 24-Hour Fatality Report. Document any changes regarding the legal status of the alleged subject, and the location and safety of the other children who were in the home at the time of the fatality. If the results of the autopsy are available, include any information relevant to the investigation.
Answering the Investigation Actions Questions

Investigation Actions Questions are a guide to the legal mandates and logical steps that need to be completed in an investigation. This information should be documented clearly in CONNECTIONS. Completing the Investigation Actions Questions supports good casework practice. You should be aware of the Investigation Actions Questions throughout the investigation to ensure that each step is completed. As you complete tasks in an investigation, record them in the Investigation Actions Questions window. This window is accessed via the Task List.

**Step-by-Step:**

**Answering the Investigation Actions Questions**

1. Click on the WORK button on the CONNECTIONS Toolbar.
   The Assigned Workload displays.

2. Click on the stage for which you need to answer the Investigation Actions Questions.
   The Tasks... button enables.

3. Click on the Tasks... button.
   The Task List displays.

4. Select the Investigation Actions task.

5. If this is the first time you are accessing this task, click on the New button. If you have saved this window before, click on the Detail... button.
   The Investigation Actions Questions window displays.

6. Answer a question by selecting it and clicking on the Yes, No or N/A button at the right of the window, as applicable.

   If you answer No or N/A for a question, record an explanation in the Comments field for that question. Your comments should indicate why you did not complete the action. You can also add comments for questions for which you answer Yes.

7. Type comments, if applicable, into the Comments field. Make sure that the respective question is highlighted before you type, since each Investigative Action Question is associated with its own comments.

8. Return to #6 to answer the next question on the list. Continue until you have answered all of the questions and recorded all necessary comments.

9. Save your work by clicking on the Save button at the bottom of the window.
   The Task List displays.
# Step-by-Step: Printing a Report of Your Responses to the Investigation Actions Questions

1. Click on the **Investigation Actions** task.

2. Click on the **Detail…** button. The Investigation Actions Questions window displays.

3. Click on the **Forms** menu and select **Investigation Actions**. The form displays as a Microsoft Word document. If you have not saved responses to the Investigative Action questions, the following error message displays: “Form data not available. Please save data before producing form.”

4. To print the form, click on the **File** menu in the Word document window and select **Print**. The Microsoft Word print dialog box displays. Verify that the prompted printer choice is correct, and then choose a print range and number of copies to be printed.

5. Click on the **OK** button. The document is sent to the selected printer.

---

### Viewing the Investigation Actions Questions in the CPRS

The **Investigative Actions** tab in the Child Protective Record Summary displays the Investigation Actions Questions for the selected stage. The **Response** column indicates whether the action listed on that line was completed. The **Comments** column displays a check mark if comments were recorded for that action. Double-clicking on an Investigation Action opens the **Investigative Actions Comments** window, which displays any comments recorded for that action.

If no data has been saved on the **Investigation Actions** window, the **Investigation Actions** tab on the CPRS is blank.
The Risk Assessment Profile

You are responsible for thoroughly and continually assessing the safety and risk of every child in the household throughout the life of the CPS case. You must document this information in a timely and accurate manner in the case record. You use the Safety Assessment to document the child(ren)’s immediate safety. You use the Risk Assessment Profile (RAP) to document the child(ren)’s risk of future abuse or maltreatment.

See “Safety vs. Risk” on page 204 for an explanation of the differences between Safety and Risk.

Structured Decision-Making and the New York State Risk Assessment Profile

The New York State Office of Children and Family Services developed a Structured Decision-Making (SDM) approach designed to improve the consistency and effectiveness of each decision point in the child welfare system through the use of assessment tools that are objective, comprehensive and easy to use. These assessment tools help you focus on critical case characteristics and issues in a straightforward, simple manner, enabling you to work with families more efficiently and effectively. The assessment instruments are intended to guide and structure decisions, not to replace your professional judgment. The structured assessments provide you with a basis for explaining and justifying decisions, while providing administrators with a mechanism for ensuring accountability and quality.

The Risk Assessment Profile (RAP) is a research-based assessment tool that estimates the likelihood of recurrence of child abuse and maltreatment. It is the result of a research study that examined the relationship between family characteristics and subsequent indicated child abuse and maltreatment reports for actual cases in New York State. Research-based (actuarial) risk assessment models have consistently proven to be more reliable and accurate than consensus-based models in determining the likelihood of future abuse or maltreatment, even when the consensus-based models have been utilized by experienced workers.

The RAP classifies cases into four risk categories (Low, Moderate, High or Very High), based on the probability of future abuse or maltreatment.

High Risk and Very High Risk Cases

- Services are deemed essential in order to decrease the risk of subsequent abuse or maltreatment.
- If closing a case with High or Very High risk, an explanation of why services are not being provided is required at the investigation conclusion.
- Services should be targeted to High or Very High risk cases, regardless of the report determination (indicated or unfounded).
Moderate Risk and Low Risk Cases

- Families with Moderate or Low risk may have no service needs, or their needs may be appropriately served through informal community resources and/or through existing family strengths, resources or protecting factors within the home.
- The RAP does not replace casework judgment. There may be valid reasons why a service case is opened for a family with Low or Moderate risk.

The RAP is designed to help you and your supervisor make informed decisions regarding whether to open a case for services. This tool supports your ability and that of your supervisor to classify and measure more accurately the level or severity of risk in a family. The RAP uses various scales to promote and support a structured and rational decision-making approach to case practice, without replacing your professional judgment or that of your supervisor. You use the RAP in CONNECTIONS to document information that the RAP then uses to calculate the level of risk.

The RAP is intended to assist you and your supervisor in making decisions about whether to provide services to reduce the level of risk. The RAP, in conjunction with the Family Assessment, is an important part of the overall assessment analysis that leads to case planning. The RAP functionality in CONNECTIONS replaces the previously used Indicated/Closed UCR. In addition, there is an Initial FASP for CPS cases. The FASP for CPS cases contains the modified risk scales in combination with the RAP functionality.

The response to each Risk Element in the RAP has an associated point value (or “weight”). The point value was determined by examining the strength of the correlation between the Risk Element and the incidence of subsequent indicated abuse and neglect reports for a sample of actual cases in New York State. The higher an individual Risk Element’s score is, the higher its contribution is to the Preliminary Risk Score.

The RAP also calculates Risk Ratings (both Preliminary and Final), which refer to the probability that a subsequent child abuse/maltreatment report will be received and indicated on the RAP family unit within the next two years.

Based on data from the New York State 2003 RAP validation study, cases that have a current indicated report and a “Very High” risk rating have a 71% chance of having another subsequent indicated report within two years. The table below shows the probability for each level of risk in relation to whether the current report was indicated or unfounded:

<table>
<thead>
<tr>
<th>Risk Rating</th>
<th>Current Report Indicated</th>
<th>Current Report Unfounded</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Risk</td>
<td>7%</td>
<td>10%</td>
</tr>
<tr>
<td>Moderate Risk</td>
<td>25%</td>
<td>25%</td>
</tr>
<tr>
<td>High Risk</td>
<td>56%</td>
<td>40%</td>
</tr>
<tr>
<td>Very High Risk</td>
<td>71%</td>
<td>88%</td>
</tr>
</tbody>
</table>

Although no one can predict the exact cases in which subsequent child abuse or maltreatment will occur in the future, the Risk Rating can classify cases by the likelihood of subsequent child
abuse or maltreatment; this enables services to be targeted to families with the highest risk. This is especially important in times when service resources are scarce. The intent of the RAP is to identify and provide services to the highest risk families who need intervention and services in order to reduce their risk of subsequent abuse or maltreatment.

The RAP is completed during the Investigation stage in the CPRS in order to assist you as you make an informed decision regarding whether to open a case for services. The RAP is intended to support the development of the service plan by targeting resources to High and Very High risk cases. A complete analysis of safety, risk, family strengths and needs is necessary to make an informed decision regarding whether or not to open a case for services, as well as in the development of a service plan.

The RAP should support the development of the service plan by identifying and targeting areas where risk needs to be reduced.

The RAP in the Child Protective Record Summary (CPRS) provides several benefits:

- The ability for integrated case-level information
- Incorporation of the Risk Assessment Profile into the electronic case record
- A reduced need for duplicative data entry, which should result in more efficient and accurate completion of the Risk Assessment Profile

You use the RAP to evaluate all of the participants in an Investigation stage and identify the present case-level risk of future abuse or maltreatment. It may also be used to assess case progress. Each CPS-Familial Investigation stage has one corresponding RAP. The Primary worker is required to complete and submit the RAP for supervisory approval before its corresponding investigation conclusion can be submitted for approval.

The Primary worker assigned to the stage (or a member of the Primary worker’s unit hierarchy) can maintain the RAP. The Secondary worker assigned to the stage, a member of the Secondary worker’s unit hierarchy, or anyone with the appropriate security to open the CPRS in view-only mode can view the RAP.

When an Intake stage is progressed to the Investigation stage, a new RAP event is created and a system-generated Task To-Do is sent to the Primary worker’s Staff To-Do List. The Description of the Task To-Do reads:

“Risk Assessment (RAP) is due and must be submitted to Supervisor for approval.”

This To-Do automatically displays 33 days after the date of Intake. By default, the Staff To-Do List displays a To Date that is seven days from the current date; to view To-Dos beyond that seven-day period, extend the To Date and click on the Search button. The RAP Task To-Do is due 40 days from the date of Intake.

When you start a RAP for an Investigation stage and that RAP is the first created in the entire case, the RAP is blank. Only the Effective Date, Primary Caretaker and Secondary...
Caretaker fields are enabled; the Primary Caretaker field is highlighted in yellow, indicating that it is required. The Effective Date is also required, but the field does not highlight in yellow.

The RAP Family Unit
The RAP Family Unit is essentially the group of people whose risk you need to assess and for whom services may need to be provided. The RAP Family Unit is not limited to the individuals listed in the SCR report.

For the purposes of the Risk Assessment Profile, the RAP family unit consists of all of the following:

- All persons listed in the CPS case, including but not limited to all person residing in the child(ren)’s home at the time of the report
- Any person who has child care responsibility or frequent contact with the child(ren) and assumes a caretaker role
- Any child who is in foster care or alternative placement with a permanency planning goal of “return home” or independent living
- Any child who has run away or is temporarily in another living situation, but who is expected to return home.

Before beginning work on the RAP, make sure that you have added all necessary individuals in the RAP Family Unit to the Person List for the Investigation stage. (This is accomplished via the Maintain Person task on the Task List for the stage.) Any individual who needs to be selected as the Primary Caretaker or Secondary Caretaker in the RAP must first exist on the Person List for that Investigation stage.

The RAP Family Unit in CONNECTIONS consists of all individuals listed on the Person List in concurrently open stages. If any Person Merges and/or Case Merges need to be performed or anyone needs to be added to the Stage Composition, these tasks should be completed before starting a new RAP, in order to generate more accurate system responses.
Accessing the Risk Assessment Profile

The navigational path for accessing the RAP is determined by the role of the worker who is accessing the RAP and whether the RAP is being accessed in view-only or modify mode.

Step-by-Step:
Accessing the RAP in Modify Mode
(from the Task List)

1. Click on the WORK button on the CONNECTIONS Toolbar. 
   *The Assigned Workload displays.*
2. Click on the stage for which you need to access the RAP. 
   *The Tasks… button enables.*
3. Click on the Tasks… button. 
   *The Task List displays.*
4. Click on the Child Protective Record Summary task. 
5. Click on the Detail… button. 
   *The CPRS displays.*
6. Click on the Risk Assess Profile tab.

A Secondary worker assigned to the stage accesses the RAP in the same manner as the Primary worker, but the RAP is view-only for the Secondary worker.

Step-by-Step:
Accessing the RAP in Modify Mode
(from the Staff To-Do List)

1. Click on the TO-DO button on the CONNECTIONS Toolbar. 
   *The Staff To-Do List displays.*
2. Click on the Task To-Do associated with the RAP you need to access.
3. Click on the Navigate… button. 
   *The CPRS displays, with the Risk Assess Profile tab active.*

To access the RAP in view-only mode:

- Select the CPRS event from the Event List for the Investigation stage, click on the Detail button, then click on the Risk Assess Profile tab in the CPRS.
  —OR—
- The supervisor or Unit Approver navigates from a system-generated RAP approval Task To-Do on the Staff To-Do List or Case To-Do List. When the CPRS opens, the Risk Assess Profile tab is active.
  —OR—
- The supervisor or Unit Approver navigates from a system-generated Investigation Conclusion approval Task To-Do on the Staff To-Do List or Case To-Do List. When the CPRS opens, the Case Identification tab is active; clicking on the Risk Assess Profile tab will access the RAP.
The Risk Assess Profile tab contains the following fields:

**Effective Date**  
The Effective Date is required when you start a new RAP. System edits require that the Effective Date cannot be:
- a date earlier than the date of Intake;
- a future date; or
- an invalid date (e.g., February 30th)

In most instances, the Effective Date is current and reflects the date the RAP was initiated. When you mark the RAP complete, the completed RAP becomes case-level information. (See “Case-Level Information and the RAP” on page 256.) You should update the Effective Date, as necessary, before marking the RAP complete; the Effective Date should reflect the date on which you are marking the RAP complete. In some situations, the Effective Date is “historical” upon entry, because it reflects a prior time frame; in these situations, therefore, the Effective Date will not be the date the RAP is marked “complete.”

When considering the Effective Date, it is important that you distinguish between changes that are made to reflect the current situation and changes made to correct history.
- If you are making changes to the RAP that reflect the current situation (e.g., family circumstances changed), you should update the Effective Date to reflect the date on which you are marking the RAP “complete.”
- If you are making changes to the RAP to correct
historical information (i.e., correct a data entry error), you should not update the Effective Date.

**Primary Caretaker**

The Primary Caretaker is an adult (usually the mother) who resides with and is legally responsible for the child(ren). When more than one person who is legally responsible for the child(ren) resides in the household, the biological mother is presumed to be the Primary Caretaker. If the mother does not physically reside with the child(ren), the Primary Caretaker is the adult who resides in the child(ren)’s home and assumes primary responsibility for the care of the child(ren). *There can only be one Primary Caretaker.*

The **Primary Caretaker** field contains a drop-down list of adults contained in the *Person List* for all concurrently open Investigation stages in the case. (See Appendix G1: Definition of ‘Child’ and ‘Adult’.) This is a required field.

You must select a Primary Caretaker in this field before the Risk Elements will enable, except for Risk Elements 1 and 3, which will have system-generated responses. Risk Elements 1 and 3 populate with the system-generated responses when you first open the **Risk Assess Profile** tab. Once you select a Primary Caretaker, Risk Elements 1 and 3 enable for modification.

If you change the Primary Caretaker, the following message displays:

“Selecting a new Primary Caretaker will clear all previously entered responses and comments. Continue?”

- Click on the **Yes** button to change the Primary Caretaker and clear all previously entered responses (except those for Risk Elements 1 and 3, which are system-generated even if they have been modified).
- Click on the **No** button to cancel the change and display the Primary Caretaker in effect prior to the attempted change.

**Secondary Caretaker**

The Secondary Caretaker is:

- an adult who lives in the child(ren)’s home and assumes some responsibility for the care of the child(ren); or
- an adult who does not reside in the child(ren)’s home, but cares for the child(ren) on a regular basis.

This field contains a drop-down list of adults contained in the *Person List* for all concurrently open INV stages in the case.

Use the following order to identify the Secondary Caretaker:
• If the mother has a spouse or intimate partner who is the subject of the CPS report (whether alleged or confirmed), select this person as the Secondary Caretaker.

• If two or more potential candidates exist and one of them is a subject of the CPS report (whether alleged or confirmed), select this adult as the Secondary Caretaker.

• In all other situations, select the adult who assumes the most responsibility for the care of the child(ren), either within or outside of the home.

There will not necessarily be a Secondary Caretaker in a particular RAP family unit. If one exists, however, this needs to be documented fully in the RAP.

If you need to select a Secondary Caretaker, do so before responding to any of the Risk Elements. If you select a new Secondary Caretaker (or change the existing one) at any point after starting to respond to the Risk Elements, the following message displays:

“Selecting a new Primary Caretaker or Secondary Caretaker will clear all previously entered responses and comments. Continue?”

• Clicking on the Yes button will cause all of the responses you recorded so far (Risk Elements, Elevated Risk Elements, associated comments, Preliminary Risk Score, Preliminary Risk Rating and Final Risk Rating) to be cleared. You must then complete all of these sections again.

Risk Elements 1 and 3 (which contain system-generated responses) and their corresponding comments, if any, will not be cleared, even if you changed the system-generated response.

• Clicking on the No button cancels the addition or modification of the Secondary Caretaker and restores the field to its previous state.

Risk Elements
(For a detailed list of Risk Elements, see page 250.)

The Risk Assess Profile tab contains a set of 15 Risk Elements to assess risk: the first six pertain to the RAP Family Unit; the remaining Risk Elements pertain specifically to the caretaker(s). You must select one and only one response to each Risk Element. (If a Secondary Caretaker is identified, you are required to select one response for both the Primary and Secondary Caretakers for Risk Elements 7 - 15.)

The responses to Risk Elements 1 and 3 are system-generated the first time a RAP is opened for a particular stage.
Risk Element 1 reflects the number of prior reports associated with the adults and children in the RAP family unit. This Risk Element does not include duplicate (DUP) reports or consolidated investigations in the calculation of prior reports.

CONNECTIONS searches for reports that include the Person ID for any individual in the RAP Family Unit.

In order for CONNECTIONS to populate a response for Risk Element 1, the number of prior determined reports is calculated as the number of existing determined investigation stages in which either (a) a Confirmed Subject in the indicated stage is included on the Person List of any concurrently open investigation in the current case (unless the person only appears in the open investigation[s] as “Reported in Error” or “Added in Error”; or (b) a Confirmed Maltreated or Confirmed Abused child in the indicated stage is included as a child on the Person List of any concurrently open investigation in the current case.

The response to Risk Element 1 does not include historical reports in which an adult in the current case was a child at the time of the previous (historical) case.

One of five system-generated responses displays for this Risk Element:

- No prior determined reports
- Prior unfounded reports only
- One to two prior indicated reports
- Three to four prior indicated reports
- Five or more prior indicated reports

Although the field is system-filled, it is modifiable.

Risk Element 3 reflects the presence of one or more children younger than one year of age on the Person List of any concurrently open Investigation stages in the case. The Date of Birth (DOB) recorded in CONNECTIONS for the child(ren) is used to determine the response to this Risk Element, regardless of whether the DOB is exact or approximate. If the DOB field on the Person Detail window is blank for any person whose Rel/Int field signifies that the person is a child, CONNECTIONS includes that person as a child younger than one year old in this calculation.

If you cancel the RAP before the first save, the RAP remains in NEW status; the next time you access the RAP, the system-
generated responses are recalculated and Case-Level Information is incorporated accordingly (see page 256 for information on Case-Level Information).

Once you save the RAP, its event status changes to PROC (In Process). If you subsequently reopen the Risk Assess Profile tab for the In-Process RAP, CONNECTIONS does not regenerate/recalculate the system-generated responses to Risk Elements 1 and 3; the responses to these Risk Elements remain modifiable.

If the RAP is in PROC status and you add an individual to the Person List for the stage or indicate the report, CONNECTIONS does not regenerate/recalculate the system-generated responses to Risk Elements 1 and 3; the responses to these Risk Elements remain modifiable.

**Risk Elements 2 – 6** apply to the RAP Family Unit (everyone in the Person List for the concurrently open Investigation stages in the case). You respond to each Risk Element by clicking on either the Yes or No radio button for the respective Risk Element.

**Risk Elements 7 – 15** apply to the Primary and, if applicable, Secondary Caretakers in the stage. You respond to each Risk Element by clicking on either the Yes or No radio button next to the respective Risk Element for each applicable caretaker.

You can address Risk Elements in any order, but you must respond to all of the Risk Elements in order to populate the Preliminary Risk Score and Preliminary Risk Rating (see page 247) and enable the Elevated Risk button.

Comments enable you to document the basis for selecting a particular Risk Element response. A written comment provides you supervisor, any subsequent case planner, and anyone authorized to review the case (e.g., attorney, Family Court, state officials) with more insight regarding the rationale and context of the Risk Element response.

You use this field to record comments, as required, for each Risk Element. Each Risk Element has its own corresponding comments field.

This field highlights in yellow (signifying that comments are required) for any response that increases risk; you must record comments before you can proceed. You can record comments for any Risk Element, even if comments are not required for that Risk Element.

This field includes Spell Check functionality. The Spell Check button enables once you record a comment. The maximum
input size for this field is 1,500 characters of text.

You select this checkbox to verify that the information pre-filled by the system in Risk Element 1 (see “Risk Elements” on page 244) is accurate for the current RAP.

The system response could be inaccurate if an individual in the RAP family unit is in the CONNECTIONS database under more than one Person ID. This can occur when an individual being added to CONNECTIONS should be (but is not) merged with an existing Person ID.

In order for CONNECTIONS to consider Risk Element 1 as having been addressed, you must either select this checkbox or click on the drop-down arrow for the Risk Element 1 field and select a different response from the resulting list.

If you select a different response than the system-generated response, the checkbox disables.

If you need to change the response to Risk Element 1 from the system-generated response after having selected this checkbox, you must first deselect the checkbox before you can change the information in the Risk Element 1 field. If you later change the Risk Element 1 response back to the system-generated response, you need to reselect the checkbox.

If you need to add new persons to the Person List for an Investigation, or if you need to complete a Person Merge or Case Merge that could affect the stage, be sure to do so before starting a new RAP.

CPRS Help provides the path to the appropriate window(s).

This field displays the total score for all of the Risk Elements.

The response to each Risk Element in the RAP has an associated point value (or “weight”). The point value was determined by examining the strength of the relationship between the Risk Element and the incidence of subsequent indicated abuse and maltreatment reports, based on research of actual cases in New York State. The higher an individual Risk Element’s score is, the higher its contribution is to the Preliminary Risk Rating.

The Preliminary Risk Score is calculated once you have responded to all of the Risk Elements. If you change the response to any Risk Element(s), the Preliminary Risk Score recalculates automatically.
**Preliminary Risk Rating**

This field displays a rating based on the range in which the **Preliminary Risk Score** falls. This rating refers to the probability that a subsequent child abuse/maltreatment report will be received and indicated on the RAP family unit within the next two years.

The **Preliminary Risk Rating** is calculated once you have responded to all of the Risk Elements. The correlation between the **Preliminary Risk Score** and the **Preliminary Risk Rating** is defined in the table below:

<table>
<thead>
<tr>
<th>Preliminary Risk Score</th>
<th>Preliminary Risk Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 or lower</td>
<td>Low</td>
</tr>
<tr>
<td>3 to 6</td>
<td>Moderate</td>
</tr>
<tr>
<td>7 to 9</td>
<td>High</td>
</tr>
<tr>
<td>10 or above</td>
<td>Very High</td>
</tr>
</tbody>
</table>

If you change the response to any Risk Element(s), the **Preliminary Risk Rating** recalculates automatically.

**Final Risk Rating**

This field is based on the presence or absence of any of the Elevated Risk Elements. The presence of any Elevated Risk Element automatically raises the risk rating to Very High. (See page 255 for a list of Elevated Risk Elements.) This rating is based on the research-based probability that the presence of one of the Elevated Risk Elements significantly increases the likelihood that a subsequent child abuse/maltreatment report will be received and indicated on the RAP family unit within the next two years.

The **Final Risk Rating** is calculated once you have responded to all of the Elevated Risk Elements. If you later change the response to any Elevated Risk Element, the **Final Risk Rating** recalculates automatically.

The **Final Risk Rating** is calculated as follows:

- If you select “No” as the response for every Elevated Risk Element, the **Final Risk Rating** is calculated as equal to the **Preliminary Risk Rating**.

- If you select “Yes” as the response for at least one Elevated Risk Element, the **Final Risk Rating** is calculated as Very High and the following text displays below the **Final Risk Rating** field: “Elevated Risk Exists.”

The “Elevated Risk Exists” indicator and the **Final Risk Rating** display on the **Risk Assess Profile** tab, but unlike the **Preliminary Risk Score**, there is only a **Final Risk Rating**, not a final risk score.
Complete
(checkbox)

This checkbox signifies that you have completed all components of the RAP. The checkbox enables once you have responded to all of the Risk Elements and Elevated Risk Elements (including any required corresponding comments) and you have recorded an Effective Date. When you select this checkbox, all fields on the Risk Assess Profile tab (including the Elevated Risk Elements) are locked; you can then submit the RAP for supervisory approval. The Elevated Risk button remains enabled, but the information on the Elevated Risk Elements window is locked.

Once you select the Complete checkbox and save the tab (using either the Save or Save and Submit button), the information is saved to the stage and may also be saved as case-level information. (See “Case-Level Information and the RAP” on page 256.)

Once you have selected the Complete checkbox, you cannot make changes to the Risk Assess Profile tab unless you first deselect the Complete checkbox.

At any point after you have marked the RAP “complete,” but before the RAP has been approved, you can deselect the Complete checkbox to make changes to the RAP, which unlocks all of the RAP fields (including the Elevated Risk Elements). New case-level information may be presented for your acceptance. (See “Case-Level Information and the RAP” on page 256.)

If you make changes to the RAP, you should update the Effective Date to the date you are marking the RAP “complete,” as appropriate.

If you deselect the Complete checkbox and the RAP is in PEND or REJT status, the following message displays:

“Saving will invalidate pending approval. Continue in modify mode?”

- Clicking on the Yes button enables you to modify the RAP’s information; any changes you save to the RAP will invalidate the pending approval.
- Clicking on the No button leaves the Complete checkbox selected; all information on the Risk Assess Profile tab is view-only.

If you make changes to the RAP, you should update the Effective Date to the date you are marking the RAP “complete,” as appropriate.
Risk Elements

For Risk Element definitions, see Appendix G2.

1. Total prior reports for adults and children in RAP family unit†
2. Child(ren) in RAP family unit was in the care or custody of substitute caregivers or foster parents, at any time prior to the current report
3. Child(ren) under one year old in RAP family unit†
4. Inadequate housing with serious health or safety hazards, extreme overcrowding, or no housing
5. Financial resources are severely limited or mismanaged to the degree basic family needs are chronically unmet
6. Caretaker(s) in primary household has reliable and useful social support, from extended family, friends or neighbors
7. Caretaker is a perpetrator of, or victim of, domestic violence, or has serious conflicts with other adults
8. Caretaker(s) with alcohol abuse problem within the past two years, with risk of not meeting responsibilities
9. Caretaker(s) with drug abuse problem within the past two years, with risk of not meeting responsibilities
10. Caretaker(s) has a serious mental health problem
11. Caretaker(s) has very limited cognitive skills
12. Caretaker(s) has a debilitating physical illness or physical disability
13. Caretaker(s) has and applies realistic expectations of all the children
14. Caretaker(s) always or usually recognizes and attends to the needs of all the children
15. Caretaker(s) views the abuse/maltreatment situation as seriously as you

†Indicates a system-generated field; you can modify the value in this field.
The following buttons display at the bottom of the Risk Assess Profile tab:

**Approval Status**
This button opens the Approval Status window in view-only mode. The button is disabled until you have Saved and Submitted the RAP for supervisory approval.

**Elevated Risk**
This button opens the Elevated Risk Elements window. The button is disabled until you have responded to all of the Risk Elements.

**Save and Submit**
This button saves the changes to the database and generates a Task To-Do for your supervisor/Unit Approver to review and approve the RAP. This button enables after you select the Complete checkbox. (See page 249.)

When you click on the Save and Submit button, the RAP data is saved and the following message displays:

“This action will close this window. Do you wish to continue?”

- Click on the No button to cancel the submission process and leave the CPRS open with the Risk Assess Profile tab active.
- Click on the Yes button to save the information to the database. The following message displays: “Changes have been saved.” (Clicking on the OK button in response to that message closes the CPRS window and displays the To-Do Detail window, enabling you to continue the approval submission process.)

**Save**
This button saves the changes to the database. You can save work incrementally by clicking on this button; the Risk Assess Profile tab remains open.

When you click on this button, the following message displays:

“Changes have been saved.”

Click on the OK button to close the message.

If you have not yet selected the Complete checkbox, the incomplete data is saved for the stage and you can resume work at a later time. If you open an in-process RAP to continue work, new case-level information may be presented for your acceptance. (See page 256.)

If you attempt to close the CPRS before saving the information recorded on the Risk Assess Profile tab, the following message displays:

“Save changes in progress?”

- Click on the Yes button to save the changes; the following message displays: “Changes have been saved.” (Clicking on the OK button in response to that message closes the CPRS.)
- Click on the No button to discard the changes and close the CPRS.
If you have selected the Complete checkbox and you save the tab (using either the Save or Save and Submit button), data is saved to the stage and may also be saved as case-level information. (See “Case-Level Information and the RAP” on page 256.)

Cancel

This button clears all data entries you made to the Risk Assess Profile tab since the last time you saved the tab. When you click on this button, the following message displays:

“Do you want to cancel?
Unsaved data and/or narratives will be lost.”

- Click on the Yes button to discard the changes and refresh the tab; the tab remains open for you to continue working.
- Click on the No button to close the message; the tab remains open with the unsaved data.

At any point after starting to record or modify information on the Risk Assess Profile tab, you can click on the Cancel button to discard all changes you made since the last save.

