

**Chapter 2 NOTIFICATION TOOL -NO APPEAL RIGHTS**

**Instructions:** *Instructions: This tool is to be used by a Department of Child Services (DCS) employee authorized to notify an alleged perpetrator or an employer regarding an assessment conclusion by DCS. Language from an appropriate section should be inserted into a letter that includes the name and address of the person to whom it is being sent. The letter should be signed by an authorized DCS employee and sent by mail or hand delivered, with proper attachments. The following language is NOT to be used when any right to administrative appeal applies.*

**Section A, DCS Policy 2.1. Use the following language to notify a perpetrator (NOT a licensed resource parent, child care worker or DCS employee) that one or more allegations against them have been substantiated.**

Date mailed/hand delivered: insert date

**NOTICE OF ASSESSMENT OUTCOME AND RIGHT TO REQUEST ADMINISTRATIVE REVIEW**

The Indiana Department of Child Services (DCS) local office in local office County conducted an assessment of a report of child abuse and/or neglect. DCS classified the following allegations in assessment #insert assessment number, approved on insert date (attached) against:

name of alleged perpetrator  
address of alleged perpetrator

<b>ALLEGATION(S) SUBSTANTIATED</b>	<b>VICTIM</b>
<b>Physical Abuse</b>	<b>Insert initials of victim(s) or NONE</b>
<b>Sexual Abuse</b>	<b>Insert initials of victim(s) or NONE</b>
<b>Neglect</b>	<b>Insert initials of victim(s) or NONE</b>

<b>ALLEGATION(S) UNSUBSTANTIATED</b>	<b>VICTIM</b>
<b>Physical Abuse</b>	<b>Insert initials of victim(s) or NONE</b>
<b>Sexual Abuse</b>	<b>Insert initials of victim(s) or NONE</b>
<b>Neglect</b>	<b>Insert initials of victim(s) or NONE</b>

A summary of the DCS decision is attached as State Form 113(CW 311), *Investigation of Child Abuse or Neglect*.

You\* have the right to request administrative review of a DCS decision to substantiate an allegation. To do so, you must complete and submit the attached form entitled State Form 54775, *Request for Administrative Review of Child Abuse/Neglect Substantiation*. Your request must be submitted to DCS within fifteen (15) calendar days from the postmarked date

of this letter or hand delivery (plus an additional 3 calendar days if received by U.S. mail). The attached form includes instructions and a summary of the administrative review process.

If you have any questions, please contact the DCS local office in local office County at insert general office phone number.

\*If DCS records indicate that the person identified as a perpetrator is under the age of eighteen (18), a copy of this notice is being sent to the person's parent, court appointed guardian or other legal representative. Any request by a person under age eighteen (18) for administrative appeal must be signed by the minor person's parent, court appointed guardian or other legal representative.

Attachments:

State Form 113 (CW311), *Investigation of Child Abuse or Neglect- APPROVED*

State Form 54775, *Request for Administrative Review of Child Abuse/Neglect Substantiation*

*Section B, DCS Policy 2.2. Use the following language to notify a perpetrator (NOT a licensed resource parent, child care worker or DCS employee) that substantiated allegations were unsubstantiated following administrative review (including a DCS decision to unsubstantiate following further assessment).*

Date mailed/hand delivered: insert date

**NOTICE OF ADMINISTRATIVE REVIEW DECISION TO UNSUBSTANTIATE ALLEGATIONS OF CHILD ABUSE OR NEGLECT**

The Indiana Department of Child Services (DCS) local office in local office County classified child abuse and/or neglect allegations as substantiated in assessment #insert assessment number, approved on insert date against:

name of perpetrator  
address of perpetrator

Because you\* were identified as a perpetrator, you were notified of the classification. This letter is in response to your request for an administrative review of the DCS decision to substantiate against you. DCS has reversed and reclassified the following allegation(s) against you as **UNSUBSTANTIATED**:

<b>ALLEGATION</b>	<b>CHILD VICTIM</b>
<b>Physical Abuse</b>	<b>Insert initials of victim(s) or NONE</b>
<b>Sexual Abuse</b>	<b>Insert initials of victim(s) or NONE</b>
<b>Neglect</b>	<b>Insert initials of victim(s) or NONE</b>

The record of the substantiated allegations will be removed from the Child Protection Index (CPI). A summary of the DCS assessment concerning the allegations is attached as State Form 113(CW 311), *Investigation of Child Abuse or Neglect*.

