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SENATE BILL DRS55078-LUZ-135C\*

Short Title: CPS Intake Screening/PED Recommendations. (Public)

Sponsors: Senators Edwards, Krawiec, and Burgin (Primary Sponsors).

Referred to:

1 A BILL TO BE ENTITLED  
2 AN ACT TO PROHIBIT COUNTY DEPARTMENTS OF SOCIAL SERVICES FROM  
3 IMPLEMENTING CHILD PROTECTIVE SERVICES INTAKE SCREENING CRITERIA  
4 THAT IS MORE STRINGENT THAN, OR IN ADDITION TO, STATE POLICY AND TO  
5 DIRECT THE DEPARTMENT OF HEALTH AND HUMAN SERVICES TO MAKE  
6 VARIOUS POLICY CHANGES AS A MEANS TO IMPROVE THE CHILD  
7 PROTECTIVE SERVICES INTAKE SCREENING PROCESS, AS RECOMMENDED BY  
8 THE JOINT LEGISLATIVE PROGRAM EVALUATION OVERSIGHT COMMITTEE.

9 The General Assembly of North Carolina enacts:

10 **SECTION 1.** Prohibit County Supplementation of State Policy. – Article 3 of  
11 Chapter 7B of the General Statutes is amended by adding a new section to read:

12 "**§ 7B-300.1. No county supplementation of certain State policy.**

13 Notwithstanding any other provision of law to the contrary, a county department of social  
14 services may not supplement child protective services intake screening criteria with county  
15 policy that is more stringent than, or in addition to, State policy."

16 **SECTION 2.(a)** Rapid Consultation System. – As a means of improving State child  
17 protective services intake screening guidance to county departments of social services, the  
18 Department of Health and Human Services, Division of Social Services (Division), shall  
19 implement a rapid consultation system to provide consultation to counties when making  
20 decisions regarding the safety of children. Specifically, the rapid consultation system shall  
21 consist of a telephone line that a county worker or supervisor can access at any time when the  
22 county worker or supervisor has concerns regarding the correct screening decision, assessment  
23 track, or applicable response time frame for a specific case. Upon receiving a request, Division  
24 staff shall consult with the county department of social services within 24 hours of receipt of the  
25 request and at least two Division staff workers shall consult on each call to ensure the advice  
26 conveyed is consistent.

27 **SECTION 2.(b)** Report. – The Division of Social Services shall implement the rapid  
28 consultation system required by this section no later than June 30, 2021, and submit a report on  
29 its implementation to the Joint Legislative Oversight Committee on Health and Human Services  
30 by December 31, 2021.

31 **SECTION 3.(a)** Assessment of Worker Comprehension and Training Needs. – The  
32 Department of Health and Human Services, Division of Social Services (Division), shall  
33 periodically assess county department of social services workers' and supervisors' comprehension  
34 and correct implementation of State policy and their training needs regarding the screening of  
35 reports of alleged child maltreatment. The Division shall assess comprehension and training  
36 needs by use of hypothetical vignettes or other assessment tools the Division deems appropriate



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1 and, when necessary, require retraining for workers to ensure proper application of State policies  
2 regarding the screening of reports of alleged child maltreatment. Additionally, the Division shall  
3 do the following:

- 4 (1) Increase the frequency of intake training.
- 5 (2) Develop an intermediate intake screening course that bridges the gap between  
6 newer workers and those that are more experienced.
- 7 (3) Require county social services workers and supervisors to complete an intake  
8 screening training at least every three years.

9 **SECTION 3.(b)** Report. – The Division of Social Services shall implement the  
10 assessment and training requirements of this section by December 31, 2020, and submit a report  
11 on its use of those training requirements to the Joint Legislative Oversight Committee on Health  
12 and Human Services by June 30, 2021.

13 **SECTION 4.(a)** Structured Intake Form Revisions. – The Department of Health and  
14 Human Services, Division of Social Services (Division), in consultation with the Children's  
15 Research Center or a similar organization, shall revise the child protective services structured  
16 intake form, which is a tool county departments of social services use to screen reports of alleged  
17 child maltreatment. The Division shall revise the form to ensure, at a minimum, it (i) continues  
18 to meet federal and State requirements and (ii) provides consistency for use statewide. The  
19 Division shall further ensure the structured intake form is recertified every five years and shall  
20 continue to consult with the Children's Research Center or a similar organization when State  
21 policy changes require modifications to the structured intake form.

22 **SECTION 4.(b)** Report. – Beginning July 30, 2020, the Division of Social Services  
23 shall report to the Joint Legislative Oversight Committee on Health and Human Services  
24 (Committee) on its process of revising the structured intake form in accordance with this section  
25 and continue reporting to the Committee every six months thereafter until revisions are complete.

26 **SECTION 5.(a)** Program Monitoring. – For purposes of better evaluating individual  
27 county departments of social services, the Department of Health and Human Services, Division  
28 of Social Services (Division), shall implement statistically valid program monitoring for county  
29 intake screening procedures, as well as establish measurable performance benchmarks. The  
30 Division shall establish measurable and consistent intake screening benchmarks that can be  
31 applied to all counties, with the Division performing county data reviews for intake screening at  
32 least once each year beginning no later than December 31, 2024. The Division shall oversee  
33 intake screening by performing valid sampling and ensure program monitoring intake screening  
34 reviews collect sample sizes large enough to achieve a county confidence level of at least ninety  
35 percent (90%), with a margin of error of plus or minus five percent (5%).

36 **SECTION 5.(b)** Report. – Beginning June 30, 2021, and continuing each year  
37 thereafter until December 31, 2024, the Division of Social Services shall report to the Joint  
38 Legislative Oversight Committee on Health and Human Services on its progress towards  
39 improved program monitoring and continuous quality improvement in accordance with this  
40 section.

41 **SECTION 6.** Effective Date. – This act is effective when it becomes law.