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### Step-by-Step: Recording a New RAP

1. Click on the WORK button on the CONNECTIONS Toolbar.
   The Assigned Workload displays.

2. Click on the Investigation stage for which you need to record the RAP.
   The Tasks… button enables.

3. Click on the Tasks… button.
   The Task List displays.

4. Click on the Child Protective Record Summary task, then click on the Detail… button.
   The CPRS displays.

5. Click on the Risk Assess Profile tab.
   The Primary Caretaker field highlights in yellow.
   (If Case-Level Information exists, it automatically populates the new RAP. Risk Elements 1 and 3 are not part of Case-Level Information, but will have system-generated responses. See page 256 for details regarding Case-Level Information.)

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If you inadvertently transpose the Primary Caretaker and the Secondary Caretaker (i.e., the person you selected as the Primary Caretaker should have been selected as the Secondary Caretaker, and vice-versa), you need to click on the drop-down arrow for the Secondary Caretaker field and select the blank line before you can change the Primary Caretaker to the correct person (who was previously listed as the Secondary Caretaker).

The same person cannot be listed simultaneously as both the Primary Caretaker and the Secondary Caretaker.
6 In the **Effective Date** field, click on the checkbox to accept the current date or click on the drop-down arrow for the field and select a date from the resulting calendar. *(See page 242 for rules regarding the entry of data in this field.)*

7 Click on the drop-down arrow for the **Primary Caretaker** field and select from the resulting list.  
*The Risk Elements enable. The responses to Risk Elements 1 and 3 are system-generated, but may be modified.*

8 If applicable, click on the drop-down arrow for the **Secondary Caretaker** field and select from the resulting list. *(See the note at right, as well as “Secondary Caretaker” on page 244.)*

9 Confirm the system-generated response to **Risk Element 1** by clicking on the **Verify System Response is Accurate** checkbox.  
—OR—  
Click on the drop-down arrow for the **Risk Element 1** field and select a different response from the resulting list.

10 Verify that the system-generated response to **Risk Element 3** is accurate.  
*Change the response, if necessary, by clicking on the appropriate radio button.*

11 Respond to Risk Elements 2 and 4-15 by clicking on the **Yes** or **No** button, as applicable. Record comments, as necessary, in the **Comments** field on the right side of the window.  
*The Comments field highlights in yellow when the response to a particular Risk Element increases risk. Each Risk Element has its own corresponding Comments field. If comments are required, you must record them in this field before you can proceed to the next Risk Element. Once you have recorded a comment, the Spell Check button enables, allowing you to run a Spell Check on that comment. Risk Elements can be addressed in any order. (Note: Risk Elements 7 – 15 require responses for both caretakers if you selected a Secondary Caretaker in Step 8, above.) When you have responded to all of the Risk Elements, the **Preliminary Risk Score** and **Preliminary Risk Rating** populate and the **Elevated Risk** button enables.*

12 Click on the **Elevated Risk** button.  
*The Elevated Risk Elements window displays.*

13 Respond to each Elevated Risk Element by clicking on the **Yes** or **No** button, as applicable. Record comments, as necessary, in the **Comments** field at the bottom of the window.  
*The Comments field highlights in yellow the first time you select the Yes radio button for an Elevated Risk Element (if the Comments field is blank). There is only one Comments field for all of the Elevated Risk Elements. Once you have recorded a comment, the Spell Check button enables. Elevated Risk Elements can be addressed in any order.*

14 Click on the **OK** button to close the Elevated Risk Elements window.  
*The Risk Assess Profile tab displays. The Complete checkbox enables and the*
**Final Risk Rating** is calculated. If you responded “No” to ALL of the Elevated Risk Elements, the **Final Risk Rating** equals the Preliminary Risk Rating. If you responded “Yes” to ANY Elevated Risk Element, the **Final Risk Rating** displays as “Very High” and the following text displays below the **Final Risk Rating** field: “Elevated Risk Exists.”

15 Click on the Complete checkbox. All fields on the window are locked when you select the Complete checkbox. The Save and Submit button enables.

16 Click on the Save and Submit button to submit the completed RAP for supervisory approval. The following message displays: “This action will close this window. Do you wish to continue?”

17 Click on the Yes button. The following message displays: “Changes have been saved.”

18 Click on the OK button. The To-Do Detail window displays. Record comments, if desired, in this window.

19 Click on the Save button on the To-Do Detail window to complete the submission process.

**The Elevated Risk Elements Window**

When you have responded to all of the Risk Elements on the Risk Assess Profile tab, the Elevated Risk button enables. Clicking on this button opens the Elevated Risk Elements window.

This window contains a set of eight Elevated Risk Elements, which are not included among the 15 Risk Elements on the Risk Assess Profile tab because the Elevated Risk Elements refer to
events that are relatively rare. Although they occur infrequently, the Elevated Risk Elements indicate that there is a heightened risk of serious abuse or maltreatment in the future.

You must select a response of “Yes” or “No” for each Elevated Risk Element by selecting the corresponding radio button. A response of “Yes” to any Elevated Risk Element automatically raises the risk in the stage to Very High.

Use the Comments field at the bottom of the Elevated Risk Elements window to record comments for all Elevated Risk Elements to which you responded “Yes.” The first time you select “Yes” for an Elevated Risk Element, the Comments field highlights in yellow, signifying that it is a required field. (The field highlights only when the Comments field is empty and you select “Yes” for any Elevated Risk Element.) You can record comments for Elevated Risk Elements even if comments are not required. This field can hold a maximum of 2,000 characters of text and includes Spell Check functionality. Once you record a comment, the Spell Check button enables.

The OK button on the Elevated Risk Elements window closes the window. The information you recorded on the Elevated Risk Elements window is not saved until you save the Risk Assess Profile tab (via the Save or Save and Submit button/menu command).

Elevated Risk Elements

1. Death of a child as a result of abuse or maltreatment by caretaker(s)
2. Caretaker(s) has a previous TPR
3. Siblings removed from the home, prior to current report, due to abuse or neglect and remain with substitute caregivers or foster parent
4. Repeated incidents of sexual abuse or severe physical abuse by caretaker(s)
5. Sexual abuse of a child and perpetrator is likely to have current access to child
6. Physical injury to a child under one year old as a result of abuse or maltreatment by caretaker(s)
7. Serious physical injury to a child requiring hospitalization/emergency care within the last 6 months, as a result of abuse or maltreatment by caretaker(s)
8. Newborn child has a positive toxicology for alcohol or drugs

For definitions of the Elevated Risk Elements, see Appendix G3.

The following buttons display at the bottom of the Elevated Risk Elements window:

- Spell Check: This button performs the Spell Check function on the Comments field. The button is disabled until comments are recorded.
- OK: This button closes the Elevated Risk Elements window, returning you to the Risk Assess Profile tab. The OK button is disabled until you select an Elevated Risk Element and, if your response to that Elevated Risk Element is “Yes,” you record any accompanying comments. You can save work on the Elevated Risk Elements incrementally by clicking “OK” on the Elevated Risk Elements window and clicking on...
the **Save** button on the **Risk Assess Profile** tab.

**Cancel**

This button discards any unsaved changes and closes the *Elevated Risk Elements* window, returning you to the **Risk Assess Profile** tab.

When you click on the **Cancel** button, the following message displays:

> **Do you want to cancel?**
> **Unsaved data and/or narratives will be lost.**
>
> - Click on the **Yes** button to discard the changes and close the window.
> - Click on the **No** button to remain on the window.

When you have completed the *Elevated Risk Elements* window and clicked on the **OK** button, the **Risk Assess Profile** tab displays with the calculated **Final Risk Rating**. If you responded “Yes” to any of the Elevated Risk Elements, the following text displays directly below the **Final Risk Rating** field: “**Elevated Risk Exists.**” The **Complete** checkbox enables; once you click on this checkbox, the **Save and Submit** button enables and you can save the information to the database and submit the RAP for supervisory approval.

**Case-Level Information and the RAP**

Although the RAP pertains to a family unit (case-level information), a separate RAP is completed for *each* CPS Investigation. Since the family composition, demographics or Risk Elements may change from one CPS Investigation to the next, the level of risk may consequently change over time.

Multiple Investigation stages may be open concurrently within a CPS case. Since each Investigation stage has a corresponding Risk Assessment Profile, multiple RAPs could exist at the same time. There are system edits to ensure that the information made available in each investigation’s RAP is as current and accurate as possible, as well as being modifiable within each RAP.

To make completing multiple RAPs less burdensome, particularly when multiple reports are received for the same case within a short period of time, CONNECTIONS carries over the information from a previously completed RAP to the new RAP that is related to a Subsequent report. Any Risk Elements and Elevated Risk Elements (including all corresponding comments) from the previously completed RAP populate automatically in the new RAP (with the exception of Risk Elements 1 and 3), but you can and should modify this information if it has changed since the previous RAP was completed.

The first time you start the RAP for a particular investigation, CONNECTIONS determines if relevant case-level RAP information exists. Case-level information is considered relevant if the **Effective Date** of the case-level information is within 180 days of the current date.

If relevant case-level information exists, the responses to the Risk Elements (except Risk Elements 1 and 3, which will have system-generated responses), Elevated Risk Elements and all related comments are populated automatically with the case-level information; the populated fields are modifiable. You still need to verify the response to the system-generated Risk Elements.
If no relevant case-level information exists, all fields and comments are blank on the Risk Assess Profile tab.

The following case-level information is brought forward into new RAPs (automatically) or in-process RAPs (if you accept the case-level information from the Case Level Information window):

- Primary Caretaker
- Secondary Caretaker (if any)
- Responses to all Risk Elements (except those for Risk Elements 1 and 3, which are system-generated)
- Responses to all Elevated Risk Elements
- All comments related to Risk Elements (except those for Risk Elements 1 and 3) and Elevated Risk Elements

The availability of case-level information is determined by two fields in the RAP: the Effective Date field and the Complete checkbox:

- **If the RAP has NOT been marked as complete**, RAP information is only saved for the current stage; the information is not saved at the case level.

- **If the RAP has been marked as complete** and the Effective Date of the completed RAP is not earlier than the Effective Date of existing case-level information, the information on the current stage’s RAP is saved at the case level.

When you click on the Complete checkbox and then save the RAP (using either the Save or Save and Submit button), CONNECTIONS determines if case-level information already exists for the case:

- **If case-level information does not exist for the case**, the information in the current, completed RAP is stored at the case level.

- **If case-level information exists for the case**, CONNECTIONS determines if the RAP currently being saved is more relevant than the existing case-level information. The RAP currently being saved is considered to be more relevant if the Effective Date you recorded on the RAP being saved is more recent than that stored with the existing case-level information. If the information on the RAP currently being saved is more relevant, then new case-level information is saved; if not, the previous case-level information is retained.

Case-level information enables RAPs for other investigation stages in the same case to use this information as a starting point, which reduces the need for duplicative data entry.

Saving an in-process RAP never saves information at the case level; only RAPs marked “complete” can save information at the case level. When information is saved at the case level and case-level information already exists, the new case-level information overwrites the existing case-level information.
When case-level information is brought forward, the **Verify System Response is Accurate** checkbox is cleared. The **Preliminary Risk Score**, **Preliminary Risk Rating** and **Final Risk Rating** do not display until you either verify the system-generated response (by clicking on the checkbox) or select a different response to **Risk Element 1**.

When you reopen a RAP that has been saved in process (not marked complete), CONNECTIONS determines if case-level information has been changed since the last in-process save. If so, the **Case Level Information** window displays, giving you an opportunity to use the current case-level information in the in-process RAP. (See page 258.) If you accept the information, the fields on the in-process RAP are populated with the case-level information, which you can then modify before marking the RAP “complete.”

Once you select the **Complete** checkbox, the fields and comments are populated with their values at the time the checkbox was selected and all fields are locked. You must deselect the **Complete** checkbox in order to modify the information in this RAP.

If you open a modifiable RAP while an earlier Investigation stage exists in the case (and the RAP for the earlier stage is in NEW or PROC status), the following message displays:

> “**The Risk Assessment Profile for an earlier open investigation in this case has not yet been completed. It is recommended that the earlier RAP be completed first.**  
> **Do you wish to continue in modify mode?**”

- Click on the **Yes** button to open the current **Risk Assess Profile** tab in modify mode.
- Click on the **No** button to open the current **Risk Assess Profile** tab in view-only mode.

It is advisable, whenever feasible, that you complete RAPs in chronological order (i.e., RAPs for Initial [INI] Investigation stages should be completed before RAPs for Subsequent [SUB] Investigation stages).

**The Case Level Information Window**

The **Case Level Information** window opens automatically when you access a current, in-process RAP in modify mode and new case-level information exists. This window gives you an opportunity to bring data from a newly completed RAP in the same case into the current stage’s RAP. Accepting populates the in-process RAP with the case-level information overwriting what was previously recorded; rejecting allows you to continue modifying the RAP data as it was originally saved in-process.

![Case Level Information Window](image-url)
This window also displays if you deselect the Complete checkbox for a RAP when a more recently completed RAP (based on the Effective Date) exists.

The Case Level Information window contains three system-populated fields:

- The more recent RAP was entered on
- From Stage ID
- By

The Case Level Information window contains three buttons:

- **Accept Case Level Information**: This button accepts the case-level information from the more recently completed RAP, overwriting the data in the current, in-process RAP with the case-level information. This button is disabled until you have generated and viewed the RAP Case-Level Report.

  When you click on the Accept Case Level Information button, the following message displays:

  “You have chosen to accept information from a more recently saved RAP. If you choose to continue, you will overwrite any information you had entered into the RAP you are currently working on. If you do not wish to overwrite the information entered, select Cancel.”

  - The Cancel button in this message closes the message box and does not overwrite your current, in-process RAP with case-level information.
  - The OK button closes the Case Level Information window and populates the RAP with case-level information.

- **Generate RAP Report**: When you access the Risk Assess Profile tab in modify mode for an in-process RAP (after a more recent RAP has been completed), you can generate a report of case-level RAP information. You can use this report to determine whether to overwrite the current, in-process RAP with the case-level information.

  The Generate RAP Report button generates the RAP Case-Level Report (see page 260). Once you click on this button and subsequently close the generated RAP Case-Level Report, the Case Level Information window changes to display the following message (see the graphic on page 260):

  “If you wish to overwrite the RAP you are currently working on with the more recently saved information, click on Accept.
Case Level Information. After accepting, you may make changes to the responses and comments.

*If you do not want to overwrite the RAP you are currently working on, click Cancel and continue.*

**Cancel**  
This button closes the *Case Level Information* window and returns you to the current, in-process RAP without considering the case-level information.

### RAP Case-Level Report

The RAP Case Level Report lists each RAP Risk Element and Elevated Risk Element, along with the responses and comments recorded for both the current, in-process RAP and the more recently completed RAP. The report contains the following fields:

- **Case ID**: The unique, system-generated case identification number with which the Investigation stage is associated.
- **Case Name**: The name of the case (in familial CPS cases, this is usually the name of the mother of the abused/maltreated child[ren] in the case).
- **Stage CD**: The Community District (CD) code; applicable only to Investigation stages with addresses in New York City.
- **INV Stage ID**: The unique, system-generated identification number for the stage.
- **INV Stage Name**: The name of the stage (in familial CPS cases, this is usually the name of the mother of the abused/maltreated child[ren] in the stage).
- **INT Report Date**: The date the Intake was recorded by the SCR.
- **Fatality Report**: An indicator denoting that the Investigation stage involves the reported fatality of one or more children in the household (displays only if applicable).
**High Priority**

An indicator denoting that High Priority safety factors have been recorded for the stage (displays only in NYC, if applicable)

**Risk Elements 2 and 4 – 15**

Risk Elements displayed on the **Risk Assess Profile** tab (not including Risk Elements 1 and 3, since system-generated responses are created for them)

The fields described below display for both the current, in-process RAP and the more recently completed RAP (referred to as case-level information). The Effective Date of the case-level information displays in the heading of the **Case Level** column.

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Caretaker</td>
<td>The name of the Primary Caretaker selected on the <strong>Risk Assess Profile</strong> tab</td>
</tr>
<tr>
<td>Secondary Caretaker</td>
<td>The name of the Secondary Caretaker (if any) selected on the <strong>Risk Assess Profile</strong> tab</td>
</tr>
<tr>
<td>Response</td>
<td>“Yes” or “No,” as selected, in response to each Risk Element (Risk Elements 7 – 15 require a response for both the Primary Caretaker and the Secondary Caretaker, if selected; “Secondary” displays for all Risk Elements requiring a secondary response, even if a Secondary Caretaker has not been recorded.)</td>
</tr>
<tr>
<td>Comments [for Risk Elements]</td>
<td>Displays comments for Risk Elements. Comments label display whether or not a comment has been recorded.</td>
</tr>
<tr>
<td>Elevated Risk Elements</td>
<td>Elevated Risk Elements displayed on the <strong>Elevated Risk Elements</strong> window</td>
</tr>
<tr>
<td>Elevated Risk Response</td>
<td>“Yes” or “No,” as selected, in response to each Elevated Risk Element</td>
</tr>
<tr>
<td>Comments [for Elevated Risk Elements]</td>
<td>Displays comments recorded for Elevated Risk Elements. Comments label displays whether or not a comment has been recorded.</td>
</tr>
</tbody>
</table>

---

**Step-by-Step: Modifying a Current (In-Process) RAP**

1. Click on the **WORK** button on the CONNECTIONS Toolbar.  
   *The Assigned Workload displays.*

2. Click on the Investigation stage for which you need to modify the RAP.  
   *The **Tasks…** button enables.*

3. Click on the **Tasks…** button.  
   *The Task List displays.*
4 Click on the **Child Protective Record Summary** task, then click on the **Detail** button.  
*The CPRS displays.*

5 Click on the **Risk Assess Profile** tab.  
 *(If case-level information has changed since the last in-process save, the Case Level Information window displays. See page 256 for details regarding case-level information.)*

6 Enter any unrecorded responses or modify existing responses, as appropriate, for the Risk Elements.

7 Click on the **Elevated Risk** button.  
*The Elevated Risk Elements window displays.*

8 Enter any unrecorded responses or modify existing responses, as appropriate, for the Elevated Risk Elements.

  *Continue with Step 14 from “Step-by-Step: Recording a New RAP” on page 252.*
Marking a RAP “Complete”

You cannot mark a RAP as complete until all necessary information has been recorded and the Final Risk Rating has been calculated. The Complete checkbox does not enable until you have completed all necessary steps to calculate the Final Risk Rating and recorded an Effective Date. Once the Complete checkbox enables, click on it to select it. Marking a RAP “complete” freezes the information you recorded; the information cannot be modified unless the check mark is removed.

Until the RAP has been approved, you can deselect the Complete checkbox for a RAP that you previously marked “complete.” Once you do so, the RAP returns to PROC (in-process) status.

<table>
<thead>
<tr>
<th>Step-by-Step: Modifying a Completed RAP</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Click on the WORK button on the CONNECTIONS Toolbar. The Assigned Workload displays.</td>
</tr>
<tr>
<td>2 Click on the Investigation stage for which you need to record the RAP. The Tasks... button enables.</td>
</tr>
<tr>
<td>3 Click on the Tasks... button. The Task List displays.</td>
</tr>
<tr>
<td>4 Click on the Child Protective Record Summary task, then click on the Detail... button. The CPRS displays.</td>
</tr>
<tr>
<td>5 Click on the Risk Assess Profile tab.</td>
</tr>
<tr>
<td>6 Click on the Complete checkbox to deselect it. (If more recent case-level information exists, the Case Level Information window displays. See page 256 for details regarding case-level information.) All fields enable on the Risk Assess Profile tab.</td>
</tr>
<tr>
<td>7 Modify existing responses, as appropriate, for the Risk Elements.</td>
</tr>
<tr>
<td>8 Click on the Elevated Risk button. The Elevated Risk Elements window displays.</td>
</tr>
<tr>
<td>9 Modify existing responses, as appropriate, for the Elevated Risk Elements.</td>
</tr>
</tbody>
</table>

Continue with Step 14 from “Step-by-Step: Recording a New RAP” on page 252.
Saving and Submitting the RAP for Supervisory Approval

Only the Primary worker or a member of the Primary worker’s unit hierarchy can submit the Risk Assessment Profile for approval. Once you select the Complete checkbox, the Save and Submit button enables.

When reopening a RAP that was rejected by your supervisor/Unit Approver, you must deselect the Complete checkbox before you can make any changes.

If you access the Risk Assess Profile tab in modify mode after you saved and submitted the RAP for supervisory approval, the following message displays when you attempt to deselect the Complete checkbox:

“Saving will invalidate the pending RAP approval. Do you wish to continue?”

- Click on the Yes button to modify the RAP’s information; any changes you save to the RAP invalidate the pending approval.
- Click on the No button to leave the Complete checkbox selected; all information on the tab is view-only.

If you access the Risk Assess Profile tab in modify mode after both the RAP and the Investigation Conclusion have been saved and submitted for supervisory approval, the following message displays when you deselect the Complete checkbox:

“Saving will invalidate the pending RAP and Investigation Conclusion approvals. Do you wish to continue?”

- Click on the Yes button to modify the RAP’s information; any changes you save to the RAP invalidate the pending approvals of both the RAP and the Investigation Conclusion.
- Click on the No button to leave the Complete checkbox selected; all information on the tab is view-only.

When the supervisor navigates from a RAP approval Task To-Do, the following message displays if case-level information has changed since the RAP was completed:

“A more recent RAP has been completed.”

This message is only a warning; it does not prevent the supervisor from proceeding with the approval process. The supervisor cannot view the case-level information from this message.

Once you have submitted a RAP for approval, the Approval Status button enables on the Risk Assess Profile tab. This button opens the Approval Status window. You must reopen the CPRS and select the Risk Assess Profile tab in order to click on the Approval Status button and access the Approval Status window.
The Approval Status Window

The Approval Status window displays information related to a Risk Assessment approval that has been submitted, approved or rejected. This window is view-only.

The following information displays on the Approval Status window:

- Case Name
- Approval Topic
- Date
- Time
- Approver
- Status
- Comments (if recorded)

The only button on the Approval Status window is the Close button, which closes the window and returns you to the Risk Assess Profile tab of the CPRS.

Copy/Paste Functionality in the RAP

The information recorded in the Comments fields on both the Risk Assess Profile tab and the Elevated Risk Elements window can be copied into other modifiable areas of the CPRS within the same stage (e.g., Progress Notes). Since no Edit menu exists on the Risk Assess Profile tab or the Elevated Risk Elements window, you need to use the “hot key” function to copy information from, or paste information into, the RAP:

To copy, click and drag with the mouse to highlight the text, then use the Ctrl-C hot key function.

To paste, click to place the cursor in the desired location, then use the Ctrl-V hot key function.
The CPS Investigation Conclusion Window

When an investigation is completed, you must determine if the report of suspected child abuse or maltreatment is indicated or unfounded. You need to document this decision clearly in CONNECTIONS. If the decision is to indicate the report, you must then decide if the case should be closed or opened for services.

When making the determination to indicate or unfound a report, you apply the information collected during the investigation against the statutory definitions of child abuse and maltreatment. These definitions are found in the Family Court Act and Social Services Law. Using the evidentiary standard of “some credible evidence” (evidence worthy or capable of belief), you address whether a subject, through an act of omission or commission, caused the abuse or maltreatment of a child, as defined by statute.

This determination is documented in CONNECTIONS via the Maintain Allegation task and in the narrative on the CPS Investigation Conclusion window. The Investigation Conclusion Narrative uses a template that features the legal definitions of abuse and maltreatment, along with separate sections for recording Substantiated Abuse allegations, Substantiated Maltreatment allegations and Unsubstantiated allegations. Instructions are located at the beginning of the template.

At the conclusion of the investigation, you, the CPS worker, close the investigation stage. Closing a stage is not the same as closing the case. When the stage is closed, you decide whether to open the case for services or close the case. The case open/close decision is documented in CONNECTIONS via the Closing Reason for the stage.

OCFS requires an assessment for all indicated reports.

- If the report is indicated, but is not being opened for services, the risk assessment is documented through the Risk Assessment Profile (RAP) before the Investigation Conclusion is completed.
- If the report is indicated and is being opened for services, a Family Services Stage is opened and the Family Assessment and Service Plan (FASP) must be completed within seven (7) days of indication (if the CID is the Date of Indication).
- If the report is indicated and a services case is already open, a Plan Amendment must be completed within seven (7) days.

The decision to close an indicated case and not to provide any ongoing services must conform to OCFS regulatory requirements for case closing [18 NYCRR 432.2(c)(1)]. These requirements are found in this section under “Printing the CPS Investigation Summary Form” on page 274.

**Step-by-Step: Recording the Investigation Conclusion Narrative**

1. Click on the WORK button on the CONNECTIONS Toolbar. Assigned Workload displays.

2. Select the stage to be concluded. The Tasks... button enables.
3 Click on the **Tasks...** button.
   *The Task List displays for the selected stage.*

4 Click on the **Investigation Conclusion** task.
   *The **Detail...** button enables.*

5 Click on the **Detail...** button.
   *The **CPS Investigation Conclusion window displays.***

6 Click on the **Narrative...** button at the bottom of the window.
   *The **CPS Investigation Narrative displays as Microsoft Word document.***

7 Record your Investigation Narrative (see Case Recording Guidelines box below).

   The Investigation Narrative must address each allegation for each child and subject in the report. Using the standard of “Some Credible Evidence,” explain how the evidence complies with the Elements of Abuse and Maltreatment definitions. Each Element in the definition must be satisfied. Evidence must also comply with jurisdictional requirements and who can be considered a subject of a report. If the evidence supports these definitions, the report must be indicated. If the evidence does not support the definitions, the report must be unfounded (see Appendix C).

8 When you have completed the narrative, click on the **File** menu and select **Close**.
   *The **CPS Investigation Conclusion window displays.***

9 Save your work by clicking on the **Save** button at the bottom of the window.
   *The Task List displays. Note: If the following message displays:*
   
   “Save Failed: Data has been updated by another user. Save Narrative Locally?”
   
   *follow the instructions in the Enhanced Narrative Locking section on page 269.*

**Fatality – No Surviving Children**

Use the **Fatality – No Surviving Children** checkbox on the **CPS Investigation Conclusion** window to confirm that there are no surviving children in the stage. This checkbox enables if the Investigation contains _all_ of the following:

- A DOA/Fatality allegation
- A Date of Death (DOD) for the AB child associated with the fatality allegation
- No other persons younger than 18 years of age with a role of MA, AB or No Role

When all of these conditions exist, the **Fatality – No Surviving Children** checkbox enables and the following message displays:

“Fatality – No surviving children. Please checkbox to confirm.”
If you select the checkbox, you can submit the stage for approval without a completed Safety Assessment or Risk Assessment Profile (RAP). The event status for the Safety Assessment and RAP are changed automatically to “SUSP” (Suspended), unless the status for that event is already APRV (Approved) at the time that your supervisor approves the Investigation Conclusion.

If any of the following events occur before you submit the Investigation Conclusion for approval, the Fatality – No Surviving Children checkbox disables and you must complete a RAP (for implemented stages only) and a Safety Assessment:

- A person younger than 18 years of age who has a role of MA, AB or No Role is added to the stage.
- The age of a person with a role of No Role is changed to be younger than 18.

**High Risk Comments**

In conjunction with the Risk Assessment Profile (RAP), the High Risk Comments checkbox is selected automatically if the Final Risk Rating in the most recent RAP for the associated stage is “High” or “Very High” and you select the following in the Closure Reason field:

- Closed – No services required

When you select this closure reason, the following message displays:

“Explain why you are closing the case with high or very high risk.”

When you click on the OK button in response to this message, the Comments button enables and the High Risk Comments checkbox is populated. Click on the Comments button to open the Comments window and record detailed information supporting the decision to close the stage while the risk is High or Very High. You must record these comments in order to Save and Submit the CPS Investigation Conclusion window. Once you close the Comments window, you can reopen it by clicking on the Comments button. The character limit in this field is 999.
Recovering Narratives

Narrative fields in CONNECTIONS (such as the Investigation Conclusion Narrative field), feature a Text Control tool that provide you with formatting functions similar to those available in Microsoft Word. Any narratives with the Text Control tool, including those that open in a Microsoft Word document, have the narrative recovery features outlined in this section.

Narratives with the Text Control tool include features for recovering a narrative that has not been saved and that is lost due to one of the following:
- Power is lost to the computer
- The system connection is lost
- The system automatically times out after 30 minutes of inactivity
- Multiple workers are trying to modify the same narrative simultaneously (refer to the “Narrative Locking Feature” section for more information)

AutoSave/Auto-Recovery Features

As you enter or modify a narrative, CONNECTIONS automatically saves it as a Microsoft Word document on your local drive every three (3) minutes; this is the AutoSave feature.

The Auto-Recovery process is used to recover the autosaved version of a narrative if it is lost due to one of the reasons outlined above and the document has not been saved and closed properly. Autosaved documents are retained for 30 calendar days from the date of recovery.

The following CPS narratives are supported by this Auto Recovery feature:
- 24-Hour Fatality Summary
- 30-Day Fatality Summary
- Administrative Review
- CPS Familial & FC/DC Investigation Conclusion Narrative
- Progress Notes Narrative
- Safety Assessment (Mitigating Strengths/Resources) Narrative
- Local Protocol Narrative

Recovering an AutoSaved Narrative

As the possibility exists that another worker may modify the same narrative before you recover your local (autosaved) copy, CONNECTIONS determines (once your system connection is re-established) which version of the narrative is more recent: the version in the CONNECTIONS database or your local version. This functionality ensures that the most recent document is accessed and that you do not inadvertently overwrite more recent changes.