**You have no right to administrative appeal for any allegation classified as unsubstantiated.**

\*If DCS records indicate that the person identified as a perpetrator is under the age of eighteen (18), a copy of this notice is being sent to the person's parent, court appointed guardian or other legal representative. Any request by a person under age eighteen (18) for administrative appeal must be signed by the minor person's parent, court appointed guardian or other legal representative.

Attachment: State Form 113 (CW311), *Investigation of Child Abuse or Neglect*-Approved (including completion of the "Edits Due to Appeal" section)

*Section C, DCS Policy 2.2. Use the following language to notify an alleged perpetrator (NOT a licensed resource parent, child care worker or DCS employee) that an assessment is being returned for further assessment following administrative review.*

Date mailed/hand delivered: insert date

**NOTICE OF ADMINISTRATIVE REVIEW DECISION  
REPORT RETURNED FOR FURTHER ASSESSMENT**

The Indiana Department of Child Services (DCS) local office in local office County classified allegations as substantiated in assessment #insert assessment number, approved on Insert Date against:

name of perpetrator  
address of perpetrator

Because you\* were identified as a perpetrator, you were notified of the classification. This letter is in response to your request for an administrative review of the assessment decision. DCS has returned the report to DCS for further assessment. DCS will send you a copy of an updated State Form 113 (CW311) once it is complete and notify you if you have a right to administrative review once a decision has been reached.

**You have no right to administrative review or appeal at this time.**

\*If DCS records indicate that the person identified as a perpetrator is under the age of eighteen (18), a copy of this notice is being sent to the person's parent, court appointed guardian or other legal representative. Any request by a person under age eighteen (18) for administrative appeal must be signed by the minor person's parent, court appointed guardian or other legal representative.

Attachment: none

**Section D, DCS Policy 2.2. Use the following language to notify a perpetrator (NOT a licensed resource parent, child care worker or DCS employee) when a report previously returned for further assessment has been completed and the substantiation was upheld.**

Date mailed/hand delivered: insert date

**NOTICE OF ADMINISTRATIVE DECISION AFTER FURTHER ASSESSMENT**

The Indiana Department of Child Services (DCS) local office in local office County classified allegations as substantiated in assessment #insert assessment number, approved on Insert Date against:

name of perpetrator  
address of perpetrator

Because you were identified as an alleged perpetrator, you were notified of the classification. The report was returned for further assessment. After further assessment, allegations against the following person remain substantiated:

name of perpetrator  
address of perpetrator

<b>ALLEGATION(S) SUBSTANTIATED</b>	<b>VICTIM</b>
<b>Physical Abuse</b>	<b>Insert initials of victim(s) or NONE</b>
<b>Sexual Abuse</b>	<b>Insert initials of victim(s) or NONE</b>
<b>Neglect</b>	<b>Insert initials of victim(s) or NONE</b>

A summary of the DCS decision concerning the allegations is attached as State Form 113(CW 311), *Investigation of Child Abuse or Neglect*.

For any allegation substantiated, you\* have the right to request administrative review of the decision by DCS to substantiate an allegation. To do so, you must complete and submit the attached form entitled State Form 54775, *Request for Administrative Review of Child Abuse/Neglect Substantiation*. Your request must be received by DCS within fifteen (15) calendar days of the date of this letter. The attached form includes instructions and a summary of the administrative review process.

If you have any questions, please contact the DCS local office in local office County at insert general office phone number.

\*If DCS records indicate that the person identified as a perpetrator is under the age of eighteen (18), a copy of this notice is being sent to the person's parent, court appointed guardian or other legal representative. Any request by a person under age eighteen (18) for administrative appeal must be signed by the minor person's parent, court appointed guardian or other legal representative.

