



Roles And Responsibilities for CAPTA

The keeping Children safe act of 2003 amended CAPTA, the Child Abuse Prevention and Treatment Act (PL 108-36), was signed into law on June 25, 2003. This law includes the requirement that Child Protective Services refer a child under the age of 3 who is involved in a substantiated case of child abuse or neglect to the Family Infant Toddler Program funded under Part C of the Individuals with disabilities Education Act (section 106(b)(2)(A)(xxi). “Part C is a component of PL 105-17, IDEA (Individuals with Disabilities Education Act). Agencies providing comprehensive, Coordinated, multidisciplinary, early intervention for infants and toddlers with disabilities or developmental delays and their families.

Child Protection Services	FIT Early Intervention
Philosophical Base	
<p>The New Mexico Department of Children Youth and Families, Child Protective Services, provides family-centered services to protect children from abuse and neglect, to improve conditions in families that place children at risk, and assisting youth to be productive and law-abiding citizens.</p>	<p>The goal of service coordination is to give family’s a good start in supporting their child with a disability and to develop their own skills in accessing, utilizing, and coordinating supports within their natural environments. “Natural environments means settings that are natural or normal for the child’s age peers who no disabilities.” (34CFR 303.18)</p>
Referral	
<ul style="list-style-type: none"> ▪ At initial referral, the primary roles of CPS worker are to gather information to validate maltreatment or allegations on a court petition and to determine what services, if any are needed. The priority at this phase is securing child safety with attention to working with the family to preserve the family unit whenever possible. ▪ CPS conducts assessments and the corker completes a referral form and sends it to FIT Early Intervention Services no more than two(2) 	<ul style="list-style-type: none"> ▪ The FIT Early Intervention Program contacts family to set up home visit to discuss Early Intervention process and services(or family declines to meet.) ▪ At the home visit the Service Coordinator explains program and gets consent to evaluate child(or family declines to participate.) ▪ The Service Coordinator and CPS worker determine need of surrogate parent based on regulations If a child is a state ward ▪ FIT Service coordinator notifies CPS worker of child’s eligibility. If found not eligible the Service Coordinator sends a

<p>working days after a case of abuse or neglect has been substantiated. Family is informed of referral to Early Intervention and given a Fact sheet about FIT with provider contact information.</p> <ul style="list-style-type: none"> ▪ If a child is the ward of the state, the CPS worker will send notification letter to the Early Intervention provider. ▪ If an intake has been received within 6 months(180calendar days) or less after an initial referral to Early Intervention has been made, a new referral is not necessary. ▪ The CPS worker will participate in the initial IFSP development as well as any reviews or changes made in services and maintain ongoing communication with FIT service coordinator. ▪ 	<p>notification to CPS worker and sends family notice of ineligibility.</p> <ul style="list-style-type: none"> ▪ If the family is eligible the FIT Service Coordinator will inform the CPS worker the date of the IFSP to develop a plan for services. ▪ The Service Coordinator will keep the CPS worker updated on child & family progress and maintain ongoing communication with CPS worker.
The Case is Opened for Ongoing Services	
Evaluation/Review	
<p>Ongoing cases are reviewed every 6 months (180 Calendar days) If court is involved.</p>	<p>A review of the IFSP plan must be conducted every 6 months or more frequently if needed.</p>
Case Closures	
<p>Case plan and goals have been met and the child is no longer at risk of maltreatment</p>	<p>Service Coordinator makes sure that transition planning is started early enough to assure that the family as well as child's needs are addressed and referrals and coordination with other programs can be done in a quality way. An infant or child with a disability and their family are eligible until the child turn three, the services are no longer needed, or the family declines services.</p>