When you access the narrative in CONNECTIONS for the first time after the system disconnect or timeout, a message displays stating which version of the narrative is being recovered (the database version or the one stored on your local drive), based on which is more recent. If no local version exists, the database version is retrieved and no message displays.
See the table below for specific messages:

<table>
<thead>
<tr>
<th>The following message displays:</th>
<th>If the local version is more recent…</th>
<th>If the database version is more recent…</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Most recent narrative retrieved from local drive. Click OK to view.”</td>
<td>Click on the OK button to display the locally saved version of the narrative. Saving the local version saves the information to the database. <strong>Note:</strong> In any of the Case Planner Summary narratives, you must make a modification on the window before the Save button enables.</td>
<td>“Most recent narrative retrieved from Database; locally saved version exists.” Click on the OK button to display the database version of the narrative. To recover the locally saved narrative, refer to “Accessing a Locally Saved Narrative” procedure.</td>
</tr>
</tbody>
</table>

If you cancel out of the recovered narrative without saving, the following message displays:

“Do you want to cancel? Unsaved data and/or narrative(s) will be lost.”

- Clicking on the No button closes the message. The window remains open and unsaved changes remain pending.
- Clicking on the Yes button discards the narrative.

If you cancel out of one of the narratives that displays in Microsoft Word without saving, the following message displays:

“Save Changes?”

- Clicking on the No button discards the narrative.
- Clicking on the Yes button saves the narrative to the database.

If you discard a recovered narrative, it can no longer be retrieved (the file in the Local Save directory is also discarded).

**Narrative Locking Feature**

Another feature of CONNECTIONS, Narrative Locking, ensures that workers do not overwrite each other’s changes to an existing narrative if they are entering information at the same time.

If you attempt to save changes to one of these narratives (including the Investigation Conclusion Narrative) after another worker’s modifications have been saved, the following message displays:

“Save Failed: Data has been modified by another user.”

Clicking on the OK button displays the following message:

“Unable to Save <NarrativeName>. Press Yes to Save a Local Copy or No to Discard.”

- Clicking on the No button closes the message and discards the narrative.
Clicking on the Yes button saves a local copy of the narrative and the following message displays:

“Narrative <NarrativeName_timesaved>.doc saved in Start-Local Save.”

Be sure to note the name of the file displayed in this message so you can locate the locally saved version of the narrative. Click on the OK button to close the message.

**AutoSave/Auto-Recovery Features**

You have the option of using the local copy saved as a result of Narrative Locking instead of using the version in CONNECTIONS.

### Step-by-Step: Accessing a Locally Saved Narrative

1. Click on the Start button in the lower left corner of the Citrix desktop. The Start menu displays.
2. Select Local Save from the Start menu. The Local Save Documents sub-menu displays, containing a list of all documents that have been saved locally by CONNECTIONS.
3. Select the appropriate narrative from the list. The narrative opens in Microsoft Word.
4. Highlight the narrative text and select Copy from the Edit menu in Microsoft Word (or use the shortcut keys [Ctrl + C]).
5. In CONNECTIONS, navigate to the narrative into which you want to copy the local version. A message displays stating that the database version of the narrative was retrieved.
6. Click on the OK button. The database version of the narrative displays in the narrative field.
7. Place your cursor in the narrative field and paste the text you copied from the local version into the narrative field using the shortcut keys (Ctrl + V).
8. Save the narrative in CONNECTIONS. Your local narrative has been saved to the CONNECTIONS database.
Step-by-Step: Completing the CPS Investigation Conclusion Window

1. On the Task List, select the **Investigation Conclusion** task and click on the **Detail** button. The CPS Investigation Conclusion window displays. CONNECTIONS automatically identifies a determination, next to the **Determination** field, based on how you address the allegations. If no determination is identified, you have not yet addressed all the allegations.

2. In the **Investigation Begun** field, record the date on which you began the investigation.

3. In the **Investigation Completed** field, record the date on which you concluded your investigation.

4. Indicate why you are closing the Investigation stage by clicking on the drop-down arrow for the **Closure Reason** field and selecting from the resulting list (see the table below for a list of Closure Reasons).

5. Record an Investigation Conclusion Narrative. (See “Recording the Investigation Conclusion Narrative” on page 266.)

6. Save your work (see the tip box at right). The Task List displays. If you are ready to submit your work to your supervisor, follow the steps under Submitting a Concluded Investigation for Supervisory Approval on page 275.

---

### CPS Investigation Conclusion Window

<table>
<thead>
<tr>
<th><strong>Indicated Determinations</strong></th>
<th><strong>Unfounded Determinations</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Closed – Services refused/unable to take or continue legal action</td>
<td></td>
</tr>
<tr>
<td>Closed – No services required</td>
<td></td>
</tr>
<tr>
<td>Closed – Unable to contact/moved out of jurisdiction</td>
<td></td>
</tr>
<tr>
<td>Closed – No surviving children</td>
<td></td>
</tr>
<tr>
<td>Closed – Referred to Community Based Services Only</td>
<td></td>
</tr>
<tr>
<td>Open – CPS required</td>
<td></td>
</tr>
<tr>
<td>Open – CPS not required</td>
<td></td>
</tr>
</tbody>
</table>

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Closed – No services required</td>
</tr>
<tr>
<td></td>
<td>Closed – Refused services</td>
</tr>
<tr>
<td></td>
<td>Closed – Unable to contact/moved out of jurisdiction</td>
</tr>
<tr>
<td></td>
<td>Closed – Referred to Community Based Services Only</td>
</tr>
<tr>
<td></td>
<td>Case open - Services</td>
</tr>
</tbody>
</table>

---

Don’t forget to save the CPS Investigation Conclusion window! If you close the window without saving, you will lose everything you wrote, including your Investigation Narrative.

To save the information recorded in this window:

- Click on the **Save** button
- OR
- Click on the **File** menu and select **Save and Stay**

The **Save** button saves the information to the database and closes the window.

The **Save and Stay** command saves the information, but leaves the window open.

See **Appendix J** for expanded definitions of the Closure Reasons.
CPS cases may be closed only when the local child protective service has documented compliance with the standards specified in 18 NYCRR 432.2(c)(1) below:

(I) Standards for case closing. A case may be closed with the State Central Register only when the local child protective service has documented compliance with the standards specified in clauses (i)(a), (b) and (c) if this paragraph, as applicable.

(i) General standards for case closing when all rehabilitative services are to be terminated to children named in indicated reports of abuse and/or maltreatment and their families. A case may be closed to the statewide central register only:

(a) if the local child protective service can show that all children in the household are assessed to be safe despite the withdrawal of controlling interventions that may have been provided to protect the children and it is concluded that the risk of future abuse or maltreatment has decreased sufficiently;

(b) the child protective service has offered rehabilitative services to the children named in indicated abuse and/or maltreatment reports and their families, but such services have been rejected and the child protective service worker has assessed that it would not be in the best interest of the child to initiate a Family Court petition for a determination that a child is in need of care and protection;

(c) the child protective service has sought a Family Court order but the court has dismissed such a petition and it is not in the child’s best interest to continue additional Family Court action.

(ii) Standards when one or more children named in abuse and/or maltreatment reports are in foster care. A case may be closed with the statewide central register when one or more children named in abuse and/or maltreatment report(s) are in foster care, if all such children are:

(a) freed for adoption;

(b) continuing in out-of-home placement with a permanency planning goal of independent living or adult residential care;

(c) it is documented in the family and children services plan that the necessity of foster care for all children who are named in abuse and/or maltreatment report(s) is not presently attributable to the reasons set forth in paragraph (1) or (4) of section 430.10(c) of this Title.

(iii) Standard when one or more children named in abuse and/or maltreatment reports are receiving mandated preventive services. A case may be closed with the State Central Register when one or more children named in abuse and/or maltreatment report(s) are receiving mandated preventive services if all such children are presently at risk of foster care because of reasons which are unrelated to circumstances set forth in paragraph (1) or (4) of section 430.9(c) of this Title.
Step-by-Step: Printing the CPS Investigation Summary Form

1. Click on the **Investigation Conclusion** task.  
   *The Detail… button enables.*

2. Click on the **Detail…** button.  
   *The CPS Investigation Conclusion window displays.*

3. Click on the **Forms** menu and select **Inv Summary…**  
   *The CPS Investigation Summary form displays as a Microsoft Word document.*

4. Click on the **File** menu in the Word document window and select **Print**.  
   *The Microsoft Word Print dialog box displays. Verify that the prompted printer choice is correct, then choose a print range and number of copies.*

5. Click on the **OK** button.  
   *The document is sent to the selected printer.*

6. To close the form, click on the **File** menu and select **Close**.  
   *The CPS Investigation Conclusion window displays.*

7. To close the CPS Investigation Conclusion window, click on the **Cancel** button.  
   *The Task List displays.*

Viewing Investigation Conclusion Information in the CPRS

The **Investigative Findings** tab in the Child Protective Record Summary displays the information from the CPS Investigation Conclusion window.

When you click on the **Investigative Findings** tab; all the information that was recorded and saved on the Investigation Conclusion window displays. The fields on the **Investigative Findings** tab are view-only; any necessary changes must be made on the **CPS Investigation Conclusion** window. On this tab, the Investigation Conclusion Narrative is accessed via the **View Narrative** button (rather than via the **Narrative…** button on the **CPS Investigation Conclusion** window).

If you click on the **View Narrative** button on this tab before the Investigation Conclusion narrative has been saved on the **CPS Investigation Conclusion** window, the following message displays:

“**Investigative Findings not on file.**”

Click on the **OK** button to close the message. To record the narrative, you need to exit the CPRS and return to the **CPS Investigation Conclusion window**.
Submitting a Concluded Investigation for Supervisory Approval

After you have completed your investigation tasks, recorded your work on the Investigation Actions Questions window, filled out the CPS Investigation Conclusion window, completed your Safety Assessment(s) and Risk Assessment Profile, Maintained Allegations and completed your Investigation Narrative, you are ready to submit the concluded stage to your supervisor for approval. You do this from the CPS Investigation Conclusion window.

You must also update anyone in the stage that has a role of “unknown.”

---

**Step-by-Step:**
Submitting a Concluded Investigation for Supervisory Approval

1. Click on the **WORK** button on the CONNECTIONS Toolbar.
   *The Assigned Workload displays.*

2. Click on the investigation stage to be submitted as concluded.
   *The Tasks... button enables.*

3. Click on the **Tasks...** button.
   *The Task List displays for the selected stage.*

4. Click on the **Investigation Conclusion** task.
   *The Detail... button enables.*

5. Click on the **Detail...** button.
   *The CPS Investigation Conclusion window displays.*
   Review the window to make sure all areas have been completed and that the information is correct.

6. Click on the **Submit** button.
   *The To-Do Detail window displays.*
   This To-Do will be sent to your supervisor to notify him/her of your request for approval. CONNECTIONS automatically records some information for this To-Do, such as basic information about the stage, the name of your direct supervisor and a short description of the To-Do. If you have forgotten to complete any steps related to this stage, CONNECTIONS will notify you.

7. You may add a special note to your supervisor in the **Description/Notes** field of the To-Do Detail window.

8. Click on the **Save** button.
   *The To-Do is sent to the supervisor. The Task List displays.*

---

Remember:

- All of the Safety Assessments for the investigation must be approved or pending approval. You must have completed a Safety Assessment within seven (7) days of submitting the Investigation Conclusion.

- You need to address all allegations in the Allegation List for the stage before submitting the CPS Investigation Conclusion window.

- Record your RAP, mark it “complete” and submit it.

- Answer the Investigation Action Questions.

- Update any “unknown” roles.
When you submit the concluded stage for supervisory approval, CONNECTIONS sends the following alert to the Staff To-Do List of any Secondary workers and Case Managers assigned to the stage:

“INV Conclusion Submitted by Primary Worker for Approval - <stage ID #>”

This informs the Secondary worker of the pending approval and allows them the opportunity to complete any outstanding work or submit any additional information regarding the case.

If any work submitted to a supervisor is rejected, the comments recorded by the supervisor must be reviewed. The details of approvals and rejections, including the supervisor’s comments, can be viewed by opening the Approval Status window via the Event List. Any action needed to respond to these comments should be taken in a timely fashion and the work resubmitted.

Creating a Family Services Intake from a CPS Investigation Stage

There are different navigational paths to create an FSI. The paths available are contingent on your role and assigned Business Functions, and whether the stage is originating from a CPS Investigation or a Non-CPS Child Welfare request for services. As a CPS worker, you can open an FSI during the Investigation of a CPS report (via the Assigned Workload) or an FSI automatically opens upon the approval of a CPS Investigation Conclusion when the CPS stage is closed with an “open for services” Closure Reason:

**Unfounded CPS Report:**
- Case Open-Services

**Indicated CPS Report:**
- Case Open-CPS not required
- Case Open-CPS required

When an FSI is created, a Record Family Services Intake event is generated and displays on the Event List.

**Step-by-Step:**
Creating an FSI from an Open CPS Investigation

1. Click on the WORK button on the CONNECTIONS Toolbar.  
   The Assigned Workload displays.

2. Select an INV stage for which you will create an FSI.

3. Click on the Options menu and select Record Family Services Intake.  
   The Assigned Workload displays with the new Family Services Intake stage listed.

See the CONNECTIONS Case Management Step-by-Step Guide for more information about Family Services Intakes and Family Services Stages.
Changing the Case Status

If a case that was kept open at the conclusion of the Investigation stage needs to be closed (or a case that was closed needs to be reopened), the Case Status Maintenance function is used to update the status of the case.

The Case Status Maintenance (CSM) Report was created to assist districts in identifying cases that have an open status in the system, but which may need to be closed. The CSM Report identifies each case in the district that has an open case status but no open CPS stages. The report is run monthly and displays on the CONNECTIONS Report List for designated users. This window is opened via the RPRTS button on the CONNECTIONS Toolbar. The cases identified on the report can be closed using the online Case Status Maintenance function.

To change Case Status, the following criteria must be met:

- All stages of the case must be closed.
- Your district must match the district of the case in question and you must meet one of the following criteria:
  - Be the last historical Primary worker in the case
  - Be in the unit hierarchy of the historical Primary worker in the case and have a role at or above the role of the unit approver
  - Have a “View All in District” Business Function Profile (BFP).
- You must follow the CPS case closing guidelines found on page 273 of this guide.

The Case Status is changed in the Case Summary window.

---

**Step-by-Step: Opening the Case Summary Window**

1. Click on the **CASE** button on the CONNECTIONS Toolbar. *The Case Search Criteria window displays.*
2. Enter the **Case ID** number or the **Case Name**.
3. Click on the **Search** button. *The Case List displays with any case(s) matching the search criteria.*
4. Click on a case to highlight it.
5. Click on the **Summary** button. *The Case Summary window displays.*
Step-by-Step:
Closing an Open Case

1. From the Case Summary window of an open case, click on the Options menu and select Change Case Status.
   The following message displays:
   “The case status will be changed to CLOSED. Continue?”

2. Click on the Yes button.
   The Close Case window displays.

3. If a closure date other than the default (current) date is required, record the closure date in the Case Closure Date field.
   The date recorded in this field must be a valid date (e.g., not February 30), cannot be a future date and cannot pre-date the latest stage closure date.

4. Click on the Save button.
   The Case Summary window displays. The status of the selected case is now CLOSED. A Case Closed event also displays on the Event List.

Step-by-Step:
Opening a Closed Case

1. From the Case Summary window of a closed case, click on the Options menu and select Change Case Status.
   If the case does not have stages closed with an “Open for Services” Closure Reason, the following message displays:
   “No stage in case had been closed with an open for services reason. Continue?”
   This is only a warning message; it will not prevent you from continuing. You may want to verify that you selected the correct case from the list.

2. Click on the Yes button.
   The following message displays:
   “The case status will be changed to OPEN. Continue?”

3. Click on the Yes button.
   The Case Summary window displays. The status of the selected case is now OPEN. A “Case Re-Opened” event also displays on the Event List.

   Changing the Case Status to “OPEN” does not return the case to the Assigned Workload.
Checking the Status of an Approval

As a CPS worker, you will be submitting Safety Assessments and an Investigation Conclusion to your supervisor for review. Supervisory approval is required. When the “approval” has been completed by your supervisor, it is either approved or rejected.

The status of either of these submitted documents on the Event List is “PEND,” which means it is “pending supervisory approval.” When the supervisor approves the investigation conclusion, the status for the conclusion event (“Conclusion” in the Type column) changes from “PEND” to “APRV” If the Investigation Conclusion is rejected, the event status reverts to “COMP” (completed). The approval event (“Approval” in the Type column) changes from “PROC” (in process) to “COMP” (completed) when the Safety Assessment is either approved or rejected.

You will receive a system-generated alert on your Staff To-Do List notifying you that the approval was completed. The status of the approval event changes to “COMP” on the Event List. From the Event List, you can view any comments provided by your supervisor about the approval, or the reason for a rejection. If any work is rejected, the comments recorded by the supervisor must be reviewed. The details of an approval/rejection, including the supervisor’s comments, can be viewed by opening the Approval Status window via the Event List. Any action needed to respond to these comments should be taken in a timely fashion and the work resubmitted.

If you submit your work to your supervisor and that work is rejected, a Task To-Do is generated on your Staff To-Do List for that item. You need to view the To-Do Detail window to see the comments recorded by your supervisor regarding the rejection. Then you need to navigate from the Task To-Do to the window that requires correction.

When an Investigation Conclusion is approved, the stage is removed from your Assigned Workload and you receive an Alert To-Do notifying you of the approval. To view details of the approval at that point, open the Event List via a Case Search.

### Step-by-Step:
Viewing Approval Details from the Event List

1. Click on the TO-DO button on the CONNECTIONS Toolbar. The Staff To-Do List displays. The system-generated Alert related to the approval states whether your submitted work was approved or rejected.

2. To close the Staff To-Do List, click on the Close button.

3. Click on the WORK button on the CONNECTIONS Toolbar. The Assigned Workload displays.

4. Select the stage by clicking on it.

5. Click on the Options menu and select Event List. The Event List displays for the selected stage.

6. Click on an approval event (“Approval” in the Type column).

7. Click on the Detail… button. The Approval Status window displays.
8 Click on the approval line in the center section of the window. *The Comments field at the bottom of the window displays any comments made by the supervisor.*

---

**Step-by-Step:**
**Printing Displayed Approval Details for the Investigation Conclusion**

1. Click on the event for the approved Investigation Conclusion ("APRV" in the Status column and "Conclusion" in the Type column). *The Detail… button enables.*

2. Click on the Detail… button. *The CPS Investigation Conclusion window displays for the selected event.*

3. Click on the Options menu and select Approval Status. *The Approval Status window displays.*

4. Click on the Forms menu and select Approval Form. *The Approval Form displays as a Microsoft Word document.*

5. Click on the File menu in the Word document window and select Print. *The Microsoft Word Print dialog box displays.*

6. Click on the OK button. *The document is sent to the selected printer.*
Checking the Status of a Safety Assessment and/or Risk Assessment Profile Approval in the CPRS

If you need to check the status of an approval for a Safety Assessment or a RAP in a stage, you can access the Approval Status window within the CPRS. Select a Safety Assessment on the Safety Assessment tab in the CPRS and click on the Approval Status button at the bottom of the tab. For the RAP, you click on the Approval Status button at the bottom of the Risk Assess Profile tab. This button enables only when the selected Safety Assessment or RAP is in PEND, REJT or APRV status.

The Approval Status Window

The Approval Status window displays information about the approval status of the RAP or selected Safety Assessment. The Approval Status window is view-only.

The Approval Status contains the following fields:

- **Case Name**: The name of the case with which the approval is associated
- **Approval Topic**: The type of work that was submitted for approval
- **Date**: The date the approval was completed
- **Time**: The time the approval was completed
- **Approver**: The name of the person who approved or rejected the work
- **Status**: The status of the approval
- **Comments**: Displays comments recorded by the supervisor

Clicking on the Close button closes the Approval Status window and returns you to the tab in the CPRS.
Step-by-Step: Viewing the Approval Status Window in the CPRS

1. In the CPRS, click one either the Risk Assess Profile tab or the Safety Assessment tab, as appropriate. If accessing the RAP, skip to Step 3.

2. Click on a Safety Assessment (in PEND, REJT or APRV status) to select it from the list.

3. Click on the Approval Status button. The Approval Status window displays.

4. To close the Approval Status window, click on the Close button.

The Notice of Indication

If you determine that a report of abuse or maltreatment is indicated, you are required to provide a Notice of Indication to the subject and to other persons named in the report, except children, within seven (7) days of the conclusion of your investigation. This notice is generated in CONNECTIONS. Since the Notice of Indication is pre-filled with the name and address information recorded in the database, be sure to check the information for accuracy prior to printing.

If the report is unfounded, the SCR is notified and automatically sends the Notice of Unfounding to the subject and other persons named in the report, if the address detail information is complete.

Step-by-Step: Generating and Printing the Notice of Indication

1. Click on the CASE button on the CONNECTIONS Toolbar. The Case Search Criteria window displays.

2. Type in either the Case ID or the Case Name.

3. Click on the Search button. The Case List displays the case matching the search criteria.

4. Click on the appropriate case to highlight it.

5. Click on the Summary button. The Case Summary window displays.

A Notice of Indication can be launched only if the person selected from the Person List is a confirmed subject, a non-confirmed subject or a no-role adult named in the report. The context of the Notice is based on the selected person’s role.

CONNECTIONS disables the ability to provide a Notice of Indication for anyone named in an unfounded case.

You need to access the Person List via a case search because the stage is removed from your Assigned Workload when the Investigation Conclusion is approved by your supervisor.

You can no longer open the Person List via the Maintain Person task from the Assigned Workload.
6 Click on the investigation stage on the list.

7 Click on the **Options** menu and select **Person List**...
   
   The Person List displays for the selected stage.

8 Click on the name of the person who should receive the notice.

9 Click on the **Forms** menu and select **Notice of Indication** in English or Spanish, as applicable.
   
   The notice, pre-filled with address and other information recorded in CONNECTIONS, displays as a Microsoft Word document. Each time you generate a Notice of Indication in CONNECTIONS, the system creates an event on the Event List to serve as a permanent record that the notice was generated.

10 To print the Notice of Indication, click on the **File** menu in the Word document window and select **Print**.
   
   The Microsoft Word Print dialog box displays.

11 Click on the **OK** button.
   
   The document is sent to the selected printer.

**Please note:** If CONNECTIONS is *not* able to print the Notice of Indication (or any other system-generated letter), you should complete a manual (off-line) letter and send it to the appropriate individual(s). A copy should also be kept in the case record for future documentation. Remember to document the date and method of delivery for the Notice of Indication on the **Progress Notes** tab in the Child Protective Record Summary. *If it is not possible to print any system-generated letter, contact the Help Desk at 1-800-NYS-1323 (1-800-697-1323) for assistance.*

**The Mandated Reporter Letter**

Mandated reporters are entitled to the summary of the findings of the investigation. If a mandated reporter requests a report of the progress of your investigation, you are required to provide this information in a timely manner. You generate the Mandated Reporter Letter from within CONNECTIONS. This letter informs a Mandated Reporter about the status of the investigation, whether it’s under investigation, unfounded or indicated. The Mandated Reporter Letter includes no specific information about the investigation. The letter is pre-filled with the Reporter’s address and name, and the report’s Case ID and Stage ID numbers. In general, the Mandated Reporter Letter should be sent out as soon as possible after the report is determined. However, the mandated reporter can request a copy of this letter at any point during the investigation.

**Please note:** If CONNECTIONS is *not* able to print the Mandated Reporter Letter (or any other system-generated letter), you should complete a manual (off-line) letter and send it to the appropriate individual(s). A copy should also be kept in the case record for future
document documentation. Remember to document the date and method of delivery for the Mandated Reporter Letter on the Progress Notes tab in the Child Protective Record Summary. If it is not possible to print any system-generated letter, contact the Help Desk at 1-800-NYS-1323 (1-800-697-1323) for assistance.

<table>
<thead>
<tr>
<th>Step-by-Step: Generating and Printing the Mandated Reporter Letter</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Click on the CASE button on the CONNECTIONS Toolbar.</td>
</tr>
<tr>
<td>The Case Search Criteria window displays.</td>
</tr>
<tr>
<td>2 Enter either the Case ID or the Case Name.</td>
</tr>
<tr>
<td>3 Click on the Search button.</td>
</tr>
<tr>
<td>The Case List displays with any cases matching the search criteria.</td>
</tr>
<tr>
<td>4 Click on the case to highlight it.</td>
</tr>
<tr>
<td>5 Click on the Summary button.</td>
</tr>
<tr>
<td>The Case Summary window displays.</td>
</tr>
<tr>
<td>6 Click on the investigation stage on the list.</td>
</tr>
<tr>
<td>7 Click on the Events button.</td>
</tr>
<tr>
<td>The Event List displays for the selected stage.</td>
</tr>
<tr>
<td>8 Click on the event for the approved Investigation Conclusion (“APRV” in the Status column and “Conclusion” in the Type column).</td>
</tr>
<tr>
<td>9 Click on the Detail… button.</td>
</tr>
<tr>
<td>The CPS Investigation Conclusion window displays.</td>
</tr>
<tr>
<td>10 Click on the Forms menu and select Mandated Reporter.</td>
</tr>
<tr>
<td>The letter displays as a Microsoft Word document, pre-filled with name and address information recorded in CONNECTIONS. If you print the Mandated Reporter letter before the Investigation Conclusion is approved, the letter states that the report is “under investigation.”</td>
</tr>
<tr>
<td>11 To print the letter, click on the File menu and select Print.</td>
</tr>
<tr>
<td>The Microsoft Word Print dialog box displays. Verify that the prompted printer choice is correct, and then choose a print range and number of copies.</td>
</tr>
<tr>
<td>12 Click on the OK button.</td>
</tr>
<tr>
<td>The document is sent to the selected printer.</td>
</tr>
</tbody>
</table>

The Mandated Reporter Letter can be generated only if the reporter or source has a Mandated relationship/interest type, as indicated on the CPS Investigation Conclusion window.

Each time you generate a Mandated Reporter Letter in CONNECTIONS, you create an event on your Event List; this is a permanent record that the letter has been generated.

Make sure that you send the letter to a printer set up to print on your local district letterhead.
Appendix A:
Overview of CONNECTIONS Interfaces with FASP, WMS and CCRS Requirements
Overview of CONNECTIONS Interfaces with FASP, WMS and CCRS Requirements

The chart below gives a general overview of how the CONNECTIONS system supports the casework process and interfaces with other documentation requirements contained in the Family Assessment and Service Plan (FASP), WMS, and CCRS systems. The chart illustrates a generic case scenario and, therefore, does not cover every case circumstance. The Case Initiation Date (CID) may be different if foster care or preventive services start before the Investigation determination. If services begin prior to determination, then Day 1 (CID) for FASP, WMS, and CCRS also begins at that point.

<table>
<thead>
<tr>
<th>Timeline</th>
<th>Key Process/Activities</th>
<th>CONNECTIONS Database Documentation</th>
<th>FASP &amp; WMS/CCRS Documentation</th>
</tr>
</thead>
</table>
| Report Date                     | • Report taken at SCR  
• Report transmitted to LDSS CPS                                                          | INT Stage begins @ SCR  
Stage progression @ LDSS CPS                                      | None                          |
| At 1-60 days from Report Date   | • Conference with supervisor  
• 24 hour initiation of investigation  
• Ongoing assessment of safety  
• Assessing the child’s environment  
• Assess immediate safety of children  
• Gathering information (current and historical)  
• Reviewing cross referenced information  
• Contacting reporter/source                                                      | Review Intake  
Child Protective Record Summary (CPRS)  
Progress notes documented on the Progress Notes tab in the CPRS. |                                |
|                                | • Gathering information (current and historical)  
• Reviewing cross referenced information  
• Assessing the child’s environment  
• Accurately document/correct/maintain case information  
• Providing required notification                                                      | Maintain Person                |                                |
|                                | • Conference with supervisor  
• Gathering information (current and historical)                                               | Maintain Allegation                              |                                |
<p>|                                | • All of the key tasks are found in the Investigative Actions Questions                        | Investigation Actions                          |                                |</p>
<table>
<thead>
<tr>
<th>Timeline</th>
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</tr>
</thead>
</table>
| Complete Safety Assessments within 7 days of report and within 7 days prior to Investigation Conclusion. |  • Conference with supervisor  
• Ongoing assessment of safety  
• Assessing immediate safety of the children  
• Assessing the child’s environment  
• Contacting collaterals  
• If necessary, initiate legal action including removal  
• If necessary, develop safety intervention/protection plan/protect child | Child Protective Record Summary (CPRS)  
Safety Assessments documented on the **Safety Assessment** tab in the CPRS.  
Progress notes documented on the **Progress Notes** tab in the CPRS. |  |
| Up to 60 days from Report Date (If indicated, this may be considered Day 1 [Case Initiation Date – CID] for FASP purposes) |  • Conference with supervisor  
• Gathering information (current and historical)  
• Assessing the child’s environment  
• Accurately document/correct/maintain case information.  
• Contacting collaterals  
• If necessary, initiate legal action including removal  
• Providing required notification  
• If necessary, develop safety intervention/protection plan/protect child | Investigation Conclusion  
Child Protective Record Summary (CPRS)  
Progress notes documented on the **Progress Notes** tab in the CPRS. |  
For Unfounded reports:  
No FASP required if no services case is opened. If case is opened, FASP is due 30 days from CID.  
For Indicated reports:  
*Complete one of the following:*  
• If the CID is the Date of Indication, the Initial FASP within seven (7) days of determination (determination is the date the Investigation was approved)  
• If CID is not the Date of Indication, the Initial FASP is due 30 days from the CID  
• Plan Amendment for cases open “Protective”  
  
For cases receiving follow-up services, district worker opens services case in WMS & CCRS (Case Manager responsibilities can be reassigned to Prevention/Foster Care, to long-term Protective Unit or keeps case open on own workload, as applicable). |
<table>
<thead>
<tr>
<th>Timeline</th>
<th>Key Process/Activities</th>
<th>CONNECTIONS Database Documentation</th>
<th>FASP &amp; WMS/CCRS Documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fatality</td>
<td>• Conference with supervisor. &lt;br&gt;• Gathering information. &lt;br&gt;• Assessing the environment. &lt;br&gt;• Accurately document/correct/maintain case information. &lt;br&gt;• Contacting collaterals &lt;br&gt;• If necessary, initiate legal action. &lt;br&gt;• Providing required notification &lt;br&gt;• If necessary, develop safety intervention/protection plan to protect other child(ren) in the home. &lt;br&gt;• Notify District Attorney(or assure notification) and provide a copy of the report. &lt;br&gt;• Report to medical examiner or coroner.</td>
<td>24 Hour Fatality Summary &lt;br&gt;• This document is required if the child has a DOA allegation. &lt;br&gt;• The information is entered by the case worker within 24 hours of the fatality. &lt;br&gt;• Provides preliminary information surrounding a child’s death and the safety of any surviving sibling.</td>
<td></td>
</tr>
<tr>
<td>24 Hours</td>
<td></td>
<td>24 Hour Safety Assessment &lt;br&gt;• Safety Assessment for the Alleged Child Fatality must be completed within 24 hours.</td>
<td></td>
</tr>
<tr>
<td>30 Days</td>
<td>• Same as above.</td>
<td>Child Protective Record Summary (CPRS) &lt;br&gt;Progress notes documented on the Progress Notes tab in the CPRS</td>
<td></td>
</tr>
<tr>
<td>30 Day</td>
<td>30 Day Fatality Summary &lt;br&gt;• This document is required if the child has a DOA allegation. &lt;br&gt;• Provides comprehensive information surrounding a child’s death and the safety of any surviving sibling. &lt;br&gt;• Maintain progress notes in the CPRS.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fatality</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Timeline</td>
<td>Key Process/Activities</td>
<td>CONNECTIONS Database Documentation</td>
<td>FASP &amp; WMS/CCRS Documentation</td>
</tr>
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</tr>
<tr>
<td>Anytime</td>
<td>• Subsequent report</td>
<td>• Begin again at top. &lt;br&gt;• To ensure proper communication of any changes in safety status/plan, CPS worker should print 2nd Safety Assessment and give copy to ongoing worker.</td>
<td>• Record in CPRS Progress Notes tab when the FASP is due.</td>
</tr>
</tbody>
</table>

This chart adapted from: PDP, Rockefeller College, University at Albany. Case Initiation Date (CID) may be different if foster care or preventive services start before Investigation determination. If services begin prior to determination, then Day 1 (CID) for FASP, WMS, and CCRS would also begin at that point.
## Appendix B:
CONNECTIONS Outputs

<table>
<thead>
<tr>
<th>OUTPUT</th>
<th>DESCRIPTION OF OUTPUT</th>
<th>HOW TO ACCESS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Intake</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intake Narrative</td>
<td>A Word document that captures information recorded during an Intake. The output will include three sections: Call Narrative; Miscellaneous Information; and Locating Information. Locating Information captures details of where involved persons can be reached if different from data entered on Call Person windows.</td>
<td>Intake Narrative File Menu Print</td>
</tr>
<tr>
<td></td>
<td><strong>Note:</strong> Can also be accessed from the CPRS</td>
<td></td>
</tr>
<tr>
<td>Intake Report</td>
<td>A detailed description regarding all the information entered into the database for a given stage during Intake. The different sections of the Intake Report include: Summary, Principal Information, Allegation Detail, Call Narrative, Reporter Information, Source Information.</td>
<td>Assigned Workload Reports Menu Reports Icon Report List</td>
</tr>
<tr>
<td></td>
<td><strong>Note:</strong> Can also be accessed from Call Summary</td>
<td></td>
</tr>
<tr>
<td>Individual Report Involvement (IRI)</td>
<td>A comprehensive cross reference history for each principal listed in an associated Intake Report. The IRI includes all Under Investigation, Indicated and Unfounded CPS cases and Reports that existed prior to the date of the Intake Report.</td>
<td>Assigned Workload Reports Menu Reports Icon Report List</td>
</tr>
<tr>
<td></td>
<td><strong>Note:</strong> Can also be accessed from Call Summary</td>
<td></td>
</tr>
<tr>
<td><strong>On-Call</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On Call Report</td>
<td>Allows the user to view the on call coverage for their particular county by selected start and end dates / times.</td>
<td>On Call List Reports Menu</td>
</tr>
<tr>
<td>OUTPUT</td>
<td>DESCRIPTION OF OUTPUT</td>
<td>HOW TO ACCESS</td>
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</tr>
<tr>
<td><strong>Investigation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Open Case Inquiry Report (OCI)</td>
<td>An on-line case/workload management report that includes all open cases that have been progressed to Investigation, in which a worker is the “Primary” worker. The OCI lists the statuses of all safety assessments and investigation conclusions to be completed.</td>
<td>Assigned Workload Reports Menu OCI by Worker</td>
</tr>
<tr>
<td>Summary of Three Most Recent Intakes</td>
<td>This form contains pertinent information about the last three intakes associated with a case. It can be used by a CPS worker to review prior case history.</td>
<td>Case List Forms Menu</td>
</tr>
<tr>
<td>Summary of Three Most Recent Investigations</td>
<td>This form contains pertinent information about the last three Investigation Stages in a case. It can be used by a CPS worker to review prior case history.</td>
<td>Case List Forms Menu</td>
</tr>
<tr>
<td>Safety Assessment</td>
<td>This report displays the safety decision recorded during the investigation; selected safety factors; any safety factors that were determined to place the children in immediate danger of serious harm; mitigating strengths and resources and interventions (if appropriate). Comments regarding the safety decision, selected interventions, and mitigating circumstances are also noted on the report.</td>
<td>CPRS</td>
</tr>
<tr>
<td>CPS Investigation Narrative</td>
<td>Worker’s determination for the CPS Investigation and supporting documentation of that decision</td>
<td>CPS Investigation Conclusion window Narrative button File Menu Print</td>
</tr>
<tr>
<td>Investigative Actions Form</td>
<td>Checklist of all required steps that have been completed in a CPS investigation. The form consists of a description of each required step, preceded by a “yes/no/not applicable” field, followed by the comments recorded by the worker pertaining to that step.</td>
<td>Investigation Actions Questions window Forms Menu</td>
</tr>
<tr>
<td>CPS Investigation Summary Form</td>
<td>A summary of information regarding a Child Protective Service investigation, as well as Administrative Review and Fair Hearing information, when applicable. This report includes worker detail, allegation information, injury detail, principal information, investigation narrative, administrative review and fair hearing information (when applicable).</td>
<td>CPS Investigation Conclusion window Forms Menu</td>
</tr>
<tr>
<td>Output</td>
<td>Description of Output</td>
<td>How to Access</td>
</tr>
<tr>
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<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>---------------------------------------------------</td>
</tr>
<tr>
<td>Approval Form</td>
<td>Shows information on approvals associated with a particular event. Can be printed to document the decision (approved or rejected), the date that the decision was made, and information about the person who made the decision. It will also provide the user with a description of the event that was being approved. Note: If an event is rejected, comments regarding that rejection will remain available only until the event is resubmitted and approved.</td>
<td>Approval Status window (via the Event List) Forms Menu</td>
</tr>
<tr>
<td>Notice of Existence (Familial; English and Spanish versions)</td>
<td>Used to notify an individual that a report has been filed at the State Central Register (SCR). This notice is sent to both the subject of the report and other individuals 18 years and older that are named in the report. The form explains what the investigation will entail, and the rights of the individuals named in the report.</td>
<td>Person List Forms Menu</td>
</tr>
<tr>
<td>Notice of Existence (Non Familial)</td>
<td>Used to notify the subject of a DC/FC report, or the parents of a child(ren) named in the report, that it has been filed at the State Central Register. This form is used when the alleged abuse is reported to have taken place in a day care/foster care setting.</td>
<td>Person List Forms Menu</td>
</tr>
<tr>
<td>Notice of Indication (Familial; English and Spanish versions)</td>
<td>Used by the worker to notify the subject and other persons over the age of 18 that have been involved in a report, that the report has been determined to be “indicated” and the rights of the individuals named in the report.</td>
<td>Person List Forms Menu</td>
</tr>
<tr>
<td>Notice of Unfounding (English and Spanish versions)</td>
<td>This Output is batch generated for familial and DC/FC reports. It is used to notify the subject or another person named in a report that the report has been determined to be unfounded. This notice explains how a person’s record will be legally sealed to protect the identity of those individuals involved. This output is generated for each subject and any person over the age of 18, when there is an approved “Unfounded” determination.</td>
<td>SCR Batch Generated</td>
</tr>
<tr>
<td>Mandated Reporter Summary-English</td>
<td>Used to provide a Mandated Reporter with a summary of the findings of the investigation.</td>
<td>Investigation Conclusion window Forms Menu</td>
</tr>
<tr>
<td>24-Hour Fatality Summary</td>
<td>Used to document identifying data, and to provide preliminary information surrounding a child’s death. The information is entered by the case worker within 24 hours of the fatality. This document is required if the child has a DOA allegation.</td>
<td>Person Detail window Options Menu</td>
</tr>
<tr>
<td>30-Day Fatality Summary</td>
<td>Used to document identifying data and to provide comprehensive information surrounding a child’s death. This document is required if the child has a DOA allegation.</td>
<td>Person Detail window Options menu</td>
</tr>
<tr>
<td>OUTPUT</td>
<td>DESCRIPTION OF OUTPUT</td>
<td>HOW TO ACCESS</td>
</tr>
<tr>
<td>--------------------------------------------</td>
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<td>--------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Child Protective Record Summary (CPRS)</td>
<td>A formatted report containing all of the information from all sections of the Child Protective Record Summary. A worker can print Safety Assessments as part of this report or navigate directly to the tab and print them individually. Progress notes must be printed directly from the Progress Notes tab.</td>
<td>Child Protective Record Summary window Generate Report button.</td>
</tr>
<tr>
<td>Case Status Maintenance (CSM) Report</td>
<td>Identifies each case in the district that has an open case status but no open CPS stages. The report is run monthly and displays on the CONNECTIONS Report List for designated users. The cases identified on the report can be closed using the online Case Status Maintenance function.</td>
<td>Report List</td>
</tr>
</tbody>
</table>

**Case/Person**

| Event History Report                       | Gives an entire list of events, both past and current, for a case. Detail information is given for each event, and the list is sorted by stage.                                                                                                                                                             | Event List Reports Menu                                                                           |
| Person Data Report                         | Concise representation of a person across cases and stages, detailing all personal characteristics, any aliases, history of addresses, and history of phone numbers.                                                                                                                           | Person List Reports Menu                                                                          |
| Person Search List                         | Gives a printed list of the results of a Person Search.                                                                                                                                                                                                                                           | Person Search window Forms Menu                                                                  |
| History of Investigation Report            | List of the MA/AB children, Subjects, Allegations, Substantiations, Injuries, and Dates specific to each Investigation.                                                                                                                                                                               | Investigation Conclusion window Reports Menu                                                      |

**Management Reports**

<p>| SCR Summary of Characteristics Report      | A monthly report that provides the user with statistics about intakes and investigations. This report will roll up from the jurisdictional level and shows the total number of intakes and cases received for both the current month and year to date. In addition, the report tracks the number of abused or maltreated children involved in those intakes, subsequent investigations, and cases. A description of and year-to-date total of allegations is also provided. | Batch Report distributed to the Reports Icon of the designated users.                            |</p>
<table>
<thead>
<tr>
<th>OUTPUT</th>
<th>DESCRIPTION OF OUTPUT</th>
<th>HOW TO ACCESS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Open Caseload Inquiry (OCI) Management Summary Report</strong></td>
<td>A monthly management report (part of the OCI Management Reports, above) that contains aggregate counts of open investigation stages.</td>
<td>Report List</td>
</tr>
<tr>
<td><strong>Open Caseload Inquiry (OCI) Investigative Statewide Totals Report</strong></td>
<td>A monthly management report that provides the user with statistics about total open investigations, cases, 7-day Safety Assessments overdue and Investigation Conclusions overdue. Unlike the OCI Monthly Summary Report, which is district-specific (each district receives its own report), the OCI Investigative Statewide Totals Report provides statewide information; all districts receive the same OCI Investigative Statewide Totals Report. This report supports local districts in monitoring program performance and supports OCFS Central and Regional staff in monitoring and compliance activities. This report is made available to all individuals who receive the OCI Management Summary Report.</td>
<td>Report List</td>
</tr>
<tr>
<td><strong>To Be Expunged Report</strong></td>
<td>Lists all the designated cases to be aged out/expunged the following month. This report is used to inform users of the cases that will be deleted from the CONNECTIONS database, so that they can confirm the expungement decision.</td>
<td>Batch Report distributed to the Reports Icon of the designated users.</td>
</tr>
<tr>
<td><strong>Expungement Report</strong></td>
<td>Lists of all the cases that have been expunged as the result of an administrative review or aged out. This report is used to inform users of the cases that have been deleted from the CONNECTIONS database, so that any physical case information can also be purged.</td>
<td>Batch Report distributed to the Reports Icon of the designated users.</td>
</tr>
</tbody>
</table>

**Institutional Abuse (IAB)**

<p>| IAB Investigation Narrative | Used by the IAB investigator to record documentation on the investigation of an IAB report and the determination/findings concluded by that investigation. | IAB Investigation Conclusion Window Narrative button |</p>
<table>
<thead>
<tr>
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<th><strong>HOW TO ACCESS</strong></th>
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</thead>
<tbody>
<tr>
<td>Facility Investigation Summary Report</td>
<td>Gives summary information regarding an IAB investigation. This report includes worker detail, allegation information, injury detail, principal information, facility detail, and investigation narrative.</td>
<td>Facility Investigation Conclusion window Forms Menu</td>
</tr>
<tr>
<td>IAB Facility Notification</td>
<td>Used to notify a facility that there has been a report of abuse/maltreatment filed involving a child placed in the care of facility, and an employee/volunteer at the facility.</td>
<td>Facility Investigation Conclusion window Forms Menu</td>
</tr>
<tr>
<td>IAB Notification</td>
<td>Used to notify the Subject that a report has been filed at the State Central Register (SCR). The form explains what the investigation will entail, and the rights of the individuals named in the report.</td>
<td>Person List Forms Menu</td>
</tr>
<tr>
<td>IAB Facility Indicated Letter</td>
<td>Used to notify a facility that a report has been determined to be “indicated”, and information regarding required follow up actions.</td>
<td>IAB Investigation Conclusion window Forms Menu</td>
</tr>
<tr>
<td>IAB Indicated Letter</td>
<td>Used to notify the subject that the report has been determined to be “indicated” and the rights of the individuals named in the report.</td>
<td>Person List Forms Menu</td>
</tr>
<tr>
<td>IAB Facility Unfounded Letter</td>
<td>Used to notify a facility that a report was determined to be unfounded. This notice explains how a person’s record will be legally sealed to protect the identity of those individuals involved.</td>
<td>IAB Investigation Conclusion window Forms Menu</td>
</tr>
<tr>
<td>IAB Unfounded Letter</td>
<td>Used to notify a subject that the overall determination of the investigation is unfounded. This notice explains how a person’s record will be legally sealed to protect the identity of those individuals involved.</td>
<td>Person List Forms Menu</td>
</tr>
</tbody>
</table>

**Clearance/RFI**

<table>
<thead>
<tr>
<th><strong>OUTPUT</strong></th>
<th><strong>DESCRIPTION OF OUTPUT</strong></th>
<th><strong>HOW TO ACCESS</strong></th>
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</thead>
<tbody>
<tr>
<td>Clearance/RFI Status</td>
<td>Used to view the statuses that a particular Clearance or RFI has gone through, and the dates on which the statuses were changed. The form will also list a worker name and a worker ID which will reflect the worker responsible for updating the status.</td>
<td>Clearance Header Window Forms Menu</td>
</tr>
<tr>
<td>Unauthorized Person Requesting Information</td>
<td>Used when a request for information has been made to the SCR by a requester who is not authorized to receive information. This letter explains that only the subject, other persons named in a report, or authorized individuals or agencies are entitled to this information. The letter contains an attachment (authorization form).</td>
<td>SCR Batch Generated Letter</td>
</tr>
<tr>
<td>OUTPUT</td>
<td>DESCRIPTION OF OUTPUT</td>
<td>HOW TO ACCESS</td>
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</tr>
<tr>
<td>424-A Do Not Letter With/Without Ref Name</td>
<td>This letter is used to notify a licensed, authorized or provider agency that a prospective employee, foster parent, adoptive parent, family day care provider or any family member 18 years or older (for specific classifications of clearance categories) is not known to the SCR as the subject of an indicated report of child abuse or maltreatment.</td>
<td>SCR Batch Generated Letter</td>
</tr>
<tr>
<td>Private Adoption Do or Do Not Letter</td>
<td>These two letters are used to notify a New York State Surrogate or Family Court whether or not a prospective adoptive parent (in a private placement adoption) is known to the New York State Child Abuse and Maltreatment Register (SCR). In circumstances where the prospective adoptive parent is known to the SCR, the CONNECTIONS SCR Child Abuse record is sent to the Court.</td>
<td>Batch Report</td>
</tr>
<tr>
<td>CCU Domestic Relations Do or Do Not Letter</td>
<td>Used to notify a New York State Surrogate or Family Court whether or not a prospective adoptive parent (in a private placement adoption) is the subject of an indicated report of child abuse or maltreatment on file at the New York State Child Abuse and Maltreatment Register (SCR). These two letters are used to notify the Courts of the outcome of the SCR clearance request. In circumstances where the prospective adoptive parent is determined to be the subject of an indicated report of child abuse or maltreatment, the CONNECTIONS SCR Child Abuse record is sent to the Court.</td>
<td>SCR Batch Generated Letter</td>
</tr>
<tr>
<td>424-A Do Letter With Reference Name</td>
<td>This is a batch generated two-part letter: A). Part 1 is used to notify a subject that as a result of a fair hearing decision or based on their failure to request a fair hearing to contest an indicated determination, he/she has been found by a fair preponderance of evidence to be an indicated subject of child abuse and/or maltreatment and that the clearing agency has been notified of such. B). Part 2 is used to notify the Licensed/Authorized Clearing Agency that the individual (applicant) is known to the SCR as the subject of an indicated report of child abuse or maltreatment.</td>
<td>SCR Batch Generated Letter</td>
</tr>
<tr>
<td>Clearance/Appeal/RFI Response Report</td>
<td>Used to view all response letters that were printed, and the people those letters pertained to, for a particular Clearance or RFI request ID.</td>
<td>Clearance Header Window Forms Menu</td>
</tr>
<tr>
<td>Partial Information Requested Letter</td>
<td>Used when a request for information has been made to the SCR by a subject/other person named in a report or an authorized attorney/agency on behalf of subject in a report. This letter explains that the report on file at the SCR is under investigation (report is not yet determined) and that only Intake Report related information is being sent the requester.</td>
<td>SCR Batch Generated Letter</td>
</tr>
<tr>
<td>OUTPUT</td>
<td>DESCRIPTION OF OUTPUT</td>
<td>HOW TO ACCESS</td>
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</tr>
<tr>
<td>Information Request Letter</td>
<td>Used when a request for information has been made to the SCR by a subject/other person named in a report or an authorized attorney/agency on behalf of a subject in a report. This letter is used to acknowledge the request for information. Additionally, the letter explains that copies of the indicated report(s) are enclosed.</td>
<td>SCR Batch Generated Letter</td>
</tr>
<tr>
<td>No Information Letter</td>
<td>Used when a request for information has been made to the SCR by a subject/other person named in a report or an authorized attorney/agency on behalf of a subject in a report. This letter notifies the individual that after a Person search of the SCR Database has been completed, the SCR has determined that it has no information on the individual, or that there was insufficient information provided to enable the SCR to identify the individual.</td>
<td>SCR Batch Generated Letter</td>
</tr>
<tr>
<td>Unfounded Other Person Named Letter (CAPTA Revisions)</td>
<td>Used when &quot;another person named&quot; in a report has requested copies of information in a child abuse and maltreatment report that has been determined to be unfounded, however at the time of the request, the report was under investigation. This letter explains to the requesting individual that in accordance with the law, the record of the report has been legally sealed and may only be unsealed and made available under limited circumstances. Additionally, this letter also explains that the SCR is providing the requester with a copy of the Intake report inasmuch as they are “another person named” in the report and that their request was received prior to the unfounding and legal sealing of the report.</td>
<td>SCR Batch Generated Letter</td>
</tr>
<tr>
<td>Subject Unfounded Timely Letter (CAPTA Revisions)</td>
<td>Used when a subject has requested copies of information in a child abuse and maltreatment report that has been determined to be unfounded. This letter explains to the requesting individual that in accordance with the law, the record of the report has been legally sealed and may only be unsealed and made available under limited circumstances.</td>
<td>SCR Batch Generated Letter</td>
</tr>
</tbody>
</table>

**Administrative Review**

<p>| Retain/Untimely Letter to Attorney/Subject            | This letter is sent to a subject or an authorized attorney informing them that the record in New York State Child Abuse and Maltreatment Register will not be amended or expunged through administrative review because the request was untimely (the request was not made within the statutory legal time frame that subject’s are entitled once they receive notice of indication-90 days). | Administrative Review and Fair Hearing window/Forms Menu |</p>
<table>
<thead>
<tr>
<th>Output</th>
<th>Description of Output</th>
<th>How to Access</th>
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</thead>
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<tr>
<td>422.8 Hearing Officer STIP Letter</td>
<td>This letter is used to send certified case information (that the records are true and accurate) to indicated subject(s) and/or their attorney, New York State Fair Hearing Officers, and LDSS Administrative Review Representatives. This certified case information is used by the hearing officer presenting the SCR's record on the appellant (subject).</td>
<td>Administrative Review and Fair Hearing window/Forms Menu</td>
</tr>
<tr>
<td>Fair Hearing Grant Letter</td>
<td>This letter is used to inform the requesting indicated subject or authorized attorney that as a result of a Fair Hearing, either (1) expungement was granted (pre-Elisa) or (2) the record was amended to unfounded (legally sealed).</td>
<td>Administrative Review and Fair Hearing window Forms Menu</td>
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<tr>
<td>422.8 Unauthorized Attorney</td>
<td>This letter is used to inform an unauthorized attorney that no action can be taken on his/her inquiry into a record because an authorization consent form was not enclosed.</td>
<td>Administrative Review and Fair Hearing window Forms Menu</td>
</tr>
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<td>422.8 Subject/Attorney Retain (Request Denied)</td>
<td>This letter is used to inform the requesting indicated subject or authorized attorney that as a result of an administrative review, either (1) expungement was denied (pre-Elisa) or (2) the record was not amended to unfounded (legally sealed).</td>
<td>Administrative Review and Fair Hearing window Forms Menu</td>
</tr>
<tr>
<td>422.8 Grant Subject</td>
<td>This letter is used to inform the requesting indicated subject or authorized attorney that as a result of an administrative review, a decision was been made to grant their request for expungement/amendment (amended to unfounded/legally sealed status).</td>
<td>Administrative Review and Fair Hearing window Forms Menu</td>
</tr>
<tr>
<td>422.8 Subject Acknowledge Without Copies</td>
<td>This letter informs the requesting indicated subject or authorized attorney that their request for expungement/amendment has been received and forwarded for administrative review. The letter explains the rights of the indicated subject in the administrative review process and what the administrative review will entail. For this type of letter, the indicated subject has not requested copies of their case record, therefore, the letter does not include reference to enclosures containing copies of their record.</td>
<td>Administrative Review and Fair Hearing window Options Menu</td>
</tr>
<tr>
<td>422.8 Subject Acknowledge with Copies</td>
<td>This letter is used to inform the requesting indicated subject or authorized attorney that their request for expungement/amendment has been received and forwarded for administrative review. The letter explains the rights of the indicated subject in the administrative review process and what the administrative review will entail. For this type of letter, the indicated subject has requested copies of their SCR case record, therefore, the letter includes references to enclosures containing copies of their record.</td>
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<tr>
<td>422.8 Subject Acknowledge with Unauthorized Attorney</td>
<td>This letter is used to inform the indicated subject that their request for expungement/amendment has been received and forwarded for administrative review, however, informs them that an attorney attempted to request an administrative review and copies of case information on their behalf, however the attorney did not have authorization by the subject’s consent. An authorization for consent is attached to this letter.</td>
<td>Administrative Review and Fair Hearing window Forms Menu</td>
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<tr>
<td>422.8 Subject Deny</td>
<td>This letter is used to inform the requesting indicated subject or authorized attorney that as a result of an administrative review, either (1) expungement was denied (pre-Elisa) or (2) the record was not amended to unfounded (legally sealed status) and that their request has been referred to the Office of Fair Hearings.</td>
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<td>Request to Schedule Fair Hearing</td>
<td>This form is used to refer requests to the Office of Fair Hearings as the result of an SCR Administrative Review decision to deny the subject’s request for expungement/amendment (amended to unfounded/legally sealed status).</td>
<td>Administrative Review and Hearing window Forms Menu</td>
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Appendix C: Statutory Definitions

Subject of the Report (Familial)

The subject of the report must be one of the following:

- Parent of victim child(ren)
- Guardian of victim child(ren)
- Another person 18 years of age or older responsible for the victim child(ren)’s care at the relevant time
Abused Child

The facts of the case must satisfy the elements of the statutory definition of an abused child as set forth below:

- Subject of the report inflicts or allows to be inflicted on the child under the age of 18 physical injuries by other than accidental means. AND Such action causes or creates a substantial risk of death, or serious or protracted disfigurement, or protracted impairment of physical or emotional health or protracted loss or impairment of the function of any bodily organ.

- Subject of the report creates or allows to be created a substantial risk of physical injury to the child under the age of 18 by other than accidental means. AND Such action would be likely to cause death, or serious or protracted disfigurement, or protracted impairment of physical or emotional health or protracted loss or impairment of the function of any bodily organ.

- The subject of the report: commits or allows to be committed a sex offense as defined in article 130 of the Penal Law; allows, permits or encourages the child under the age of 18 to engage in any act described in sections 230.25, 230.30 or 230.32 of the Penal Law; commits any of the acts described in section 255.25 of the Penal Law; or allows the child under the age of 18 to engage in acts or conduct described in Article 263 of the Penal Law (the corroboration requirements of the Penal Law and age requirements set forth in Article 263 do not apply).
Maltreated Child

The facts of the case must satisfy the elements of the statutory definition of a maltreated child as set forth below:

1. The child is under the age of 18 and his or her physical, mental or emotional condition must have been impaired or placed in imminent danger of impairment;

AND

2. The subject of the report failed to exercise a minimum degree of care:
   - in supplying adequate food, clothing, shelter, education, medical, dental, optometric or surgical care, though financially able to do so or offered financial or other reasonable means to do so; or
   - in providing proper supervision or guardianship; or
   - unreasonably inflicting or allowing to be inflicted harm or a substantial risk of harm, including:
     - infliction of excessive corporal punishment; or
     - misuse of drugs or alcohol to the extent that the subject loses self-control of his or her actions; or
     - other acts of a similarly serious nature.

AND

3. There is a causal connection between 1 and 2 — The failure to exercise a minimum degree of care caused the impairment or imminent danger of impairment.

OR

The subject of this report demonstrated intent to forgo his or her parental rights and obligations as manifested by the subject's failure to visit or communicate with the child under the age of 18 years although able to do so.

OR

The subject of the report inflicted serious physical injury upon a child under the age of 18 by other than accidental means.
Appendix D1:
Information to Be Recorded in Progress Notes

Progress notes record your investigative, assessment and intervention activities in an objective and behaviorally descriptive way which support your conclusions about safety, risk, family functioning and the credible evidence that exists or fails to exist to substantiate allegations of child abuse and maltreatment. Additional casework activity which supports decision making and service planning is to be documented in progress notes for cases open for services and for cases in which children have been placed in out of home care. Progress notes should be recorded contemporaneously with the event, interview, observation or activity to preserve the integrity of the information being recorded.

Use clear, descriptive, factual information. Your impressions or opinions may be included and labeled as such. Relevant information that supports your opinions and impressions should be included, wherever possible. Also describe results of the contact, as appropriate, including any decisions made, actions planned, next steps or planned follow-up.

Below is a non-exhaustive list of the key events, activities and contacts that are to be documented in progress notes.

- descriptions of all interactions with the child(ren) and parents during the course of the investigation and while receiving services, including missed or cancelled appointments;
- observations of parent and child(ren), family functioning and interactions and household conditions;
- descriptions of collateral contacts relating to the collecting of information needed to formulate an assessment and/or assist with making a determination of a CPS report;
- actions taken in the investigation of a reported case of child abuse or maltreatment; including the documentation of all information gathered to support the completion of the Safety Assessment, Risk Assessment Profile (RAP), allegation substantiation or unsubstantiation and report determination;
- efforts made to engage the family and child(ren) in the development of the service plan and the family and child(ren)’s level or degree of participation in the process and their perceptions and reactions to the service plan;
- documentation of family and child(ren)’s participation in services, the need for modifications to the service plan based on progress towards goals, and efforts made to overcome any barriers to service provision;
- referrals and communications with service providers involved in the case and information received from service providers concerning their contacts and activities with the child(ren) and/or family receiving services;
- descriptions of contacts with educational/vocational personnel on behalf of a child;
- referrals and communications with probation regarding a child in the case;
- description of casework contacts with child’s caretakers if child is in foster care or alternative placement arrangement;
- court hearings or other legal activities and their outcome;
- descriptions of activities related to medical, psychological and dental examinations,
including any significant results, diagnosis and referrals arising from these examinations;

- significant events such as births, marriages, divorces, etc.;
- documentation of specific safety issues and inadequacy of safety interventions that support the need for placing a child(ren) into foster care;
- the diligent efforts made to maintain the child(ren) in the home prior to placement, and alternatives explored to prevent foster care placement;
- efforts made to prevent moves of child(ren) while in foster care;
- descriptions of parental and sibling visits with any child who is in foster care, and missed visits when this occurs; and any others present during the visit including the yourself;
- chronological documentation of diligent efforts, to assist, develop and encourage a meaningful relationship between the parents and the child;
- efforts by parents to make a realistic plan, provide an adequate home and provide parental care for the child;
- efforts made to pursue adoption or another permanency planning goal for the child when it is determined that permanency for a child cannot be achieved within the child's own family;
- documentation of worker/supervisor conferences, including a description of the nature of the discussion and any follow-up activities to occur;
- documentation that foster parents or prospective foster parents have been asked whether they will accept a sibling group, or accept a sibling at a later time, if appropriate;
- documentation that foster parents have been provided with information on the existence and location of all siblings or half-siblings of any child placed with them;
- documentation that foster parents have been informed that diligent efforts will be made to facilitate regular biweekly visitation between the foster child and his or her parents and between minor siblings or half-siblings who have been placed apart, unless such contact is restricted by court order or in the case of siblings or half siblings, would be contrary to the health, safety or welfare of one or more of the children or unless the lack of geographic proximity precludes visitation;
- documentation that the parents were notified at placement of the possible consequences if a child were to be in foster care for 15 of the most recent 22 months, discussion with parents regarding the deleterious effects of foster care on the child(ren) and the child(ren)’s need for permanency;
- with regard to a child is foster care, documentation of the basis for not filing a Termination of Parental Rights for either/both parents as circumstances require;
- for a child freed for adoption, documentation of efforts to locate an adoptive home for the child or secure another permanent resource for children who refuse adoption; and
- document the reason for the decision to consolidate the subsequent investigation into an on-going investigation. (See “Consolidating Open Investigation Stages” on page 137 for guidelines and a full explanation of Consolidating Investigations.)
## Appendix D2: Progress Notes Data Fields Edit Matrix

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<td>Other Visitation</td>
<td>Face to Face</td>
<td>D</td>
<td>E⁹</td>
<td>R²</td>
<td>E²</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>E</td>
</tr>
<tr>
<td>Summary</td>
<td></td>
<td>D</td>
<td>D</td>
<td>D</td>
<td>D</td>
<td>D</td>
<td>E</td>
<td>E</td>
<td>D</td>
<td>R</td>
<td>R</td>
</tr>
<tr>
<td>Supervisor/Managerial Review</td>
<td></td>
<td>D</td>
<td>D</td>
<td>E⁹</td>
<td>E⁹</td>
<td></td>
<td></td>
<td>E</td>
<td>D</td>
<td>R</td>
<td>R</td>
</tr>
<tr>
<td>Notice/Approval</td>
<td></td>
<td>D</td>
<td>R</td>
<td>E</td>
<td>E</td>
<td>E</td>
<td>R</td>
<td>R</td>
<td>R</td>
<td>R</td>
<td>R</td>
</tr>
</tbody>
</table>

**Key:**
- R = Required
- E = Enabled
- D = Disabled

**Note:** If multiple Types are selected, an edit of “Enabled” for one selected Type overrides an edit of “Disabled” for another selected Type. “Required” overrides all other edits.
Exceptions to the Rule

The Edit Matrix table on the previous page provides the circumstances in which each field is required, enabled or disabled. There are exceptions to the rule; these are listed below. These exceptions are indicated by a footnote in the Edit Matrix table.

<table>
<thead>
<tr>
<th>Footnote Number</th>
<th>Type</th>
<th>Method</th>
<th>Required Field(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Casework Contact</td>
<td>Face to Face</td>
<td>Either Participant or Other Participant</td>
</tr>
<tr>
<td>2</td>
<td><strong>Stage Type</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>FSS/CWS, OTI, COI, ICPC or ADVPO</td>
<td>Face to Face (only possibility)</td>
<td>At least two Participants or one Participant and an Other Participant or Relative</td>
</tr>
<tr>
<td>3</td>
<td>Casework Contact</td>
<td>All possible choices</td>
<td>Focus (if Foster/Adoptive Parent or Congregate Care is selected in the Other Participant field)</td>
</tr>
</tbody>
</table>

4Summary and Supervisor/Managerial Review cannot be selected in addition to any other Types.
5Casework Contact cannot be selected in addition to Attempted Casework Contact.
6Family/PDR Visitation cannot be selected in addition to Attempted Family/PDR Visitation.
7Sibling Visitation cannot be selected in addition to Attempted Sibling Visitation.
Edits 8-10 are higher-level edits, used when the Primary worker in the stage is a member of a district that has requested additional requirements or when the Case Manager of the FSS stage is a member of a district which has requested the higher-level edits and data values, is identical to the above, with the following addition(s):
8Event Time is required when:
   • Type is Attempted Family/PDR Visitation, or
   • Type is Casework Contact or Attempted Casework Contact and Method is Face to Face or Phone; or
   • Type is Collateral Contact and the Method is Phone.
9Purpose is required for all combinations of Type and Method in INV and FSS stages except Type of Summary where Purpose is disabled.
Notice/ Approval Type note is Higher Level of Edits and should display only if the district has opted to have higher-level edits.

The Primary worker’s district edits and data values take precedence over the Secondary worker’s district edits. Therefore, if the Primary worker is in a district that has the standard-level edits and data values, and the Secondary worker is in a district that has requested the higher-level edits and data values (ACS only), the Primary worker’s standard-level edits and data values take precedence over the Secondary worker’s district edits, regardless of which district has the higher-level edits and data values. If the Primary worker’s district is in ACS, the higher-level edits and data values take precedence and the Secondary district will have to follow the higher-level edits. The higher-level edits will display however, the Secondary district may opt to select only the standard-level of values.
Appendix D3: Progress Notes Data Values

Some choices are available on the Progress Notes Detail window only under specific circumstances which are described using the following notation:

1. **Review Note** and **Review Case** are only available as choices for **Purpose** when the **Type** is “Supervisor/Managerial Review” for all stage types.

2. **24 Hour** is available as a choice for **Purpose** when the **Type** is “Casework Contact” or “Attempted Casework Contact” only for Investigation (INV) stages.

3. **Reporter/Source** is available as a choice for **Other Participant only** for CPS Investigation stages. It is *not* available for Family Services Stages.

**HIGHER-LEVEL EDITS**

There are higher-level edits and values that some districts may request. These edits are additional requirements that are in place when the Primary worker in the stage is a member of a district which has requested higher-level edits. These edits affect the choices that are available to you, depending on responses made to specific fields:

3. **24 Hour, 48 Hour** and **Initial** will be available as a choice for **Purpose** when the **Type** is “Casework Contact” or “Attempted Casework Contact” and the stage type is Investigation (INV).

4. **Case Transfer Review, Initial, 48 Hour, 5 Day, 10 Day, 25 Day, 30 Day, 50 Day and 55 Day** are only available as choices for **Purpose** when the **Type** is Supervisor/Managerial Review and the stage type is Investigation.

5. “Child Evaluation Specialist” and “Third Party Reviewer” are available as a choice for **Other Participant** for all contact types in all stage types.

6. The following **Purpose** options are available when the **Type** selected is “Case Conference” only for Investigation (INV) stages:

   o 72 Hour Elevated Risk Child Safety Conference
   o 72 Hour Post Placement Child Safety Conference
   o 30 Day Elevated Risk Family Permanency Conference
   o 30 Day Post Placement Family Permanency Conference
   o 40 Day FSU Case Transfer Conference
   o 10 Day FSU Conference
   o 40 Day FSU/ CPM Conference
   o 45 Day FSU Conference
   o Replacement
   o Critical Case Planning
   o Court Extension Review
   o Post Court Extension Review
   o Trial Discharge, Final Discharge
   o 90 Day Service Plan Review
   o 6 Month Service Plan Review
   o Protective Placement Decision Making
   o Voluntary Placement Decision Making
   o Persons in Need of Supervision (PINS)
   o Family Team Conference follow-up
The following **Purpose** options are available for all contact types when the stage type is Investigation:

- Investigation
- Child's Account
- Parent's Account
- Other Household Member's Account
- Alleged Subject's Account

**Initial** is available as a choice for **Purpose** when the **Type** is “Attempted Casework Contact” and the stage type is FSS.

**Initial, 30 Day** and **30 Day FSU** are available as choices for **Purpose** when **Type** is “Casework Contact” and the stage type is FSS.

**Initial, 10 Day, 40 Day, and 10 Day FSU Review, 40 Day FSU/CPM Review, 45 Day FSU Conference** and **45 Day FSU Review** are available as choices for **Purpose** when **Type** is Supervisor/Managerial Review and the stage type is FSS.

The following **Purpose** options are available when the **Type** selected is “Notice/Approval” and the stage is an ACS staff member:

- Return of Child During Trial Discharge
- Request to file FCA Article 10 Petition On Voluntarily Placed Child
- Homemaking Services
- Day Care Services for Child In Care
- Consent for Medical Care/ HIV Testing
- Special/ Exceptional Board Rate
- Suspend Payment/ Lift Suspended Payment(Other than Trial Discharge)
- Out of State Visits
- Initiate Interstate Compact
- Termination of Parental Visitation
- Request for Utilization Review Level of Care Exceptions
- Change in PPG
- Enlistment In the Armed Forces or Job Corps
- Marriage
- Report of Accident or Illness
- Other

- Preventive Services Are Started/ Ended for a Child
- Case is Closed to CPS
- Child is Entering/Re-Entering Foster Care
- Child is Moved From One Foster Setting to Another
- Child Becomes Legally Free for Adoption
- Trial Discharge
- Final Discharge
Appendix D4:
Samples of Printed Progress Notes

Sample Progress Notes Data Report
The Progress Notes Data Report includes all information about the selected progress note(s), with the exception of the narrative.

<table>
<thead>
<tr>
<th>Event Date</th>
<th>Note Status</th>
<th>Type(s)</th>
<th>Method</th>
<th>Location</th>
<th>Participant</th>
<th>Other Part(s)</th>
<th>Author</th>
<th>Dist/Agy</th>
<th>Focus</th>
<th>Purpose</th>
<th>Un-Acc</th>
<th>Event Time</th>
<th>Entry Date</th>
<th>Add</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/18/02</td>
<td>Draft</td>
<td>Casework Contact, Family Visitation</td>
<td>Face to Face</td>
<td>Parent's Home</td>
<td>Morris, Peter, Morris, Mann, Morris, Amadora</td>
<td>Legal, Medical</td>
<td>Ballou, Wally</td>
<td>A66</td>
<td>Morris, Amadora</td>
<td>Case Planning, Family Planning</td>
<td>No</td>
<td>11:45 AM</td>
<td>12/20/02</td>
<td>No</td>
</tr>
<tr>
<td>11/21/02</td>
<td>Final</td>
<td>Court</td>
<td>Face to Face</td>
<td>Precinct/Law Enforcement Office</td>
<td>Morris, Peter, Morris, Mann</td>
<td>Legal, Juvenile Detention, Law Enforcement</td>
<td>Ballou, Wally</td>
<td>A66</td>
<td>Morris, Amadora</td>
<td>Counseling</td>
<td>No</td>
<td>11/21/02</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>10/07/02</td>
<td>Final</td>
<td>Attempted Family Visitation</td>
<td>Face to Face</td>
<td>Foster Home</td>
<td>Morris, Mann</td>
<td>Ballou, Wally</td>
<td>A66</td>
<td>Morris, Amadora</td>
<td>Family Planning</td>
<td>No</td>
<td>10/07/02</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10/01/02</td>
<td>Final</td>
<td>Casework Contact</td>
<td>Face to Face</td>
<td>Foster Home</td>
<td>Morris, Peter, Morris, Mann, Morris, Amadora</td>
<td>Relative</td>
<td>Miller, Jamie</td>
<td>A66</td>
<td>Morris, Amadora</td>
<td>Case Planning</td>
<td>Yes</td>
<td>10/01/02</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>
### Sample of a Printed Draft Progress Note (with Narrative)

**PROGRESS NOTES – Implemented CPRS**

* * DRAFT *

**Event Date:** 12/18/02  **Event Time:** 11:00 AM  **Entry Date:** 12/20/02

**Author:** XXXXXXXXXXXXXXXXXXXXXXXXXXX

**Entered By:**

**Dist.Agy.:** XXX  **Note Status:** Draft

**Addendum:** No

**Type(s):** Casework Contact, Family Visitation

**Method:** Face to Face  **Unannounced Visit**

**Location:** Parent’s Home

#### Family Participant/Focus:

<table>
<thead>
<tr>
<th>Name</th>
<th>Family Participant</th>
<th>Focus</th>
</tr>
</thead>
<tbody>
<tr>
<td>XXXXXXXXXXXXXXXXXXXXXXXXXXXX</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>XXXXXXXXXXXXXXXXXXXXXXXXXXXX</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>XXXXXXXXXXXXXXXXXXXXXXXXXXXX</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>
Other Participant(s): Legal, Medical
Purpose(s): Case Planning, Family Planning

Progress Notes Narrative:

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXX

End of Note
Appendix E1:
CPS Safety Factor Definitions

Caretaker(s) previously committed or allowed abuse or maltreatment of a child(ren), and the caretaker’s prior response to that incident was not commensurate with the severity of the abuse or maltreatment.

- Prior abuse or maltreatment (may include non-reported accounts of abuse or maltreatment) that were serious enough to cause or could have caused severe injury or harm to the child(ren).
- Caretaker(s) has retaliated or threatened retribution against child(ren) for past incident(s) of abuse or maltreatment.
- Escalating pattern of abuse or maltreatment.
- Caretaker(s) does not acknowledge or take responsibility for prior inflicted harm to the child(ren) or explains incident(s) as not deliberate.

Caretaker(s) currently abuses alcohol to the extent that it seriously affects his/her ability to supervise, protect or care for the child(ren).

- Caretaker(s) has misused alcohol to the extent that control of his/her actions is significantly impaired. As a result, the caretaker(s) is unable or likely to become unable to care for the child, or has harmed the child, or is likely to harm the child.
- Newborn child with positive toxicology for alcohol in his/her bloodstream or urine and/or was born with fetal alcohol effect or fetal alcohol syndrome.

Caretaker(s) currently abuses drugs to the extent that it seriously affects his/her ability to supervise, protect or care for the child(ren).

- Caretaker has misused illegal and/or prescription drugs to the extent that control of his or her actions is significantly impaired. As a result, the caretaker is unable or likely to become unable to care for the child, or has harmed the child, or is likely to harm the child.
- Newborn child with positive toxicology for illegal drugs in his/her bloodstream or urine and/or was born dependent on drugs or with drug withdrawal symptoms.

Child(ren) has experienced or is likely to experience physical or psychological harm, as a result of domestic violence in the household.

Examples of direct threats to child(ren):
- Observed or alleged domestic violence batterer is confronting and/or stalking the caretaker/victim and child(ren) and has threatened to kill, injure, or abduct either or both.
• Observed or alleged domestic violence batterer has had recent violent outbursts that have resulted in injury or threat of injury to the child(ren) or the other caretaker/victim.
• Caretaker/victim is forced, under threat of serious harm, to participate in or witness serious abuse or maltreatment of the child(ren).
• Child(ren) is forced, under threat of serious harm, to participate in or witness abuse of the caretaker/victim.

Other examples of Domestic Violence:
• Caretaker/victim appears unable to provide basic care and/or supervision for the child because of fear, intimidation, injury, incapacitation, forced isolation, fear or other controlling behavior of the observed or alleged domestic violence batterer.
• Psychological abuse examples: undermining a person's sense of self-worth; instilling fear; attempting to isolate one from family and/or friends.
• Physical abuse examples: inflicting or attempting to inflict physical injury; withholding access to resources necessary to maintain health; forced drug use.
• Sexual abuse example: coercing any sexual contact without consent.
• Economic abuse example: making or maintaining one financially dependent.

Caretaker(s)’s apparent or diagnosed mental health status or developmental disability seriously affects his/her ability to supervise, protect or care for the child(ren).
• Caretaker exhibits behavior that seems out of touch with reality, fanatical, bizarre, and/or extremely irrational.
• The caretaker(s) lacks or fails to utilize the necessary supports related to his/her developmental disability, which has resulted in serious harm to the child or is likely to harm the child seriously in the very near future.

Caretaker(s) is violent and appears out of control.
• Extreme physical and/or verbal abuse, angry or hostile outbursts of anger or hostility aimed at the child(ren).
• Excessive, brutal or bizarre punishment of child(ren), e.g., scalding with hot water, burning with cigarettes, forced feeding.
• Threatens, brandishes or uses guns, knives or other weapons against or in the presence of other household members.
• Violently shakes or chokes baby or young child(ren) to stop a particular behavior.
• Behavior that is reckless, unstable, raving, or explosive.

Caretaker(s) appears unwilling and/or unable to meet the child(ren)’s basic needs for food, clothing, shelter and/or medical care.
• No food provided or available to child, or child starved or deprived of food or drink for prolonged periods.
• Child without minimally warm clothing in cold months; clothing extremely dirty.
• No housing or emergency shelter; child must or is forced to sleep in street, car, etc.; housing is unsafe, without heat, etc.
• Caretaker does not seek treatment for child's immediate and dangerous medical condition(s) or does not follow prescribed treatment for such condition(s).

• Child appears malnourished.

Caretaker(s) appears unwilling and/or unable to provide adequate supervision of the child(ren).

• Caretaker does not attend to child to the extent that need for adequate care goes unnoticed or unmet (e.g., although caretaker present, child can wander outdoors alone, play with dangerous objects, play on unprotected window ledge or be exposed to other serious hazards).

• Caretaker leaves child alone (time period varies with age and developmental stage).

• Caretaker makes inadequate and/or inappropriate child care arrangements or demonstrates very poor planning for child's care.

• Caretaker routinely fails to attempt to provide guidance and set limits, thereby permitting a child to engage in dangerous behaviors.

Caretaker(s) likely caused serious physical harm to the child(ren) or has made a plausible threat of serious harm.

• Other than accidental, caretaker likely caused serious abuse or physical injury, i.e. fractures, poisoning, suffocating, shooting, burns, bruises/welts, bite marks, choke marks.

• Caretaker, directly or indirectly, makes a believable threat to cause serious harm, e.g., kill, starve, lock out of home.

• Caretaker plans to retaliate against child for CPS investigation or disclosure of abuse or maltreatment.

• Caretaker has used torture or physical force that bears no resemblance to reasonable discipline, or punished child beyond the duration of the child's endurance.

Caretaker(s) views, describes or acts toward the child(ren) in predominantly negative terms and/or has extremely unrealistic expectations of the child(ren).

• Describes child as evil, possessed, stupid, ugly or in some other demeaning or degrading manner.

• Curses and/or repeatedly puts child down.

• Scapegoats a particular child in the family.

• Expects a child to perform or act in a way that is impossible or improbable for the child's age (e.g., babies and young children expected not to cry, expected to be still for extended periods, be toilet trained or eat neatly).

Child(ren)’s current whereabouts cannot be ascertained and/or there is reason to believe that the family is about to flee or refuses access to the child(ren).

• Family has previously fled in response to a CPS investigation.

• Family has removed child from a hospital against medical advice.
• Family has history of keeping child at home, away from peers, school, or others for extended periods.
• Family could not be located despite appropriate diligent efforts.

Child(ren) has been or is suspected of being sexually abused and the caretaker(s) is unable or unwilling to provide adequate protection of the child(ren).

• It appears that caretaker has committed rape, sodomy or has had other sexual contact with child.
• Child may have been forced or encouraged to sexually gratify caretaker or others, or engage in sexual performances or activities.
• Access by possible or confirmed sexual abuser to child continues to exist.

The physical living conditions are hazardous.

• Leaking gas from stove or heating unit.
• Dangerous substances or objects stored in unlocked lower shelves or cabinets, under sink or in open.
• Lack of water or utilities (heat, plumbing, electricity) and no alternate provisions made.
• Peeling lead-based paint accessible to young child.
• Hot water/steam leaks from radiator.
• No guards or open windows/broken/missing windows.
• Garbage not disposed of properly.
• Perishable food not properly stored or already rotted or spoiled.
• Evidence of human or animal waste throughout living quarters.
• Serious illness or significant injury has occurred due to living conditions and these conditions still exist.

Child(ren) is afraid of and/or extremely uncomfortable around people living in or frequenting the home.

• Child cries, cowers, cringes, trembles or otherwise exhibits fear in the presence of certain individuals or verbalizes such fear.
• Child exhibits severe anxiety related to situation associated with a person(s) in the home, e.g., nightmares, insomnia.
• Child reasonably expects retribution or retaliation from caretakers.

Child(ren) has a positive toxicology for drugs and/or alcohol. (NYC Required)

• Child(ren) (0-6 mos.) is born with a positive toxicology for drugs and/or alcohol.
Child(ren) is on Sleep Apnea Monitor. (NYC Required)

- Child(ren) is required to be on a sleep apnea monitor. A diagnosed medical condition, or suspicion thereof, exists that places the child(ren) at risk of involuntarily ceasing to breathe.

Weapon noted in CPS report or found in home. (NYC Required)

- A firearm, such as a gun, rifle or pistol is in the home and may be used as a weapon.
- If a firearm is in the home, it may be assumed that ammunition is available and that the firearm may be discharged at will.

Other (specify):

Possible examples:

- Child(ren)’s behavior likely to provoke caretaker to harm the child(ren).
- Unexplained injuries to a child(ren).
- Abuse or neglect to related child(ren)’s death, or unexplained child(ren)’s death.
- Serious allegations with significant discrepancies or contradictions by caretaker(s), or between caretaker(s) and collateral contacts.
- Caretaker(s) refuses to cooperate or is evasive.
- Criminal behavior occurring in the presence of the child(ren), or the child(ren) is forced to commit a crime(s) or engage in criminal behavior.

No Safety Factors Identified
Appendix E2:
CPS Safety Interventions Definitions

1. **Intensive Home Based Family Preservation Services**: Short term, intensive, in-home intervention aimed at restoring family functioning to enable maximum impact of case planning. Program elements include small caseloads (6-10) per worker, workers on-call 24 hours to enable intervention at peak crisis points, counseling and parent skill-building services provided primarily in-home, 4-6 week intervention aimed at preparing families to be discharged and to avoid dependency and promote skill building.

2. **Emergency Shelter**: Arranging for placement of caretaker(s) and child(ren) in a public or privately run emergency shelter, due to factors such as homelessness, eviction or catastrophe and in the absence of any alternative supportive resources. Emergency shelter situations are intended to be a temporary, rather than a permanent solution to shelter needs.

3. **The non-offending caretaker is moving to a safe environment with the children**: Arranging for a residential program for victims of domestic violence and their children. This may include domestic violence shelters, safe dwellings, or safe homes, which are usually undisclosed, secure locations that provide for the immediate and basic needs of victims of domestic violence. Services may include food, clothing, shelter, victim advocacy and information and referral.

4. **Authorization of emergency food/cash/goods**: Arranging for, referring or providing emergency food, clothing, furniture and other basic household items to those clients in need. Resources may include emergency food stamps, emergency authorization payment for clothing, furniture and/or other basic necessities, community-based food pantries and other religious or civic organizations assisting those in need.

5. **Judicial Intervention**: May include filing petitions for Neglect or Abuse (Article 10), PINS (Article 7), JD (Article 3), Orders of Protection, Termination of Parental Rights and related requests for court-ordered supervision and/or services.

6. **Law Enforcement Involvement**: May include contacting local, county or state law enforcement agencies to report a crime and/or to seek law enforcement intervention.

7. **Emergency Medical/Mental Health Services**: Arranging for or referring to emergency medical and mental health services including, but not limited to, hospital emergency rooms, ambulance/EMT services, mobile mental health crisis units, walk-in health clinics, and suicide hotlines.

8. **Immediate and regulated in-home supervision/monitoring**: Includes CPS in-home supervision and monitoring, including increased frequency and regularity (above the norm) of home visits and referring or arranging for the provision of immediately necessary in-home services, such as visiting nurse services, public health nurses, home health aides, homemaker services and supervised visitation.

9. **Emergency Alcohol Abuse Services**: Referring or arranging for the provision of emergency alcohol services including, but not limited to, emergency in-patient medical treatment/detoxification, out-patient treatment for an alcohol overdose and/or placement in a substance abuse residential treatment facility.
10. **Emergency Drug Abuse Services**: Referring or arranging for the provision of emergency drug abuse services including, but not limited to, emergency in-patient medical treatment/detoxification, out-patient treatment for a drug overdose and/or placement in a substance abuse residential treatment facility.

11. **Correction or removal of hazardous/unsafe living conditions**: Eliminating hazardous or unsafe living conditions which may involve contacting the local Health Department or local Fire Department for a home inspection and recommendations, client advocacy with landlords or public housing authorities and/or assistance in relocating the family.

12. **Placement - Foster Care**: Protective removal and foster care placement of child(ren) assessed to be in immediate danger of serious harm or who may be a threat to others in the home and/or community.

13. **Placement - Alternate Caregiver**: Protective or voluntary removal and placement of child(ren) with appropriate alternative caregivers. Alternate caregivers may include, but are not be limited to, non-custodial parents, relatives, friends, or neighbors. Alternate caregivers may petition for custody or guardianship of the child(ren).

14. **Use of family, neighbors or other individuals in the community as safety resources (Specify)**: Consider immediate or extended family members, neighbors, co-workers, affiliated religious group members and other community contacts that can play a role in assuring the health and safety of child(ren). These voluntary safety resources may provide temporary child care, temporary shelter, transportation, donations of food, clothing, household goods, in-home monitoring and/or other forms of assistance to the family.

15. **Alleged perpetrator has left the home voluntarily, current caretaker will appropriately protect the victim with CPS monitoring**: The alleged perpetrator has voluntarily left the home and the current caretaker(s) has agreed to protect the child(ren) from further harm and is cooperating with CPS supervision and monitoring.

16. **Alleged perpetrator has left the home in response to legal action**: The alleged perpetrator has left the home as the result of law enforcement intervention and/or a court order to vacate the home, stay away from the child(ren) and/or refrain from committing a family or criminal offense against the children.

17. **Other (Specify)**
Appendix F:
Allegation Definitions

The following definitions are descriptive and not all-inclusive. The determination of child abuse and maltreatment is on a case-by-case basis. The “immediate considerations” which follow each definition statement are listed to structure the collection of facts and the organization of information in the Initial investigation, immediately following the receipt of the report. These considerations are not a substitute for full and detailed fact-gathering and assessment of the child(ren) and family.

For each situation, you must carefully obtain current facts and related history, and compare these facts with the statutory definitions contained in §412 of the Social Services Law and §1012 of the Family Court Act to see whether child abuse or maltreatment has occurred.

Such facts as the age of the child, the type, severity, frequency of harm or danger of harm, and the acts or omissions by the parent or person legally responsible for the child’s care must be thoroughly assessed in every case. All children in the family setting must be evaluated, not just the child who is named in the report of abuse or maltreatment.

The CONNECTIONS code for each allegation displays in parentheses after the name of each allegation.
Abandonment (ABAN)
Abandonment means that the parent or other person legally responsible for the care of a child under 18 years shows by his/her actions an intent to forgo parental rights and obligations (§1012 of the Family Court Act and §384-b(5) of the Social Services Law).

The assessment of abandonment depends on gathering and analyzing the facts and related history to determine whether there is credible evidence that the parent or other person legally responsible intends to give up parental responsibility totally and completely. The intent of the parent as shown by his/her actions is the key variable in assessing whether abandonment has occurred.

In cases in which an allegation of abandonment arises where a parent or other person legally responsible has left a child in someone else’s care, the following should be considered:

- Whether expectations for the duration of child care were reasonable
- Whether parental failure to return or communicate was due to acts of the caregiver which prevented or discouraged parental contact
- Whether the parent’s failure to return or communicate occurs despite parental ability to return or communicate

Immediate Considerations
- What actions were taken by the parent which indicate that the parent wanted to give up responsibility and obligations for the child?
- What reasons did the parent give for taking these actions?
- Did the parent have an ability to return to or communicate with the child?
- Was the parent or other person legally responsible prevented or discouraged from returning to or communicating with the child?
- Did the parent fail to return or communicate despite an ability to do so?
Burns/Scalding (BURN)

Damage to the skin tissue is caused by direct contact with heat, hot liquid, chemicals, vapor or fire. Burns of the first degree show redness. Burns of the second degree show blistering. Burns of the third degree show destruction of the skin tissue. These signs vary with the skin color of the child.

Rope burns often occur on the ankles, wrist or neck. In suspected cases of abuse or maltreatment, cigarette burns most often appear on the hands, feet and buttocks. Care must be used in distinguishing cigarette burns from impetigo, a contagious skin disease marked by small elevations of the skin containing pus. Scalding may result from an act or an omission of a parent such as failure to supervise the child. Scalding may also be inflicted as punishment, such as immersion in hot water. Medical examination is necessary to determine the nature and extent of the injury. Color photographs should be taken in suspected cases of child abuse and maltreatment.

Immediate Considerations

- Has a complete and detailed physical examination been performed? What were the results?
- Has the physician recorded a precise description of damage to the skin tissue, including age of the injury, location, degree of damage, color and whether any other injuries were apparent?
- If child abuse or maltreatment is suspected, have color photographs of the visible trauma been taken?
- Was a discussion held with medical professionals concerning the child’s condition and their opinion as to the nature and cause of the injury? Identify professionals by name and address.
- Were the child and family interviewed concerning the history and explanation of the injury, and is it consistent with the type and location of the injury and the child’s age and condition? Good note-taking is essential. Use direct quotes.
- What was the extent of parental control at the time of the injury and during events leading to the injury?
Child’s Drug/Alcohol Misuse (CDRG)

The use of drugs or alcohol can cause serious harm to a child’s mental and physical development, or place the child in imminent danger of harm.

To be considered child abuse or maltreatment, a child’s use of drugs or alcohol needs to be a result of:

- a quantity sufficient to cause harm or imminent danger of harm to the child’s physical development or mental health; and
- parental failure to exercise a minimum degree of care in preventing the child’s use of this quantity of drugs or alcohol. (See “Lack of Supervision.”)

Parental actions in the wrongful administration of legally prescribed drugs or failure to administer prescribed drugs to the child which create or allow to be created a substantial risk of physical injury or impaired condition or imminent danger of impaired condition may also indicate abuse or maltreatment. (See “Inadequate Guardianship.”)

Immediate Considerations

- What is the age and physical and mental condition of the child?
- What is the type, quantity, and quality of drug or alcohol involved? How long has this behavior been continuing? Have the parents been aware of these activities?
- What was the effect of the drug/alcohol use on the child?
- What was the extent of parental control over the child at the time of the incident and during events leading to the incident?
- What is the parent’s explanation? Good note-taking is essential. Use direct quotes.
- Did parental actions meet the minimum degree of care needed by the child?
Choking/Twisting/Shaking (CHTS)

Twisting and shaking children can produce serious injuries. Twisting injuries to the ear can cause injuries to the earlobe; in cases of sexual abuse, genitals may be injured by twisting.

Repeated or forcible twisting of a child’s arms or legs can result in a spiral bone fracture. Violent shaking can cause injury to the brain or spinal column; repeated blows and shaking can cause hemorrhages and swelling.

Choking occurs by compression of the child’s windpipe that stops breathing. Hands or cords or long scarves placed on the neck can cause such compression is pressure is applied. Suffocation can result when a foreign body or object, such as food (peanuts, chicken bones), coins, safety pins, plastic bags, or balloons become lodged in the windpipe. Infants between 6 to 12 months are particularly likely to place things in their mouths; any child under six years of age should receive close supervision when near foreign objects which could be swallowed. (See “Lack of Supervision.”) Medical examination is necessary to determine the nature and extent of these injuries.

Immediate Considerations

- Was a detailed physical examination performed? What were the findings?
- If child abuse or maltreatment is suspected, were color photos of visible trauma taken?
- Was a discussion held with medical professionals concerning the child’s condition and their opinion as to the nature and cause of the injury? What were the results? Identify professionals by name and address.
- Were the child and family interviewed concerning the history and explanation of the injury, and is it consistent with the type and location of the injury and the child’s age and condition? Good note-taking is essential. Use direct quotes.
- What was the extent of parental control over the child at the time of the injury and during events leading to the injury?
Educational Neglect (EDNG)

Each minor from six to sixteen years of age shall attend full-time day instruction from the first day that school is in session in September of the school year in which he/she becomes six years of age. Exceptions include: a minor who has completed a four-year high school course of study; a minor for whom application for full-time employment certificate has been made and who is eligible therefore may, though unemployed, be permitted to attend part-time school not less than twenty hours per week instead of full-time school; and in each city of the state and in union-free school districts having a population of more than forty-five hundred inhabitants and employing a superintendent of schools, the board of education shall have power to require minors from sixteen to seventeen years of age who are not employed to attend upon full-time instruction until the last day of session in the school year in which the student becomes seventeen years old (§3205, Education Law).

A minor may also be exempted from attendance where there are sufficient grounds to prove that his physical or mental condition would endanger the health or safety of himself/herself or that of others. Determination of mental or physical condition shall be based upon actual examination made by a person or persons qualified by appropriate training and experience, in accordance with the regulations of the State Education Department (§3208, Education Law). Regular attendance is required, in accordance with the regulations of the State Education Department. Absences from required attendance shall be permitted only for causes allowed by the general rules and practices of the public schools or as the commissioner establishes (§3210, Education Law).

A minor may attend instruction at a public school or elsewhere; however, the course of study is prescribed by rule and regulation (§3204, Education Law). If home instruction is provided, the burden is on the parent to show that home instruction is substantially equivalent to minors of like age and attainments at public school. “Substantially equivalent” means equal in worth or value, meeting essential and significant elements and correctly covering the subject matter for the required courses. (In the Matter of Falk, 110 Misc. 2d 104, 441 NYS 2d 785 [1981]).

To be considered educational neglect, the following must be present:

- Unexcused absence from full-time instruction; or
- The course of study provided to the minor does not comport to requirements of State Education Law; and
- The parent’s or caretaker’s failure to exercise care in enrolling or facilitating school attendance (not the child’s desire to be truant);
- The school notifies the parent or person legally responsible regarding unexcused absences, where appropriate.

Immediate Considerations

- What is the reason for the child’s absence from school? Both child and parent should be questioned. Good note-taking is essential. Use direct quotes.
- Is this absence permitted by the general rules and practices of the public schools or as the Commissioner of Education establishes?
• What steps did the parent or other person legally responsible take to ensure the child’s attendance?

• Did the school notify the parent or other person legally responsible of the child’s absence?

• If the child’s place of instruction is at home or elsewhere, is the child receiving substantially equivalent instruction to minors of like age and attainment in public schools?

• Do school district records indicate that the child(ren) are on home instruction? (It may assist in investigating a report alleging educational neglect to contact the school district prior to visiting the home. This is especially the case when the source of the report is not a school official.)
Emotional Neglect (EMOT)

To establish emotional neglect, there must be evidence of substantially diminished psychological or intellectual functioning in the child and this condition is attributable to the parent’s conduct.

Three factors are present:

- Parental (caretaker) pattern of behavior has a harmful effect on the child’s emotional health and well-being.
- The effect of emotional neglect can be observed in the child’s abnormal performance and behavior.
- There is substantial impairment to the child’s ability to function as a normal human being—to think, to learn, to enter into relationships—due to parent’s conduct.

The child’s emotional health and development may be substantially impaired in relation to, but not limited to, the following:

- **Control of aggressive or self-destructive impulses**: Lack of control results in harm to the child and/or others. This is not an isolated incident, but an established pattern of behavior.
- **Ability to think and reason**: The child’s intellectual or psychological functioning is impaired over a specific period of time.
- **Ability to speak and use language appropriately**
- **Acting out or misbehaving**: Incorrigibility, ungovernability, habitual truancy. These behaviors must be exhibited by the child over a significant period of time. They do not include responses to temporary, soon to be resolved, family stresses.
- **Other behavior**: Extreme passive behavior, overly adaptive behavior, extreme social withdrawal, psychosomatic symptoms, severe anxiety.

Assessment of the child’s emotional health should be conducted by a qualified professional. They psychological or psychiatric evaluation should specify the level of the child’s dysfunction and, to a reasonable medical certainty, whether the dysfunction is causally linked to the acts or omissions of the parent or other person legally responsible for the child’s care.

A parent may be incapable of fulfilling a child’s cognitive or emotional needs due to severe mental illness or mental retardation. The fact of mental illness or mental retardation alone does not establish emotional neglect by the parent. It must be shown that the parent’s mental illness or mental retardation results in impairment of the child’s mental or emotional or physical condition.

**Immediate Considerations**

- What is the child’s condition? What aspect of the child’s emotional health and development has been substantially impaired?
- Was a discussion held with professionals concerning the child’s condition and their opinion as to its nature and cause? Identify professionals by name and address.
• What is the parent’s capacity to provide care for the child?

• What was the parent’s explanation for the child’s condition? Good note-taking is essential. Use direct quotes.

• Did parental actions meet the minimum degree of care needed by the child?

• Is the child’s impaired condition clearly attributable to the parent’s willingness or inability to exercise a minimum degree of care toward the child?

• How long has the child’s impairment lasted? Has the condition stayed the same or become worse?
Excessive Corporal Punishment (EXCP)

Excessive corporal punishment constitutes child neglect. Corporal punishment is excessive if it goes beyond what is objectively reasonable. In assessing what is reasonable, the following are critical to consider:

- The child’s age, sex, physical and mental condition, and capacity to understand correction
- The nature of the punishment
- The seriousness of injury to the child or risk of serious injury
- The means of punishment used (Is it appropriate to correct the child’s behavior? Are less severe alternatives available?)
- The purpose of the punishment
- The child’s behavior which requires correction
- The character of the punishment, whether it is degrading or brutal
- The duration of punishment, whether it is protracted beyond the child’s endurance

The Family Court has held that the standard of reasonableness as defined above applies for all situations regardless of cultural or ethnic background. In the Matter of Rodney C., 91 Misc. 2d 677, 398 NYS 2d 511 (Fam. Ct., Onondaga Co., 1977)

Immediate Considerations

- Has a complete and detailed physical examination been performed? What were the results?
- Are there any visible signs of injury to the child’s body? Has the physician recorded a precision description of the injury, including age of the injury, location on the body, color, other injuries which have healed, and diagnosis? If child abuse or maltreatment is suspected, have color photographs been taken?
- What is the child’s capacity to understand correction?
- Were the child and family interviewed concerning the history, purpose and reason for punishment? Good note-taking is essential. Use direct quotes.
- What was the character and means of punishment and how long did it last?

Note: The use of reasonable corporal punishment by a parent or other person legally responsible is permissible pursuant to §35.10, Penal Law; however, corporal punishment of children in care of authorized agencies is prohibited by New York State Office of Children and Family Services regulation (18 NYCRR 441.9).
DOA/Fatality (FATL)

This allegation is used when one or more children in the household die as a result of abuse. *This allegation is never added by a local district worker; it can only be recorded by the SCR.*
Fractures (FRAC)
A fracture is a break in a bone. Common types are:

<table>
<thead>
<tr>
<th>Fracture Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chip fracture</td>
<td>A small piece of bone is flaked from the major part of the bone.</td>
</tr>
<tr>
<td>Comminuted fracture</td>
<td>The bone is crushed or broken into a number of pieces.</td>
</tr>
<tr>
<td>Compound fracture</td>
<td>Fragments of bones protrude through skin.</td>
</tr>
<tr>
<td>Simple fracture</td>
<td>Bone breaks without wounding surrounding tissue.</td>
</tr>
<tr>
<td>Spiral fracture</td>
<td>The line of the fracture is twisted, encircling the bone.</td>
</tr>
<tr>
<td>Torus fracture</td>
<td>A folding, bulging, buckling fracture.†</td>
</tr>
</tbody>
</table>

Medical examination is necessary to determine the nature and extent of the injury. In cases of fractures, diagnosis depends on the result of x-rays. It is essential that adequate x-ray films be obtained and interpreted by a qualified physician.

Qualified interpretation of the initial x-ray of an epiphyseal fracture, often involving growing bones in the arms or legs, is particularly important. An epiphyseal fracture is an injury to the epiphysis, a part or process of a bone which is separated from the main body of the bone by a layer of cartilage. The epiphysis becomes united with the bone through further growth of bony tissue (callus). Because the fracture has occurred through cartilage, little can be noted from the initial x-ray examination, aside from extensive tissue swelling. By the tenth day following the initial injury, build-up of callus will demonstrate the extent and magnitude of the injury. These injuries can lead to abnormal growth and permanent deformities.

In general, the major causes of bone fractures in childhood are falls, injuries while playing or engaging in athletic activities or while moving heavy objects or equipment, or car/bicycle accident. Frequent sites of fractures are the clavicle (collar bone), humerus (the long bone in the arm which extends from the shoulder to the elbow), the forearm, the elbow, femur (the thigh bone) and fingers. During periods of rapid growth, children may sustain fractures of long bones from minor twists or sprains. For example, the shinbone is susceptible to spiral fracture in children between the ages of two and five years; however, spiral fractures are unlikely to occur to children who are not yet ambulatory. In the growing child, fractures of the skull, the pelvis, neck, thigh bone, and spine occur from major trauma.‡

Bone fractures which are unexplained, multiple or in various stages of healing, or where the reason given for the fracture is inconsistent with the nature of the injury may be indicators of child abuse or maltreatment. Nelson’s *Textbook of Pediatrics* (Tenth Edition) recommends a radiologic survey for trauma consisting of examination of the long bones, skull, ribs and pelvis for all cases of suspected physical abuse.

**Immediate Considerations**
- Were adequate x-ray films obtained and what were the findings?
- Was a detailed physical examination performed and what were the findings? If child abuse or maltreatment is suspected, were the color photos of visible trauma taken?
- Was a discussion held with medical professionals concerning the child’s condition and their opinion as to the nature and cause of the fracture? What were the results? Identify professionals by name and address.

- Were the child and family interviewed concerning the history and explanation of the fracture, and is the explanation consistent with the type and location of the fracture and the child’s age and condition? Good note-taking is essential. Use direct quotes.

- What was the extent of parental control over the child at the time of the injury and during the event leading to the injury?


‡This paragraph summarizes major issues discussed by John C. Wilson, MD, in “Fractures and Dislocations in Childhood,” Pediatric Clinics of North America (Vol. 14, No. 3, August 1976).
Inadequate Guardianship (INGD)

This term applies to the overall quality of care the parent or other person legally responsible provides the child(ren). Guardianship is inadequate if it fails to meet a reasonable minimum standard of care for the child within commonly accepted societal norms. Inadequate guardianship results in actual physical or developmental harm to the child, or imminent danger of such harm. Inadequate guardianship includes, but is not limited to:

- continually allowing a child to remain away from home for extended periods of time without knowledge of the child’s whereabouts;
- making demands beyond the child(ren)’s physical or emotional abilities which results in harm or imminent danger of harm to the child;
- exploitation of the child(ren) by a spouse in marital or custodial disagreements, or litigation disputes, which results in specific harm or imminent danger of harm to the child—litigation itself is not sufficient to show inadequate guardianship (see “Emotional Neglect”);
- exposing, exploiting or encouraging the child to participate in illegal and/or immoral acts;
- leaving the child(ren) in the care of another person without establishing a plan for the provision of adequate food, clothing, education or medical care;
- failing to provide constant surveillance of the child and limiting activities to the extent that these actions may result in harm or imminent danger of harm to the child.

Immediate Considerations

- What is the condition of the child(ren)? Has the child been harmed or is he/she in imminent danger of harm?
- What is the age of the child and what capacity does he/she have to care for himself/herself?
- What is the parental capacity to provide care for the child?
- What are the parents’ current child care practices?
- Do these practices meet a reasonable, minimum standard of care for the child?
Inadequate Food, Clothing, Shelter (IFCS)

An actual failure by the parent or other person legally responsible to supply adequate food, clothing or shelter, although financially able to do so or offered financial or other reasonable means to do so, is a form of child maltreatment.

**Food**

Nutrients such as vitamins, minerals and proteins are as essential for growth in children as is an adequate intake of calories.

Poor growth of a child is the primary reason for suspecting inadequate food intake and nutrition. This may be due to organic or environmental conditions. Anemia, in which there is a reduction in the number of red blood corpuscles or the amount of hemoglobin or both, may be characterized by paleness and lack of vitality. Nutritional anemia is due to inadequate oral intake of iron-containing foods such as eggs and meat. Medical examination is necessary to determine the nature and extent of the injury to the child.

**Clothing**

A child needs basic clothing items such as underwear, shoes and outer clothes to provide protection from weather conditions. To ensure adequate hygiene, clothing must be reasonably clean so that there is freedom from disease and infection.

**Shelter**

Children require shelter which ensures basic safety, sanitation, and heat. A family may live in substandard housing because they are unable to find or afford better conditions. Such things as broken furniture, overcrowding, and messiness are generally not grounds for protective intervention by themselves. If the condition represents a health or safety hazard to the child which the parent or other person legally responsible is unable or unwilling to correct or take reasonable steps to correct, protective intervention is warranted.

**Immediate Considerations**

- What is the condition of the child? Has the child been harmed or is he/she in imminent danger of harm?
- What was observed to be inadequate in the provision of food, clothing or shelter?
- What is the parent’s explanation for these conditions? Good note-taking is essential. Use direct quotes.
- To what degree has the parent sought to provide adequate food, clothing or shelter for the child?
- Did the parent or other person legally responsible fail to provide adequate food, clothing or shelter despite financial ability or other reasonable means to do so?
Internal Injuries (IINJ)

There are four major categories of internal injuries. Medical examination is necessary to determine the nature and extent of these injuries.

**Injuries to the Face**

The eyes are particularly sensitive organs and blunt trauma to the eye can cause hemorrhages, dislocate the lens or detach the retina. A direct blow to the nose may cause bleeding, swelling or deviation of the bone. Blows to the mouth may result in swelling, loose or missing teeth. Abuse-related injuries to the ear include twisting injuries of the lobe and bruises, ruptures or hemorrhaging.

**Injuries to the Head and Nervous System**

Injuries to the head are especially serious because they may injure the brain. Head injuries may result from sharp blows or severe shaking, especially in infants.

Trauma to the spinal cord may cause damage to motor nerves and lead to paralysis of muscles. Other signs of head or nerve injury are loss of consciousness, seizures, or increased drowsiness; however, it must be remembered that an unconscious child may be suffering from the effects of medication or poison.

Injuries to the head may also be caused by hair-pulling. Bald patches on the head interspersed with normal hair may be evidence of such injury; however, medical examination is necessary to examine the extent of the injury and rule out other causes.

**Subdural Hematomas**

A subdural hematoma is an accumulation of blood in the space between the outermost covering of the brain and covering of the brain. In many cases there is no associated skull fracture or bruising or swelling on the site of the injury. In the acute form, there is direct injury to the brain. In the chronic form, there is a gradual accumulation of blood resulting in headaches, progressive stupor, muscular weakness affecting one side of the body, and other symptoms which may appear weeks after the injury. This injury can be caused by a sharp blow to the head or the severe shaking of an infant. (See “Choking, Twisting, Shaking.”) With infants, the only sign of injury may be coma or seizure.

**Abdominal Injuries**

Signs of abdominal injury include recurrent vomiting, swelling and tenderness. A blow or other trauma may also injure other organs such as the liver and kidney.

Forceful blows to the abdomen may also cause bruises and ruptures resulting in hemorrhage, shock or death.

**Immediate Considerations**

- Was a detailed physical examination performed and what were the findings?
- If child abuse or maltreatment is suspected, were color photos of visible trauma taken?
- Was a discussion held with medical professionals concerning the child’s condition and their opinion as to the nature and cause of the injury? What were the results? Identify professionals by name and address.

- Were the child and family interviewed concerning the history and explanation of the injury, and is it consistent with the type and location of the injury and the child’s age and condition? Good note-taking is essential. Use direct quotes.

- What was the extent of parental control over the child at the time of the injury and during events leading to the injury?
**Inappropriate Custodial Conduct (INCC)**
Inappropriate Custodial Conduct refers to situations in which the health, safety or welfare of a child in residential care is harmed or is placed in imminent danger of harm as a result of noncompliance with State regulations. *This allegation applies only to reports of abuse or maltreatment of a child in residential care (IAB reports).*

**Inappropriate Isolation/Restraint (ISOL)**
Inappropriate Isolation/Restraint refers to situations in which the health, safety or welfare of a child in residential care is harmed or is placed in imminent danger of harm as a result of noncompliance with State regulations regarding the use of appropriate isolation and/or restraint. *This allegation applies only to reports of abuse or maltreatment of a child in residential care (IAB reports).*
Lacerations, Bruises, Welts (LABW)

Lacerations are jagged cuts or tears in the skin. The presence of multiple skin injuries in various stages of healing may be indicators of child abuse or maltreatment. Medical examination is needed to determine the nature and extent of these injuries. Skin injuries, such as scars or other disfigurements, often resemble the shape of the instrument used: strap marks, belt buckles, looped cords, choke marks on the neck, bruises from gags, rope burns or blisters especially around the wrists or ankles.

Welts are raised ridges on the skin, often seen in the lower back area, and are usually left by a slash or blow. Skin injuries of this nature may also be due to scraping or rubbing.

Human bite marks are distinctive crescent-shaped lines of tooth imprints. A child’s bite can be distinguished from an adult’s by the larger size of the arch of the crescent. Human bites compress flesh, causing bruises; animal bites normally tear the flesh.

Bruises are caused by bleeding beneath the skin without tearing it. They may often be fingertip in size and distribution. Old and multiple new bruises, and/or bruises on the face/back of legs are suspicious. Bleeding disorders might be the reason for the child’s bruises. This is not common, but needs to be ruled out by medical tests. You must be constantly mindful that some bruises are a normal occurrence in growing children, and care must be taken to assess the situation fully. Medical examination is needed to determine the nature and extent of these injuries.

The following chart approximates the age of the bruise as suggested by the color of the skin:

<table>
<thead>
<tr>
<th>Age (days)</th>
<th>Color†</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-2</td>
<td>swollen, tender</td>
</tr>
<tr>
<td>0-5</td>
<td>blue/red</td>
</tr>
<tr>
<td>5-7</td>
<td>green</td>
</tr>
<tr>
<td>7-10</td>
<td>yellow</td>
</tr>
<tr>
<td>10-14</td>
<td>brown</td>
</tr>
<tr>
<td>14-28</td>
<td>clear</td>
</tr>
</tbody>
</table>

†These colors vary with the skin pigmentation of the child.

Immediate Considerations

- Has a complete and detailed physical examination been performed? What were the results?
- Has the physician recorded a precise description of the injury, including age of the injury, location on the body, color, and whether other injuries were evident?
- If child abuse or maltreatment is suspected, have color photographs been taken?
- Was a discussion held with medical professionals concerning the child’s condition and their opinion as to the nature and cause of the injury? Identify professionals by name and address.
- Were the child and family interviewed concerning the history and explanation of the injury, and is it consistent with the type and location of the injury and the child’s age and condition? Good note-taking is essential. Use direct quotes.
• What was the extent of parental control at the time of the injury and during events leading to the injury?
Lack of Medical Care (LMED)

A parent or other person legally responsible for the child must supply adequate medical, dental, optometric or surgical care if financially able to do so or offered financial or other reasonable means to do so.

This includes:

- seeking adequate treatment for conditions which impair or threaten to impair the child’s mental, emotional or physical condition;
- following prescribed treatment for remedial care, including psychiatric and psychological services; and
- obtaining preventive care such as post-natal check-ups, and immunizations for polio, mumps, measles, diphtheria and rubella.

The parent’s failure to seek or follow adequate treatment or desire to select an unconventional form of treatment must be considered in light of:

- the seriousness of the child’s condition and risk of further harm to the child;
- the parent’s awareness of the child’s condition and risk of further harm to the child;
- whether the parent has sought accredited medical opinion;
- the consensus of responsible medical authority regarding treatment;
- whether the parent’s failure to seek adequate treatment or select an unconventional form of treatment impairs the child physically or emotionally;
- whether the parent fails to see adequate treatment despite financial or other reasonable means to do so.

Article 10 of the Family Court Act authorizes intervention not only in life and death emergencies, but also in situations where a child is denied adequate medical, dental, optometric, or surgical care due to the parent’s or person legally responsible’s failure to provide “an acceptable course of medical treatment for their child in light of all the surrounding circumstances… The Court’s inquiry should be whether the parents, once having sought accredited medical assistance, and having been made aware of the seriousness of their child’s affliction, and the possibility of cure if a certain mode of treatment is undertaken, have provided for their child a treatment which is recommended by their physician, and which has not been totally rejected by all responsible medical authority.” (*In the Matter of Hofbauer*, 47 NY 2d 648, 393 NE 2d 1009, 419 NYS 2d 936 [1979])

The same test applies in cases in which a parent objects to medical treatment based on religious belief. The focus must be whether the parents have provided an acceptable course of medical treatment for their child in light of all the surrounding circumstances. A child who has been harmed or who is in imminent danger of harm, as a result of a parent’s failure to supply adequate medical, dental, optometric, or surgical care, although financially able to do so or offered reasonable means to do so, is a neglected child. (*In the Matter of Gregory S., et al.*, 85 Misc. 2d 845, 380 NYS 2d 620 [Fam. Ct., Kings Co. 1976])
Immediate Considerations

- In the opinion of accredited medical professionals, what is the nature and extent of the child’s condition?
- Did the parent seek accredited medical assistance for the child?
- What do responsible medical authorities prescribe as the recommended form of treatment? Identify authorities by name and address.
- What is the parent’s explanation for his/her course of action? Have inadequate finances blocked parental ability to obtain treatment? Good note-taking is essential. Use direct quotes.
- Has the child’s condition been impaired by parental actions or failures to act?
Lack of Supervision (LSUP)

Lack of supervision is evident if a child is alone or not competently attended for any period of time to the extent that his or her need for adequate care goes unnoticed or unmet, and the child is harmed or exposed to hazards which could lead to harm.

Parents have a responsibility to supervise their children or arrange for proper competent supervision. Proper supervision means that the child’s minimum needs for adequate food, clothing, shelter, health, and safety are met. The need for supervision varies with the age and developmental stage of the child.

- An infant (0 to 24 months) has some mobility but cannot meet any needs of his/her own and must be under the constant care of a competent, mature person.
- Toddlers (age 2 to 4) need broader space to explore. Toddlers can walk, climb, have no sense of danger, and must be closely watched to keep safe from harm.
- A preschool child (age 4 to 6) can play independently but cannot be responsible to meet basic needs for adequate food, clothing, shelter, health and safety.
- School-aged children (age 6 to 12 years) may not be ready for the responsibility of being on their own even for short periods of time. A child who cannot be responsible for meeting his/her own needs cannot be a competent caretaker for other children.

Each situation in which there is an allegation of lack of supervision must be carefully assessed to determine the basic needs of the child(ren), the child’s capacity to meet those needs on his/her own, and the role of the parent or other person legally responsible in ensuring that the child’s needs are adequately met.

Immediate Considerations

- What is the condition of the child(ren)? Has the child been harmed or is he/she in imminent danger of harm?
- What is the age of the child and what capacity does he have to care for himself?
- What basic needs of the child have gone unnoticed or unmet?
- At what time of day did the child’s needs go unnoticed or unmet and how long did the situation last?
- What was the parent’s explanation for this situation? Good note-taking is essential. Use direct quotes.
- What degree of planning for adequate child care has the parent shown?
- Is the caretaker mature and competent to provide a minimum degree of care, given the age and circumstances of the child(ren)?
Malnutrition/Failure to Thrive (MITT)

These are two distinct conditions and should be assessed separately. Malnutrition is failure to receive adequate nourishment. It may be caused by inadequate diet, lack of food or insufficient amounts of needed vitamins and minerals. Failure to Thrive is a medical condition seen in infants and children who are not making normal progress in physical growth, specifically falling below the mean height or weight for their age and sex. This may be measured in percentiles. For example, a child may be described as below the 3rd percentile in weight. This means that 97% of children that age weigh more. The terms also apply to children who fail to maintain previously established patterns of growth, are excessively delayed in sexual development, or stunted in growth (deprivational dwarfism).

The abnormal conditions which can interfere with the growth process are numerous. Five major factors are:

- defects in internal functions of the body (for example, the heart, kidneys, endocrine glands);
- environmental and interpersonal factors (for example, an infant must have physical care and love to grow properly);
- nutrition, both the proper quality and quantity of food; and
- genetics, what is inherited plays a dominant role in the potential for growth and development.†

To obtain an accurate diagnosis, it is essential that a physician evaluate a child who is suspected to be suffering from Failure to Thrive or malnutrition. The family history should be searched for diseases which might affect growth, the physical examination of the child must be detailed and thorough, bone x-rays should be obtained and specialized laboratory tests performed. In cases where environmental conditions are suspected to be the cause of Failure to Thrive, Nelson’s *Textbook of Pediatrics* (Tenth Edition) recommends that the child be hospitalized and a regular feeding schedule be maintained for a maximum of two weeks. The key consideration is whether the infant who is unable to gain weight at home can gain weight rapidly and easily in the hospital.

It should be underlined, however, that the diagnosis is complex and requires a skilled physician.

Immediate Considerations

- Was a complete and detailed physical examination of the child conducted? What were the results?
- Were x-rays and laboratory tests obtained? What were the results?
- What was the parent’s explanation for the child’s condition? Good note-taking is essential. Use direct quotes.
- Were the interactions of the parent and child observed? What were the findings?
- Was a discussion held with the physician and other medical professionals concerning their diagnosis and explanation of the child’s condition? What were the results? Identify professionals by name and address.

Parent’s Drug/Alcohol Misuse (PDRG)

The misuse of legal or illegal drugs or alcohol by a parent or other person legally responsible for the care of a child can result in harm or imminent danger of harm to a child’s physical, mental or emotional condition. The key issue to determine is whether the parent has misused a drug or drugs or alcoholic beverage to the extent that he/she loses self-control of his/her actions and is unable to care for the child, has harmed the child, or is substantially likely to harm the child. The fact that the parent or caretaker is voluntarily and regularly participating in a rehabilitative program is irrelevant in assessment of whether child abuse or maltreatment has occurred if the child’s physical, mental or emotional condition has been impaired or is in imminent danger of impairment due to the parent’s acts or omissions.

Evidence that a newborn infant tests positive for a drug or alcohol in his/her bloodstream or urine, is born dependent on drugs or with drug withdrawal symptoms, fetal alcohol effect or fetal alcohol syndrome; or has been diagnosed as having a condition which may be attributable to in-utero exposure to drugs or alcohol is not sufficient, in and of itself, to support a determination that the child is maltreated. In addition, such evidence alone is not sufficient for a social services district to take protective custody of such a child. However, such evidence alone is sufficient to constitute reasonable cause to suspect that the child is at risk of being abused or maltreated in the future, thereby warranting a report to the State Central Register (SCR) and the commencement of a child protective investigation.

Upon the receipt of a report where parental drug or alcohol misuse is alleged, the social services district must conduct a thorough investigation to determine whether such misuse creates a risk to the child. The district must assess the ability of the parent to care for the child. The district must examine, in particular, the parent’s plans for the care of the child and his/her ability to carry out those plans to determine whether the parent’s drug or alcohol use creates a condition which places the child’s physical, mental or emotional condition in imminent danger of becoming impaired. In the case of a newborn infant born to a drug- or alcohol-abusing parent, any special needs of such infant should be considered in the district’s assessment of parental capability.

**Immediate Considerations**

- What is the child’s physical, mental, or emotional condition? Has the child been harmed or is he/she in imminent danger of harm?

- What is the parent’s explanation for these conditions? Good note-taking is essential. Use direct quotes.

- What are the results of medical examination concerning the parent’s drug or alcohol use?

- What is the parent’s capacity to exercise a minimum degree of care to meet the child’s physical, mental and emotional needs?
Poisoning/Noxious Substances (PONX)

Prescribed medication, non-prescribed medication, household cleaning products, oils, paint thinners, fuels, fertilizers, and some house plants are among the materials which can cause serious harm if ingested by a child. The total circumstances must be considered, but certain components are key in evaluating whether child abuse or maltreatment is present:

- Age of the child
- Location of the noxious substance
- Way in which the substance is stored and labeled (for example, is it placed in a locked cabinet or out of the reach of the child)
- Other steps the parent takes to guard against access by a child
- Actions taken to seek care for the child
- Previous incidents and pattern of care.

Certain poisonings or the ingestion of other harmful substances by a child may be due to acts of a parent or other person legally responsible, or caused by omissions in supervising the child. If the child is an infant, intentional poisoning should be considered. Medical examination is necessary to determine the nature and extent of the injury.

Immediate Considerations

- Has a complete and detailed physical examination been performed? What were the results?
- What is the age and capacity of the child?
- Was a discussion held with medical professionals concerning their opinion as to the nature and cause of the child’s condition? Identify professionals by name and address.
- Were the child and family interviewed concerning the history and explanation of the incident? Good note-taking is essential. Use direct quotes.
- What was the extent of parental control of the child at the time of the incident and during events leading to the incident?
- Did the parent perceive danger to the child and take steps to prevent harm to the child? What steps were taken?
- What actions were taken by the parent after the incident?
Swelling, Dislocation, Sprain (SWDS)

Swelling at points where two bones join, tenderness at the ankles, wrists or other joints, are signs of skeletal injuries without fracture. A child’s ability to walk is limited by such injuries to the legs.

If a child’s leg or arms are pulled or jerked or twisted suddenly or forcibly, a bone can be put out of position (dislocation), or the ankles and wrists or other parts of the body at a joint can be sprained. Medical examination is necessary to determine the nature and extent of these injuries.

**Immediate Considerations**

- Were adequate x-ray films obtained? What were the results?
- Was a detailed physical examination performed and what were the findings?
- If child abuse or maltreatment is suspected, were color photos of visible trauma taken?
- Was a discussion held with medical professionals concerning the child’s condition and their opinion as to the nature and cause of the injury? Identify professionals by name and address.
- Were the child and family interviewed concerning the history and explanation of the injury, and is it consistent with the type and location of the injury and the child’s age and condition? Good note-taking is essential. Use direct quotes.
- What was the extent of parental control over the child at the time of the injury and during events leading to the injury?
Sexual Abuse (SXAB)

A “sexually abused child” is a child less than 18 years of age whose parent, or other person legally responsible for his/her care, commits or allows to be committed a sex offense against such a child as defined by penal law (§130, Penal Law). Sex offenses in the penal law include rape, sodomy, and any other non-consensual sexual contact. A “sexually abused child” is also a child less than 18 years of age whose parent, or other person legally responsible for his/her care allows such child to engage in acts or conduct described in article 263 of the penal law. These acts are using a child in a sexual performance and promoting a sexual performance by a child. For all sex offenses, a person is deemed legally incapable of consent if less than 17 years, or mentally defective, or mentally incapacitated, or physically helpless.

Sexual abuse and maltreatment include situations in which the parent or other person legally responsible for the child’s care commits or allows to be committed:

- Touching a child’s mouth, genitals, buttocks, breast or other intimate parts for the purpose of gratifying sexual desire; or forcing or encouraging the child to touch the parent or other person legally responsible in this way for the purpose of gratifying sexual desire.
- Engaging or attempting to engage the child in sexual intercourse or deviate sexual intercourse.
- Forcing or encouraging a child to engage in sexual activity with other children or adults.
- Exposing a child to sexual activity or exhibitionism for the purpose of sexual stimulation or gratification of another.
- Permitting a child to engage in sexual activity which is not developmentally appropriate when such activity results in the child suffering emotional impairment. (See “Emotional Neglect.”)
- Using a child in a sexual performance such as a photograph, play, motion picture or dance, regardless of whether the material itself is obscene.

(For additional information, see January 17, 1996 Memorandum entitled, “Sex Abuse Reports – Definitions and Criteria,” starting on the next page.)
Some time ago, I met with State Central Register (SCR) staff to discuss issues concerning when reports of alleged sexual abuse should be accepted where the actual sexual activity is between two children. As a result of that discussion, a need was identified for clarification of the standards concerning sex abuse allegations, as it was the general consensus of opinion that the age factors that determine whether sexual activity between two children falls within the definition of one of the sex offenses defined in the Penal Law (PL) are a source of some confusion to SCR intake staff. The same confusion may exist on the parts of other SCR staff and district child protective services staff, as well.

I agreed in the meeting mentioned above to prepare revised intake criteria for sex abuse reports that would clarify the age factors. In light of the more general confusion that seems to exist in this area, however, I decided that something more than just intake criteria are needed. Accordingly, this memorandum will discuss what constitutes “sex abuse” in a child protective context. This memorandum may be used for general informational purposes.

Introduction

§412(1)(a) of the Social Services Law (SSL) defines an abused child for child protective purposes under the SSL as a child defined as an abused child by the Family Court Act (FCA). §1012(e) of the FCA defines abused child and §1012(e)(iii) of the FCA sets forth what constitutes sexual abuse. This definition applies to all child protective cases except those involving children in residential care (i.e., cases of institutional abuse or neglect). In the interest of avoiding confusion, I will not discuss cases of institutional abuse or neglect in this memorandum.

The statutes define sexual abuse by cross-referencing to various provisions of the PL. The actions that constitute sexual abuse for child protective purposes occur where the subject commits or allows to be committed one of the following:

- a sex offense against the child, sex offenses being defined in Article 130 of the PL;
- an act described in §230.25, §230.30 or §230.32 of the PL, which statutes define the three degrees of the crime of promoting prostitution;
- an act described in §255.25 of the PL, which statute defines the crime of incest; or
- an offense described in Article 263 of the PL, which article defines offenses involving sexual performance by a child.

In the material that follows, I will discuss first the four types of sexual abuse listed above and will follow that with a discussion of what constitutes “allowing” sexual abuse to occur.
I. Types of Sex Abuse

For child protective purposes, it is a form of sex abuse if a subject commits any of the crimes described and discussed below. As an initial point, the PL definitions or criteria for some of the offenses addressed below include corroboration requirements (i.e., the testimony of the victim alone cannot be a basis for a conviction; something additional is necessary). Pursuant to §1012(e)(iii)(a) of the FCA, the corroboration requirements of the PL do not apply in child protective cases.

Sex Offenses

Article 130 of the PL defines five categories of sex offenses. I will discuss each in turn. Please note that I will use the term "actor" to refer to the perpetrator, as that is the term generally used in the PL.

Rape — Rape is defined in §130.25 (third degree), §130.30 (second degree) and §130.35 (first degree) of the PL. The physical action in rape is sexual intercourse, which must involve some penetration, however slight, of the vagina by the penis (§130.00(1) of the PL). Sexual intercourse falls within the definition of rape in the following circumstances:

1. the sexual intercourse occurs as a result of forcible compulsion;
2. the victim is incapable of consent due to being physically helpless (e.g., unconscious);
3. the victim is less than 11 years old (i.e., has not yet reached his or her 11th birthday);
4. the victim is at least 11 years old but less than 14 years old (i.e., has not yet reached his or her 14th birthday) and the actor is at least 18 years old and the parties are not married to each other;
5. the victim is less than 17 years old (i.e., has not yet reached his or her 17th birthday) and the actor is at least 21 years old and the parties are not married to each other; or
6. the victim is incapable of consent by reason of some factor other than being under 17 years old (e.g., intoxicated, under the influence of drugs, incapable of consent by reason of mental disease or mental defect) and is not married to the actor.

Items 1 through 3 above are rape in the first degree, item 4 is rape in the second degree, and items 5 and 6 are rape in the third degree.

Sodomy — Sodomy is defined in §130.40 (third degree), 130.45 (second degree) and 130.50 (first degree) of the PL. The physical action in sodomy is deviate sexual intercourse, which involves contact between the penis and anus, the mouth and penis or the mouth and vulva (§130.00(2) of the PL). Deviate sexual intercourse falls within the definition of sodomy in the same circumstances as described above for rape; the only difference is that the physical act involved is a form of deviate sexual intercourse rather than (for want of a better term) conventional sexual intercourse. Items 1 through 3 on the list are sodomy in the first degree, item 4 is sodomy in the second degree, and items 5 and 6 are sodomy in the third degree.

It is also important to note that §130.38 of the PL purports to ban consensual sodomy between persons old enough not to fall within the age limitations described above. This statute was declared unconstitutional by the New York Court of Appeals in 1980 in the case of People v. Onofre and so the statute is null and void. However, it is still included in the PL (the legislature would have to repeal it to remove it from the PL and has not done so at present) and so it is worth mentioning that it still exists on the books but has no force or effect at this time.
Sexual Abuse — Sexual abuse as a specific crime under the PL (as opposed to the more generic sense that we tend to use the term to describe generally the whole range of sex offenses and sex-related forms of child abuse) I defined in §130.55 (third degree), §130.60 (second degree) and §130.65 (first degree) of the PL. The physical action in sexual abuse is subjecting another person to sexual contact. Sexual contact is defined in §130.00(3) of the PL as any touching of the sexual or other intimate parts of a person not married to the actor for the purpose of sexual gratification of either party. It includes touching of the actor by the victim as well as the touching of the victim by the actor, and it includes touching of the sexual or intimate parts directly or through clothing.

There are three aspects to the definition that require some further discussion. First is the question of what constitutes “touching.” Touching means that there must be some form of physical contact; threats, gestures or other conduct that does not involve actual physical contact do not constitute sexual abuse (or any form of sex offense, for that matter). Please note also that the touching must involve the sexual or intimate parts of one of the participants but not both; the touching of the sexual or intimate parts can be by any portion of the body of the other participant. It is also important to note that the statute and cases provide that the touching can occur through clothing; flesh-to-flesh contact is not necessary for touching to occur.

Second is the question of what constitutes the sexual or other intimate parts. Although not specifically defined in statute, we can determine a fairly comprehensive list from the case law and analogizing to the other sex offense statutes. The parts in question include: the genitals; the buttocks; for a woman or girl, the breasts or chest; the mouth; the leg; the thigh; and, according to one case, the navel.

Third is the question of sexual gratification. The contact does not have to result in actual sexual gratification; it must be for the purpose of sexual gratification. The purpose does not have to be sexual gratification of both parties; this element is met if the actor seeks his/her own sexual gratification or seeks to stimulate sexual gratification in the victim. Although not set forth in statute, the case law addressing the issue of gratification shows that this element will be considered satisfied where the only reasonable purpose of the contact would be sexual gratification. Where the contact appears to be accidental, or where there could be some other reasonable purpose for the contact (administering ointment, for example); there would have to be some more affirmative evidence of sexual gratification as a purpose.

The most common scenarios that would fall within sexual abuse as a sex offense would be cases involving fondling. However, other types of activity that fall within this definition include attempts at rape where contact occurs but there is not penetration of the vagina by the penis; digital penetration of the vagina or rectum where no physical injury is caused; and (according to one case) inserting the tongue into the victim’s mouth against the victim’s will (i.e., the unconsented French kiss is a form of sex abuse).

Like sexual intercourse and deviate sexual intercourse, not all of the activity that can constitute sexual abuse, as described above, is a violation of the PL. Activity that would constitute sexual abuse is a violation of the PL in the following circumstances:

1. the activity constituting sexual abuse occurs as a result of forcible compulsion;
2. the victim is incapable of consent due to being physically helpless;
3. the victim is less that 11 years old;
4. the victim is at least 11 years old but less than 14 years old;
5. the victim is incapable of consent by reason of some factor other than being less than 17 years old; or

6. the victim did not consent to the activity constituting sexual abuse, except where the victim’s lack of consent is due to the victim being less than 17 years old, the victim is at least 14 years old, and the actor is less than five years older than the victim.

Items 1 through 3 above are sexual abuse in the third degree, items 4 and 5 are sexual abuse in the second degree, and item 6 is sexual abuse in the third degree. Please note that, while items 1 through 5 are similar or identical to the analogous provisions of the rape and sodomy statutes, item 6 uses different standards. Item 6 basically means that a child under the age of 17 may not consent to activity that would constitute sexual abuse unless the child is at least 14 years of age and the other party is less than five years older than the child. For example, if a 14-year-old willingly engages in activity that would fall within the definition of sexual abuse with a person who is 18 years old, it is not a violation of the PL; the 14-year-old is considered to have the capacity to consent to engage in such activity with a person no more than five years older than the child. However, if the same child engages in the same activity with a 20-year-old, it would be a violation of the PL; the child is not considered to have the capacity to consent to engage in such activity with a person more than five years older than the child.

Aggravated Sexual Abuse — Aggravated sexual abuse is defined in §130.67 (second degree) and §130.70 (first degree) of the PL. The physical action in aggravated sexual abuse is insertion of a finger or foreign object in the vagina, urethra, penis or rectum of another person, causing physical injury. The statutes provide that conduct performed for a valid medical purpose does not constitute aggravated sexual abuse.

The term “foreign object” is helpfully defined in §130.00(9) of the PL as any instrument or article which, when inserted into the vagina, urethra, penis or rectum, is capable of causing physical injury. Since the causing of physical injury is part of the definition of the offense, and any instrument or article that causes actual physical injury when inserted is obviously capable of causing physical injury, what this amounts to is that any object inserted into one of the four listed areas will be considered a foreign object if it causes injury.

This leads to the question of what is meant by the requirement that there be physical injury. §10.00(9) of the PL defines “physical injury” as impairment of physical condition or substantial pain. This is similar to the physical impairment aspect of the maltreatment definition. However, unlike the maltreatment definition, imminent danger of impairment is not part of the definition of “physical injury” under the PL. Therefore, if the insertion of a finger or object does not cause some actual impairment, it will not be aggravated sexual abuse; insertion creating imminent danger of impairment does not meet the PL definition. Where there is no impairment and, thus, no physical injury, insertion of a finger could constitute sexual abuse, as discussed above. If insertion of an object did not cause some impairment, however, it would not constitute a sex offense.

The activity constituting aggravated sexual abuse will fall within the definition of that offense in the following circumstances:

1. the insertion occurs as a result of forcible compulsion;
2. the victim is incapable of consent due to being physically helpless; or
3. the victim is less than 11 years old.

Where the insertion is of a finger, the offense is aggravated sexual abuse in the second degree. Where the insertion is of an object, the offense is aggravated sexual abuse in the first degree.
You will note that the age provisions affecting this offense are not as detailed or extensive as those involving rape, sodomy or sexual abuse. Where the activity involved is digital insertion, it would appear that, for children 11 years of age or older, we would look to see if the provisions of the sexual abuse statutes apply. Where insertion of an object is involved, however, unless one of the three conditions set forth above is met, the activity would not be a sex offense.

Sexual Misconduct — Sexual misconduct is defined in §130.20 of the PL. The offense consists of one of the following:
1. engaging in sexual intercourse with a person without the person’s consent;
2. engaging in deviate sexual intercourse with a person without the person’s consent; or
3. engaging in sexual conduct with an animal or dead human body.

I have included the offense in this memorandum out of a sense of completeness, but its applicability to the child protective system is, at best, quite limited. It is not clear what conduct is covered by items 1 and 2 that is not addressed in the rape and sodomy statutes. The rape and sodomy statues discussed above define when sexual intercourse and deviate sexual intercourse are un-consented and, thus, criminal acts. One possibility suggested by the commentaries on the PL is that, as the three degrees of rape and sodomy are all felonies and sexual misconduct is a misdemeanor, sexual misconduct could be used for plea-bargaining purposes. While this makes the offense potentially useful in the criminal justice system, it has no relevance in the child protective system. Item 3 does address a topic not found elsewhere in the sex offense statutes but, since the “victim” would not be a child, this item has no real applicability to the child protective system.

Promoting Prostitution

Prostitution is defined in §230.00 of the PL as engaging, agreeing to engage or offering to engage in sexual conduct with another person for money. The child protective statutes include as types of sex abuse three offenses related to promotion of prostitution, those being §230.25 (third degree), §230.30 (second degree) and §230.32 (first degree) of the PL. The activity involved in promoting prostitution is advancing or profiting from prostitution. Advancing prostitution is defined in §230.15(1) of the PL as knowingly causing or aiding a person to engage in prostitution, procuring or soliciting patrons for prostitution, operating a house of prostitution or prostitution enterprise, or any other conduct designed to institute, aid or facilitate an act of prostitution. Profiting from prostitution is defined in §230.15(2) of the PL as accepting or receiving money or property as the proceeds of prostitution where the recipient of the proceeds is not the prostitute.

The specific actions that fall within the three statutes are advancing or profiting from prostitution:
1. where the prostitute is a person less than 19 years old;
2. where the prostitute has been compelled to engage in prostitution by force or intimidation; or
3. where the person advancing or profiting does so by managing, supervising, controlling or owning a prostitution business or house of prostitution.

Where the prostitute is less than 11 years old, the offense is promoting prostitution in the first degree. Where the prostitute is at least 11 years old but less than 16 years old, the offense is promoting prostitution in the second degree. Where the prostitute is at least 16 years old but
under 19 years old, the offense is promoting prostitution in the third degree. In addition, item 2 above is promoting prostitution in the second degree and item 3 is promoting prostitution in the third degree. As a practical matter, the relevant criteria for child protective purposes will be the age criteria; so long as the child is under 19 years old, a subject who advances or profits from the child’s prostitution will have committed one of the promoting prostitution offenses, and since a child is defined as a person under the age of 18, all children will fall within the category of persons under the age of 19.

**Incest**

Incest is defined in §255.25 of the PL as marrying or engaging in sexual intercourse or deviate sexual intercourse with a person known to the actor to be related to the actor as an ancestor (i.e., parent, grandparent, etc.), descendant (i.e., child, grandchild, etc.), sibling of the whole or half blood, aunt, uncle, niece or nephew. Therefore, where the subject engages in sexual intercourse or deviate sexual intercourse with the subject’s child, grandchild, niece, nephew, etc., it would constitute incest regardless of the age of the child. If the child is under the age of 18 and thus within the jurisdiction of the child protective system, the incest would also be sex abuse for child protective purposes. Accordingly, a parent who had sexual intercourse or deviate sexual intercourse with his/her 17-year-old child would have committed incest and thus, from a child protective perspective, sex abuse, even though this would not be a sex offense under the rape or sodomy definitions (because the victim is 17 years old).

There are two things to note here. First, the sexual activity involved in incest is sexual intercourse or deviate sexual intercourse, as previously defined. The sex offense of sexual abuse is *not* a basis for a finding of incest. Accordingly, a parent who has sexual contact with his or her 17-year-old child (but not sexual intercourse or deviate sexual intercourse) would have committed neither incest nor a sex offense.

The second item of interest is that a finding of incest can also be based on marriage occurring between the actor and any of the persons listed. Therefore, a person who marries his or her minor child, grandchild, niece, nephew or sibling would have committed incest and, for child protective purposes, sex abuse, by the act of marriage; no sexual activity would be necessary for incest to have been committed. We thus have the interesting possibility of sex abuse occurring from a child protective standpoint without any sexual activity of any sort having taken place.

**Sexual Performance by a Child**

Article 263 of the PL defines offenses related to sexual performance by a child. Sexual performance is defined in §263.00(1) of the PL as any performance or part of a performance which includes sexual conduct by a child less than 16 years of age (but see the note below in regard to the age criteria). Performance is defined in §263.00(4) of the PL as any play, motion picture, photograph or dance or any other visual representation exhibited before an audience. Sexual conduct is defined in §263.00(3) of the PL as actual or simulated sexual intercourse, deviate sexual intercourse, sexual bestiality, masturbation, sado-masochistic abuse or lewd exhibition of the genitals. Simulated is defined in §263.00(6) of the PL as the explicit depiction of any of the listed activities which creates the appearance of such conduct and which exhibits any uncovered portion of the breasts, genitals or buttocks.

It is important to note here that, although the PL definitions make the offenses applicable only to children under the age of 16, §1012(e)(iii)(b) of the FCA and §412(8)(c)(ii) of the SSL provide that the age requirement for application of Article 263 in the PL does not apply to child
protective proceedings. This means that, for child protective purposes, use of any child in a sexual performance will be a form of sex abuse, even if the child is 16 or 17 years old.

It should be noted here that §263.00(2) of the PL defines the term “obscene sexual performance” as a sexual performance involving obscene conduct. While the distinction between a sexual performance and an obscene sexual performance is an interesting academic issue (to those with an interest in such things), it is not a topic that needs to be addressed here, as the definition of sexual performance will, for practical purposes, encompass the activity about which we would be concerned for child protective purposes. Whether some of that activity is also “obscene” is relevant for determining exactly what criminal offenses may have been committed, but it is not especially significant for our purposes.

The actions that fall within Article 263 are the use of a child in a sexual performance and promoting a sexual performance or an obscene sexual performance by a child. The prohibited activities are:

1. promoting a sexual performance by a child;
2. promoting an obscene sexual performance by a child;
3. using a child in a sexual performance; or
4. as a parent, guardian or custodian of a child, consenting to the participation of a child in a sexual performance.

Item 1 is a violation of §263.15 of the PL, item 2 is a violation of §263.10 of the PL, and items 3 and 4 are violations of §263.05 of the PL.

Promoting a sexual performance is defined in §263.00(5) of the PL as procuring, manufacturing, selling, or otherwise distributing or disseminating a performance. §263.10 and §263.15 of the PL also include within the offense of promoting a performance producing or directing any performance. §263.05 of the PL includes within the term “use” of any child in a sexual performance employing, authorizing or inducing a child to engage in a sexual performance.

What this amounts to is that subjects who induce a child to engage in a sexual performance, use a child in such a performance, record such a performance or distribute the record of such a performance will violate the statutes. Case law has held that taking photographs of children engaging in the listed activities falls within the meaning of “using” a child in a sexual performance. Also, the definition of promoting a performance includes procuring the performance, and courts have held that obtaining a copy of a record of a sexual performance is a form of procuring a performance. Therefore, a subject who did not convince the child to engage in the sexual performance, who did not himself/herself direct or record the performance, and who did not condone the child’s participation in the performance, would still violate the statute if the subject obtained a copy of the performance for his or her own use. (A subject who obtained a copy solely for the purpose of turning it over to the authorities for criminal investigation of prosecution would presumably not be considered to be promoting a sexual performance.)

There is one issue here that merits some further discussion. There must be some sexual conduct, as defined above, involved in the performance. This means that not every nude photograph of a child will constitute using a child in a sexual performance; for example, photos of a baby in a bathtub are not likely to fall within the definition of sexual conduct. However, one form of sexual conduct is lewd exhibition of the genitals, so it is possible for a nude photograph, in and of itself, to constitute a sexual performance. The issue is what constitutes “lewd” exhibition, and that will have to be evaluated in light of the circumstances of each case.
II. Allowing Sex Abuse to Occur

It is also a form of sex abuse for a subject to allow any of the crimes described and discussed above to be committed. Although the statute does not specify what is meant by “allowing” sex abuse to occur, the cases and commentaries agree that a subject does not “allow” sex abuse to occur simply by virtue of being a parent, guardian or custodian. The basis for finding that a subject has allowed sex abuse to occur involves the following:

1. the subject must know or have reason to know that sexual abuse of the child is occurring or is likely to occur;
2. the subject must have failed to take adequate measures to attempt to prevent the sexual abuse from continuing, occurring or recurring; and
3. the sexual abuse must continue, occur or recur.

It is worth emphasizing that there is one very basic and important point that must be applied in determining whether a subject can be said to have allowed sex abuse to occur; there must be some underlying sex abuse. If the underlying activity is not sex abuse in one or more of the forms described and discussed above, the subject cannot have allowed sex abuse to occur. The subject must then either know that the sex abuse is occurring or has occurred or must have reason to know; the knowledge or reason to have knowledge of the underlying sex abuse creates the obligation for the subject to act to prevent the sex abuse from continuing or recurring. Where the subject does not act upon his or her knowledge of the sex abuse, or fails to act while having reason to know of the sex abuse, and the sex abuse continues or recurs, the subject has allowed sex abuse to occur.

It is also important to note that the indication for allowing sex abuse to occur is for sex abuse; it is a form of abuse and is not maltreatment. This is because an indication for allowing sex abuse to occur is based on the sex abuse definition in §1012(e) of the FCA. It is not uncommon for cases of allowing sex abuse to occur to be indicated as maltreatment. Such indications create a problem because, if the case is treated as maltreatment, the indication must be based on finding evidence of the elements of maltreatment. This means that impairment or imminent danger of impairment must be shown, as well as a causal connection between the subject’s lack of action and the underlying abuse. Both of these may be difficult to do in some situations, so it is best to treat cases of allowing sex abuse to occur as what they are, which is a form of sex abuse.

Conclusion

The above is intended to provide a reasonably comprehensive discussion of what constitutes sex abuse for child protective purposes, and is intended for general informational purposes.

Immediate Considerations

- Has a complete and detailed physical examination been performed: What were the results?
- Was a discussion held with medical professionals concerning the condition of the child and their opinion as the reason for the child’s condition? Identify professionals by name and address.
• Was the child interviewed first and separately from the family? Was the family interviewed concerning the child’s condition? Good note-taking is essential. Use direct quotes.

• Were interviews conducted so that trauma was minimized?

• What was the extent of parental control at the time of the alleged incident?

• Is retribution against the child likely as a result of disclosure?

• Has the appropriate law enforcement agency been contacted?
Other (XOTH)

The allegation categories of child abuse and maltreatment contained in this appendix are not all-inclusive. Any other act or omission of a parent or other person legally responsible which harms or creates or allows to be created a substantial risk of harm to the child by other than accidental means or which demonstrates a failure to exercise a minimum degree of care to protect the child constitutes child abuse or maltreatment.
Appendix G:
Risk Assessment Profile (RAP)
Appendix G1:
Definition of ‘Child’ and ‘Adult’

In the Risk Assessment Profile, a Child is defined as a person under the age of 18 (or with a blank DOB on the Person Detail window) who has:

- a role of Abused Child (AB), Confirmed Abused (CA), Confirmed Maltreated (CM), Maltreated Child (MA), Non-Confirmed Abused (NA) or Non-Confirmed Maltreated (NM);
  —OR—

- a role of No Role (NO) or Unknown (UK) AND one of the following values in the Rel/Int field on the Person Detail window:
  i. Child (CH)
  ii. Cousin (CO)
  iii. Daughter/Son (DA)
  iv. Other Family Member (FM)
  v. Grandchild (GC)
  vi. Niece/Nephew (NN)
  vii. Sibling (SB)
  viii. Unrel. Home Member (UH)
  ix. Unknown (UK)
  x. Other (XX)

By contrast, an Adult is defined as a person who is not a child. For example, a 16-year-old biological father of a child would be considered an adult by this definition.
Appendix G2:
Risk Element Definitions

1 Total prior reports for adults and children in RAP family unit
Displays the number of prior indicated reports in which:

- an adult in the RAP family unit was a confirmed subject (regardless of report type); or
- a child in the RAP family unit was a confirmed victim of abuse or maltreatment in a familial report type.

This calculation includes prior indicated reports where an adult in the RAP family unit was a subject, regardless of whether or not the children who were abused/maltreated in the prior report are members of the current RAP family unit. This calculation also includes prior indicated reports where a child in the RAP family unit was abused or maltreated by an adult who is not part of the current RAP family unit. All persons in the RAP family unit are included in the calculation, not just the Primary and Secondary Caretakers of the child(ren) alleged to be maltreated.

This calculation does not include the following:

- Duplicate (DUP) stages
- Reports where all of the RAP family unit members had “No Role”
- Any report in which an adult in the RAP family unit was a child

The response to this Risk Element will display as follows:

- No prior determined reports
- Prior unfounded reports only
- One to two prior indicated reports
- Three to four prior indicated reports
- Five or more prior indicated reports

2 Child(ren) in RAP family unit was in the care or custody of substitute caregivers or foster parents, at any time prior to the current report
Indicates whether any child in the RAP family unit previously resided (or currently resides) with a foster parent or substitute caregiver, either informally or formally, for a significant period of time. The placement does not need to have been due to child protective concerns; it could have been an informal family arrangement for one of many reasons.

3 Child(ren) under one year old in RAP family unit
Indicates whether there are any children younger than one year of age residing in the home, in foster care with a permanency planning goal of returning home, or temporarily in another living situation (such as living with a relative or in a hospital) but expected to return home. If the DOB field on the Person Detail window is blank for any person whose Rel/Int field signifies that the person is a child (see Appendix G1), CONNECTIONS will include that person as a child younger than one year old in this calculation.
4 Inadequate housing with serious health or safety hazards, extreme overcrowding, or no housing

Evidence of inadequate or hazardous housing may include, but is not limited to, the following:

- Serious overcrowding
- Seriously inadequate furnishings to meet the family's needs
- Inadequate heat, plumbing, electricity or water
- Lack or inoperability of essential kitchen appliances or bathroom facilities
- Multiple serious health hazards, such as rodent or vermin infestation; garbage and junk piled up; perishable food found spoiled; evidence of human or animal waste; and walls, floors, doors and furnishings thick with dirt and debris
- Multiple serious safety hazards, such as leaking gas from a stove or heating unit; dangerous substances or objects stored in unlocked lower shelves or cabinets, under sink, or out in the open; peeling lead-based paint; hot water or steam leaks from a radiator; broken or missing windows; and no guards on open windows

In some cases, one or two isolated hazardous conditions will be corrected prior to the determination of the report, such as restoring heat or installing window bars. In these cases, the response to this Risk Element would be “No.” However, if the hazardous situation has been an ongoing concern, such as a filthy house with multiple hazards, and, based on past experience, the condition is likely to recur even if it has been cleaned up by the time of the determination, the response to this Risk Element would be “Yes.”

5 Financial resources are severely limited or mismanaged to the degree basic family needs are chronically unmet

This Risk Element is present if either of the following conditions exist:

- The family does not have enough financial resources to meet the basic needs of the family for shelter, food, clothing and health. Benefits such as public assistance, SSI, food stamps, public housing or housing vouchers, HEAP, etc., should be considered as financial resources that help meet the family's basic needs.
- The financial resources should be sufficient to meet the family's basic needs, but are not sufficient due to mismanagement or inappropriate use of funds.

6 Caretaker(s) in primary household has reliable and useful social support, from extended family, friends or neighbors

Indicates whether the caretaker(s) living in the primary household with the child(ren) has reliable and useful social support from informal sources, such as extended family, friends or neighbors. Reliable and useful social support is present when the adult caretaker(s) has a network of relatives, friends or neighbors to call upon for assistance in any area where the family may need help, such as child care, transportation, emergency financial or housing help, or emotional support. In addition, the informal social support network is nearby and readily available when needed.
7 Caretaker is a perpetrator of, or victim of, domestic violence, or has serious conflicts with other adults
Domestic violence is defined as a pattern of coercive tactics that can include physical, psychological, social, economic or emotional abuse perpetrated by one adult against another adult. Examples of domestic violence include: grabbing, pushing, hitting, punching, kicking, choking, biting and restraining; attacking with weapons; threatening to harm the partner or the children; stalking and harassment; intimidation; forced sex; berating and belittling; denying access to family assets, etc. This includes:

- a caretaker who is a victim or perpetrator of domestic violence involving a partner, former partner or other adult;
- a caretaker who continues to maintain any type of relationship with an abusive/abused adult and domestic violence remains a threat (the presumption should be that domestic violence remains a threat);
- an order of protection is in effect against the abusive adult; or
- a caretaker who is involved in serious conflicts (volatile arguments or physical fighting) with other adults within or outside the RAP family unit.

8 Caretaker(s) with alcohol abuse problem within the past two years, with risk of not meeting responsibilities
Alcohol abuse means regular or periodic use of alcohol, with the risk of not meeting responsibilities or having adverse effects on daily living (e.g., danger of job loss, financial problems, partner threatens to leave, child care suffers, criminal justice system involvement).

- If the caretaker is participating in a non-professional support group, such as Alcoholics Anonymous (AA), without any other evidence of continuing alcohol use within the last two years, do not consider this, by itself, as a current alcohol abuse problem.
- If the caretaker was in treatment more than two years ago, but there is evidence that the person has resumed using alcohol, consider this as a current alcohol abuse problem.
- Respond “Yes” to this Risk Element if the caretaker is currently participating in an alcohol treatment program.
- Respond “No” to this Risk Element if the caretaker had an alcohol problem in the past, but has completed treatment and has remained alcohol-free for at least two years.

9 Caretaker(s) with drug abuse problem within the past two years, with risk of not meeting responsibilities
Drug abuse means regular or periodic abuse of one or more drugs, with the risk of not meeting responsibilities or having adverse effects on daily living (e.g., danger of job loss, financial problems, partner threatens to leave, child care suffers, criminal justice system involvement).

- If the caretaker is participating in a non-professional support group, such as Narcotics Anonymous (NA), without any other evidence of continuing drug abuse, do not consider this, by itself, as a current alcohol abuse problem.
• If the caretaker was in treatment more than two years ago, but there is evidence that the person has resumed using drugs, consider this as a current drug abuse problem.
• Select “Yes” for this Risk Element if the caretaker is currently participating in a drug abuse treatment program.
• Select “No” for this Risk Element if the caretaker had a drug abuse problem in the past, but has completed treatment and has remained substance-free for at least two years.

10 Caretaker(s) has a serious mental health problem
The caretaker should be considered as having a mental health problem if he or she:
• exhibits symptoms, such as bizarre behavior or delusions, of an undiagnosed mental illness;
• has recent repeated referrals for mental health evaluation or treatment;
• has been prescribed medication for an ongoing or recurring serious mental health problem;
• is currently experiencing depression of an ongoing or recurring nature, or suicidal behavior;
• has a current diagnosed serious mental illness; or
• has attempted suicide in the past.

11 Caretaker(s) has very limited cognitive skills
Very limited cognitive skills could include mental retardation, brain injury or some type of cognitive disability that limits the caretaker’s ability in major life activities, such as child care, capacity to form positive relationships with others, self-care, self-direction, receptive and expressive language, learning, capacity for independent living and economic self-sufficiency.

12 Caretaker(s) has a debilitating physical illness or physical disability
Indicates whether or not the caretaker has a serious physical disability or debilitating illness that limits his/her ability to perform any major life activities, such as child care, capacity to form positive relationships with family members or others, self-care, self-direction, receptive and expressive language, learning, mobility, capacity for independent activities and economic self-sufficiency.

13 Caretaker(s) has and applies realistic expectations of all the children
"Realistic expectations" is defined as having an understanding of age-appropriate behavior, setting consistent, realistic standards, as well as safe and reasonable limits with appropriate consequences. In addition, the caretaker provides the child(ren) with options, encourages and helps the child(ren) with tasks when needed, and adapts parenting practices to the needs of the child(ren) and circumstances. Select “Yes” for this Risk Element only if the caretaker has realistic expectations of all of the children.
14 Caretaker(s) always or usually recognizes and attends to the needs of all the children
Indicates whether the caretaker has a history of recognizing and attending to the daily needs of all of the children. This strength would be present if the caretaker:

- has demonstrated competence in meeting the basic and unique needs of all of the children;
- is resourceful in making attempts to meet child(ren)’s needs despite adverse circumstances; and
- has demonstrated the ability to prioritize the children’s needs above the caretaker’s.

The word “always” is used because some caretakers always meet the needs of all of their children (i.e., a false report). The word “usually” is included because some caretakers may meet all of the needs of their children, but may have an isolated or temporary instance of not meeting a child’s needs.

15 Caretaker(s) views the abuse/maltreatment situation as seriously as
This Risk Element refers to whether the caretaker shares your, the worker’s, assessment of the seriousness of the child abuse/maltreatment situation.

- If the caretaker views the situation as less serious than you, the worker, does, select “No” for this Risk Element.
- If you, the worker, and the caretaker both view the situation as not serious (e.g., a patently false report) or both see the situation as serious, select “Yes.”
Appendix G3:
Elevated Risk Element Definitions

1 Death of a child as a result of abuse or maltreatment by caretaker(s)
   Applies to a confirmed fatality of a child as a result of abuse or maltreatment by the identified Primary Caretaker or Secondary Caretaker. The death of the child could have occurred at any time prior to the completion of the RAP and in any jurisdiction within or outside New York State.

2 Caretaker(s) has a previous TPR
   The identified Primary Caretaker or Secondary Caretaker must have had an adjudication of termination of their parental rights at any time prior to the completion of the RAP. The termination of parental rights (TPR) indicates that a proceeding in family court has occurred and has been ruled upon for the commitment of the guardianship and custody of a child. The TPR may be based upon grounds that the child is a “permanently neglected child,” “severely abused child” or a “repeatedly abused child.”
   
The filing of a TPR with no adjudication to date does not apply.
   
   Parental surrenders are not to be considered as circumstances applying to this Elevated Risk Element. Parental surrenders are not a legal indication of a family court finding of permanent neglect, and therefore do not apply in this circumstance.

3 Siblings removed from the home, prior to current report, due to abuse or neglect and remain with substitute caregivers or foster parent
   Applies to situations or circumstances which result in the removal of a child (or children) from the home, due to alleged or confirmed abuse or maltreatment, and the child(ren) is placed with substitute caretakers or foster parents. This includes removals by CPS, law enforcement or any authorized person or entity acting in the best interests of the child(ren).

4 Repeated incidents of sexual abuse or severe physical abuse by caretaker(s)
   Applies to confirmed reports in which the Primary Caretaker and/or Secondary Caretaker has repeatedly sexually abused or severely physically abused one or more children in his/her care or has allowed repeated sexual abuse or severe physical abuse of said child(ren) to occur.
   
   Although a single act of sexual abuse is a serious and grievous assault upon a child, the existence of repeated sexual abuse implies an inability on the part of the Primary Caretaker and/or Secondary Caretaker to protect the child(ren) and therefore implies an increased risk of future harm.
   
   Severe physical abuse implies, but is not limited to, a substantial risk of serious and/or protracted physical injury. Examples of severe physical abuse that results in serious physical injury may include, but are not limited to, the infliction of internal injuries, fractures, blunt trauma, shaking, choking, burns/scalding, sever lacerations, hematoma or extensive bruising.
5 Sexual abuse of a child and perpetrator is likely to have current access to child
Applies to situations in which a child (or children) has been sexually abused and the confirmed perpetrator (adult or child) continues to have current access to and/or contact with the child. This situation implies an inability on the part of the Primary Caretaker and/or Secondary Caretaker to protect the child(ren) from the risk of future sexual abuse. This also applies to situations in which the Primary Caretaker and/or the Secondary Caretaker is the perpetrator and resides with, or continues to have access to, the child.

6 Physical injury to a child under one year old as a result of abuse or maltreatment by caretaker(s)
Applies only to a child (or children) younger than one year old. Confirmed abuse or maltreatment resulting in physical injury to the child(ren) must have occurred. The young age and inherent vulnerability of the child, coupled with the physical injury to the child due to abuse or maltreatment, implies an increased risk of future harm.

7 Serious physical injury to a child requiring hospitalization/emergency care within the last 6 months, as a result of abuse or maltreatment by caretaker(s)
Applies to situations in which the child(ren) sustained serious physical injury that requires hospitalization, or emergency care provided by any of the following: emergency room, urgent care facility, doctor's office or emergency medical technicians. The physical injury must have occurred within the last six months.
Examples of serious physical injury may include, but are not limited to, internal injuries, blunt force trauma, whiplash/Shaken Infant Syndrome, head injury, serious injury to or loss of limb(s), fractures (including spiral and compound), burns/scalding, eye injuries and severe lacerations.
Malnutrition, Failure to Thrive (FTT) and other serious or life-threatening medical diagnoses directly related to confirmed child abuse or maltreatment may also be included under this Elevated Risk Element.

8 Newborn child has a positive toxicology for alcohol or drugs
Applies to situations in which a newborn (younger than 6 months old) who is currently part of the RAP family unit:
- tested positive for alcohol or drugs in his/her bloodstream or urine; and/or
- was born dependent on drugs or with drug withdrawal symptoms, fetal alcohol effect or Fetal Alcohol Syndrome.
The young age and inherent vulnerability of the newborn child, coupled with any of the circumstances above, implies an increased risk of future harm to the child.
**Appendix G4:**
**Risk Element Scoring Matrix**

The response to each Risk Element on the **Risk Assess Profile** tab has an associated point value. The total of these point values is calculated as the **Preliminary Risk Score** once you have responded to all of the Risk Elements. If you change the response to any Risk Element(s), the **Preliminary Risk Score** recalculates automatically.

The value of the **Preliminary Risk Rating** is determined by the range into which the **Preliminary Risk Score** falls. (See “Preliminary Risk Rating” on page 248.)

Note the following abbreviations and indications used in the table below:

- **PC** = Primary Caretaker
- **SC** = Secondary Caretaker
- † Response for the Secondary Caretaker is “No” or no Secondary Caretaker is identified

<table>
<thead>
<tr>
<th>Risk Element</th>
<th>Response</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Total prior reports for adults and children in RAP family unit</td>
<td>A</td>
<td>-1</td>
</tr>
<tr>
<td></td>
<td>B</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>C</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>D</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>E</td>
<td>2</td>
</tr>
<tr>
<td>2 Child(ren) in RAP family unit was in the care or custody of substitute caregivers or foster parents, at any time prior to the current report</td>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>0</td>
</tr>
<tr>
<td>3 Child(ren) under one year old in RAP family unit</td>
<td>Yes</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>0</td>
</tr>
<tr>
<td>4 Inadequate housing with serious health or safety hazards, extreme overcrowding, or no housing</td>
<td>Yes</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>0</td>
</tr>
<tr>
<td>5 Financial resources are severely limited or mismanaged to the degree basic family needs are chronically unmet</td>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>0</td>
</tr>
<tr>
<td>6 Caretaker(s) in primary household has reliable and useful social support, from extended family, friends or neighbors</td>
<td>Yes</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>1</td>
</tr>
<tr>
<td>7 Caretaker is a perpetrator of, or victim of, domestic violence, or has serious conflicts with other adults</td>
<td>PC = Yes SC = No†</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>PC = Yes SC = Yes</td>
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<tr>
<td></td>
<td>PC = No SC = No†</td>
<td>0</td>
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<tr>
<td></td>
<td>PC = No SC = Yes</td>
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</table>
## Risk Element 8

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<tr>
<td>8 Caretaker(s) with alcohol abuse problem within the past two years, with risk of not meeting responsibilities</td>
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</tr>
<tr>
<td></td>
<td>PC = Yes SC = Yes</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>PC = No SC = No†</td>
<td>0</td>
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<tr>
<td></td>
<td>PC = No SC = Yes</td>
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## Risk Element 9

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<th>Risk Element</th>
<th>Response</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Caretaker(s) with drug abuse problem within the past two years, with risk of not meeting responsibilities</td>
<td>PC = Yes SC = No†</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>PC = Yes SC = Yes</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>PC = No SC = No†</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>PC = No SC = Yes</td>
<td>2</td>
</tr>
</tbody>
</table>

## Risk Element 10

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<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 Caretaker(s) has a serious mental health problem</td>
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<td>1</td>
</tr>
<tr>
<td></td>
<td>PC = Yes SC = Yes</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>PC = No SC = No†</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>PC = No SC = Yes</td>
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</tr>
</tbody>
</table>

## Risk Elements 11 and 12:

### Risk Element 11:
Caretaker(s) has very limited cognitive skills

<table>
<thead>
<tr>
<th>Risk Element 11: Caretaker(s) has very limited cognitive skills</th>
<th>PC = No SC = No†</th>
<th>PC = Yes SC = No†</th>
<th>PC = No SC = Yes</th>
<th>PC = Yes SC = Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>PC = No SC = Yes†</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>PC = Yes SC = Yes†</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>PC = No SC = Yes</td>
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<tr>
<td>PC = Yes SC = Yes</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

†SC response is “No” or no SC is identified
<table>
<thead>
<tr>
<th>Risk Element</th>
<th>Response</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>13 Caretaker(s) has and applies realistic expectations of all the children</td>
<td>PC = Yes SC = No†</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>PC = Yes SC = Yes</td>
<td>0</td>
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<tr>
<td></td>
<td>PC = No SC = No†</td>
<td>1</td>
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<tr>
<td></td>
<td>PC = No SC = Yes</td>
<td>1</td>
</tr>
<tr>
<td>14 Caretaker(s) always or usually recognizes and attends to the needs of all the children</td>
<td>PC = Yes SC = No†</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>PC = Yes SC = Yes</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>PC = No SC = No†</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>PC = No SC = Yes</td>
<td>1</td>
</tr>
<tr>
<td>15 Caretaker(s) views the abuse/maltreatment situation as seriously as</td>
<td>PC = Yes SC = No†</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>PC = Yes SC = Yes</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>PC = No SC = No†</td>
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<tr>
<td></td>
<td>PC = No SC = Yes</td>
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</table>
Appendix G5:  
Risk Rating Definitions

After you, the worker, have responded to all of the Risk Elements, the Preliminary Risk Rating is calculated, based on the Preliminary Risk Score.

After the Elevated Risk Elements are taken into account, the Final Risk Rating is calculated. If no Elevated Risk Elements are selected, the Final Risk Rating equals the Preliminary Risk Rating. If you respond “Yes” to any Elevated Risk Element, the Final Risk Rating is automatically calculated as “Very High.”

CONNECTIONS generates one of four values for the Risk Ratings:

- **Low Risk**
  - Families with Moderate or Low risk may either have no service needs, or their needs may be appropriately served by other services in the community.

- **Moderate Risk**
  - The RAP does not replace your judgment; there may be valid reasons why a services case should be opened for a family with lower or moderate risk.

- **High Risk**
  - Services are deemed essential for cases with High or Very High risk in order to decrease the risk of subsequent abuse or maltreatment.
  - If protective or preventive services are not provided to High or Very High risk cases, an explanation is required regarding why services are not being provided.

- **Very High Risk**
Appendix H:
High Priority Factors (NYC Only)

The *Assigned Workload* for ACS workers in New York City includes a column (HPF) which displays a code for High Priority Factors. The table below lists the High Priority Factor that corresponds to each HPF code.

<table>
<thead>
<tr>
<th>HPF Code</th>
<th>High Priority Factor</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>DOA/Fatality</td>
</tr>
<tr>
<td>2</td>
<td>Child has positive toxicology</td>
</tr>
<tr>
<td>3</td>
<td>Serious Injury</td>
</tr>
<tr>
<td>4</td>
<td>Malnutrition/Failure to Thrive</td>
</tr>
<tr>
<td>5</td>
<td>Sexual Abuse</td>
</tr>
<tr>
<td>6</td>
<td>Domestic Violence</td>
</tr>
<tr>
<td>7</td>
<td>Child under 7, caretaker abuses drugs/alcohol</td>
</tr>
<tr>
<td>8</td>
<td>Child under 7, caretaker mentally ill/developmentally disabled</td>
</tr>
<tr>
<td>9</td>
<td>Child under 7, unsupervised</td>
</tr>
<tr>
<td>10</td>
<td>Reported Child Under 1 Year Old</td>
</tr>
<tr>
<td>11</td>
<td>Child on Sleep Apnea Monitor</td>
</tr>
<tr>
<td>12</td>
<td>Weapon Noted in Report</td>
</tr>
<tr>
<td>13</td>
<td>Four or More Reports</td>
</tr>
</tbody>
</table>
Appendix I:
OCFS Security Guidelines
OCFS Security Guidelines

Safe Computing Practices

- **Be responsible**—Download only authorized, work-related executables or documents from the Internet that are from trusted sources and that your LAN/Security Administrator has approved. Never use commercial e-mail accounts (such as AOL, Hotmail or Yahoo), Instant Messaging, chat rooms or other third-party services on a state computer without written authorization.

- **Be professional**—Never use state e-mail services for prohibited activities, including (but not limited to): sharing jokes or any other non-work-related materials; transmitting illegal, offensive or threatening items; and soliciting for unauthorized causes or activities. In addition to being prohibited, these unnecessary electronic transmissions crowd network bandwidth and occupy server capacity needed for legitimate business purposes.

- **Be alert and immediately** report any suspected virus infection or other system compromise to your LAN/Security Administrator and to the OCFS Information Security Officer (Jo Shrader). Proper reporting speeds reaction, recovery and damage control. Be sure you know who your LAN/Security Administrator is before you need to contact him/her.

- **Be consistent** in complying with the same safety procedures when using remote access or transporting files between PCs via a floppy disk or CD. If you move disks between your home and work PCs, make sure you have up-to-date anti-virus software on your home PC and regularly scan disks and CDs. Viruses can easily be brought into the state network through a laptop, home PC or storage media.

- **Be suspicious** of e-mail you weren’t expecting, even if it’s from someone you know. Computer viruses often send e-mails to all contacts in an unsuspecting sender’s address book. Before you open the e-mail, call the source to verify that s/he intentionally sent the e-mail.

- **NEVER** run/download/forward unsolicited files (e.g., executables, documents, spreadsheets). Any programs that run or execute on your PC must be virus-checked and approved by your LAN/Security Administrator first. Never open any file with a double file extension (e.g., iamavirus.txt.vbs).

- **NEVER** forward virus warnings to anyone. Contact your LAN/Security Administrator to determine how to proceed. (If your LAN/Security Administrator is not available, contact the Help Desk.) Forwarding these items increases risk and creates additional network traffic.

- **NEVER** attempt to test system weaknesses or vulnerabilities unless you are specifically authorized to do so.

- **ALWAYS** leave your PC powered on (being sure to log off, as appropriate) This will ensure that your PC will receive security patches. Click on Start > Shut Down > Log Off to log off your computer without powering off.

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**Anti-virus software helps protect against computer viruses, but does NOT replace conscious, consistent adherence to established safety procedures.**

**If you think your computer may have been exposed to a virus, DON’T PANIC! Contact your LAN/Security Administrator IMMEDIATELY.**
Protecting Your Password

- **Make it difficult**
  Select a password that is easy for you to remember, but difficult for others to guess. Don’t be stingy—make your password as long as possible (at least 8 characters and up to a maximum of 13 characters), in order to help reduce the likelihood of allowing someone to guess it. You cannot use all or part of your logon ID in your password, nor can you reuse any of your last 13 passwords.

- **Mix it up**
  Your OCFS password must contain at least one uppercase letter, one lowercase letter and one number. CONNECTIONS users must never use symbols in their passwords.

- **Keep it to yourself**
  Don’t share your password with others. Never display your password; if you need to write it down, don’t keep the information at your desk or anywhere it can be easily seen by others.

- **Embrace change**
  You must change your password periodically—at least once every 90 days. If you think your password has been compromised, change it immediately. (Don’t forget to report the situation to your LAN/Security Administrator as soon as possible!)

- **Be yourself**
  Use only your logon ID and password; never use a current or former co-worker’s ID or password.

- **Let your fingers do the walking**
  Never store passwords in macros or automatic log-on features. Enter your password manually every time.

Your unique User ID and password not only provide you with “keys” to access the OCFS network (including CONNECTIONS, as applicable), they also serve as a form of identification—linking you to your actions in the system. YOU are responsible for actions taken with your User ID and password! Always follow established password protocols to help prevent unauthorized use of your User ID and password.

If you think your password has been compromised, change it immediately AND report the situation to your LAN/Security Administrator.

Security is everyone’s responsibility!

These guidelines are advisable for all of your passwords.
Protecting Confidential Information

- **Maintain confidentiality 24/7**
  Protecting confidential information encompasses all spoken, handwritten, printed and electronically transmitted notes and communications. When you make case visits, be sure to keep client-identifiable casework documentation with you at all times and never allow unauthorized individuals to view the information. Remember that all case and system information must be used only for legitimate business purposes. If you must keep hard copies of confidential information at your desk, always lock your desk whenever you are away from it. If hard copies need to be discarded, always run them through a cross-cut shredder.

- **Don’t kick this habit**
  It’s easy to become complacent or to think, “I’ll only be away from my computer for a few minutes.” If you are logged on to the system, always lock your computer (or log off the network) by holding down the Ctrl+Alt+Del keys at the same time. Do this every time you leave your desk; this helps prevent unauthorized individuals from using your User ID and password to access the network. **80% of security breaches are unauthorized people using an authorized user’s computer, NOT hacking in from outside.**

- **Hit the road, but…**
  Be particularly careful when using portable electronic devices, such as laptop computers, Quick Pads, voice recorders and PDAs. Don’t leave confidential information on these devices longer than is absolutely necessary. If the device has the ability to transmit information, avoid transmitting confidential information over wireless connections or unsecured public connections. When traveling with the device, keep it with you at all times; never check it into airline luggage systems.

- **Exercise care with voicemail and e-mail**
  When conducting casework or other legitimate business contacts by phone, it’s inevitable that you may sometimes need to leave a voicemail message or send an e-mail to a contact. Never include confidential information in voicemail you leave or e-mail you send.

- **Don’t convey confidential information where others can intercept it**
  Caseworkers have an obligation to preserve the confidentiality rights of the children and families with whom they work. Other staff may also have legitimate access to this information. If you must discuss confidential information on the phone, avoid areas where your conversation can be overheard. Remember that cellular phone lines are not sufficiently secure to be appropriate when discussing confidential information. **Never save confidential information to the hard drive of any desktop computer. Check the permission levels on your Microsoft Outlook folders; make sure you understand what each level of access means and assign permissions on a need-to-know basis only.**

- **The walls have ears**
  Be mindful of protecting confidential information in areas where you can be easily overheard, such as in cubicle areas.

- **Use follow-through when faxing**
  If you need to transmit any confidential information via fax, call first before sending the fax, in order to alert the intended recipient that you are sending a fax. Be sure to call the recipient afterward, too, to verify that the fax was received and that it was not left on the fax machine. Avoid faxing confidential information whenever possible.

Security is everyone’s responsibility.
Always follow established security protocols to help protect confidential information.
Appendix J: Expanded Definitions of Investigation Conclusion Closure Reasons

Unfounded; Case open - Services
You have assessed that no serious safety factors or risk issues currently exist which warrant or require the provision of child protective services. However, preventive services are warranted and have been accepted by the family. Additionally, court-ordered preventive services, court-ordered preventive supervision or voluntary placement may exist.

Unfounded; Closed - No services required
You have assessed that no serious safety factors or risk issues currently exist which warrant or require the provision of child protective services. Additionally, none of the following services are required or provided:

- preventive
- court-ordered services
- court-ordered supervision
- court-ordered placement
- voluntary placement

Unfounded; Closed - Refused services
You have assessed that no serious safety factors or risk issues currently exist which warrant or require the provision of child protective services. Preventive services were offered to the family and refused and there is not sufficient evidence to initiate or continue a Family Court action to compel involvement.

Unfounded; Closed - Unable to contact/moved out of jurisdiction
You are unable to assess if serious safety factors or risk issues currently exist which warrant or require the provision of child protective services and services cannot be provided, due to one or more of the following circumstances:

- The current whereabouts of the family are unknown and the family cannot be located.
- The family has moved out of the current CPS jurisdiction and cannot be located.
- The family has moved out of New York State.

Unfounded; Closed – Referred to Community Based Services Only
You have assessed that no serious safety factors or risk issues currently exist which warrant or require the provision of child protective services. The family has been referred to community-
based services only. No agency direct or purchase provided services or court ordered services are required or being provided at this time.

**Indicated; Case open - CPS required**

You have assessed that serious safety factors and/or risk issues exist which require the on-going assessment of safety and risk and/or court-ordered CPS placement, court ordered services or supervision currently exist. In addition, preventive services, voluntary foster care placement or non-LDSS custody-relative/resource placement may be requested and provided to the family and/or a PINS/JD placement may exist.

**Indicated; Case open - CPS not required**

You have assessed that no serious safety factors and/or risk issues exist that require an on-going assessment of safety and risk. Preventive services, voluntary foster care placement or non-LDSS custody-relative/resource placement may be requested and provided to the family and/or a PINS/JD placement may exist.

**Indicated; Closed - Services refused/unable to take or continue legal action**

Current serious safety factors or risk issues may exist, however do not place the child(ren) in immediate danger. The family has been offered and subsequently refused appropriate services. Additionally, the CPS worker has assessed that:

- it would not be in the child's best interest or that there is insufficient evidence to initiate or continue a Family Court action to compel involvement
- OR-
  - CPS sought a court order to compel the subject(s) of an indicated abuse and/or maltreatment report(s) to receive such services, but the court has dismissed the petition and it is not in the child's best interest to continue additional Family Court action.

**Indicated; Closed - No services required**

You have assessed that no serious safety factors and/or risk issues exist that require the on-going assessment of safety and risk. Additionally, none of the following services are required or being provided:

- preventive services
- court-ordered services
- court-ordered supervision
- court-ordered placement
- voluntary placement

**Indicated; Closed - Unable to contact/ moved out of jurisdiction**

Serious safety factors and/or risk issues exist that require the on-going assessment of safety and risk. However, services cannot be provided, as one of the following circumstances exists:
• The current whereabouts of the family are unknown and the family cannot be located.
• The family has moved out of the current CPS jurisdiction and cannot be located.
• The family has moved out of New York State.

**Indicated; Closed - No surviving children**

All of the following circumstances must exist:

• A DOA/Fatality allegation exists and is substantiated.
• A DOD was entered for the AB child(ren) associated to the DOA/Fatality allegation.
• There are no other persons younger than 18 years of age with a role of MA, AB or No Role in the case composition.

**Indicated; Closed – Referred to Community Based Services Only**

You have assessed that *no* serious safety factors and/or risk issues exist that require the *ongoing assessment* of safety and risk. The family has been referred to community-based services only. No agency direct or purchase provided services or court ordered services are required or being provided at this time.