Attachments:

State Form 113 (CW311), *Investigation of Child Abuse or Neglect- APPROVED (including completion of the "Edits Due to Appeal" section)*

State Form 54775, *Request for Administrative Review of Child Abuse/Neglect Substantiation*

**Section E, DCS Policy 2.2. Use the following language to notify a perpetrator (NOT a licensed resource parent, child care worker or DCS employee) when the perpetrator's request for administrative review is denied.**

Date mailed/hand delivered: insert date

### **NOTICE OF DENIAL OF ADMINISTRATIVE REVIEW**

The Indiana Department of Child Services (DCS) local office in local office County classified allegations of child abuse and/or neglect, in assessment #insert assessment number, approved on insert date against:

name of perpetrator  
address of perpetrator

Because you\* were identified as a perpetrator, you were notified of the classification. This letter is in response to your request for an administrative review of the assessment. Your request for administrative review has been **DENIED** for the following reason(s):

Your request for review was received after the deadline for requesting a review on insert received date .

A court has determined that a child is a child in need of services, based on facts presented to the court that are consistent with the facts and conclusions stated in the report; and

DCS approved the substantiated report on/after the date of the court's determination:  
Insert Date.

A court having jurisdiction over a child in need of services case has determined that;

The report of child abuse was properly substantiated; or

Child abuse or neglect occurred; or

You were found by the court to be a perpetrator of child abuse or neglect.

Criminal charges resulted in a conviction against you (or a court made a true finding in a juvenile delinquency case) and the facts that provided a necessary element for the conviction (or true finding) also provided the basis for the substantiated report.

**You have the right to request reconsideration of the denial of your request for administrative review.** To do so, you must submit your request in writing, within fifteen (15) days of the date this letter is mailed. You must send your request to the following address:

DCS local office in DCS County County  
Insert street address, city, IN, ZIP

In your request, you must state the reason(s) you believe you are entitled to administrative review. If you do not request reconsideration, you waive any further right to administrative review or appeal of the decision.

If you have any questions, please contact the following DCS local office in DCS County County at insert DCS local office phone #.

**You have no right to an administrative appeal hearing at this time.**

\*If DCS records indicate that the person identified as a perpetrator is under the age of eighteen (18), a copy of this notice is being sent to the person's parent, court appointed guardian or other legal representative. Any request by a person under age eighteen (18) for administrative appeal must be signed by the minor person's parent, court appointed guardian or other legal representative.

Attachment: none

**Section F, DCS Policy 2.3. Use the following language to notify a child care worker or a foster parent when DCS intends to approve the substantiation against him/her and notify him/her of the date, time and place of the administrative review that will occur prior to final approval of the decision.**

Date mailed/hand delivered: insert date

**NOTICE OF INTENT TO SUBSTANTIATE ALLEGATIONS OF CHILD ABUSE OR NEGLECT BY A CHILD CARE WORKER OR LICENSED RESOURCE PARENT**

The Indiana Department of Child Services (DCS) local office in local office County investigated a report of suspected child abuse or neglect. DCS intends to substantiate the allegations against:

name of perpetrator  
address of perpetrator

as the person responsible for the following allegations of child abuse and/or neglect:

ALLEGATION	VICTIM
Physical Abuse	Insert initials of victim(s) or NONE
Sexual Abuse	Insert initials of victim(s) or NONE
Neglect	Insert initials of victim(s) or NONE

A draft of the assessment summary, State Form 113(CW 311), *Investigation of Child Abuse or Neglect*, is attached to this notice for your convenience.

Once the assessment is approved, you will be identified as a perpetrator on the Child Protection Index. DCS may also notify your employer or an appropriate licensing agency within 48 hours of approval of the substantiated classification in assessment #insert assessment number.

Because you have been identified as a child care worker or licensed resource parent, before the assessment is finalized, you have the opportunity to participate in an administrative review of the decision with a DCS administrator who was not involved in making the recommendation to substantiate. This meeting is to allow you the opportunity to respond to the allegations and give your own account of the incident. You may have an attorney or other representative take part in the meeting and you may provide written statements and documentation. You will not be permitted to present or cross-examine witnesses. The meeting will be held by insert name and title at the following date, time and place:

Date and Time: insert date and time  
Location: insert address

The review meeting may be rescheduled for good cause. If you need to reschedule, call the person conducting the review meeting as soon as possible at insert phone number.

After the review meeting, you will be notified of the DCS decision and any rights that you might have at that time to an administrative appeal hearing, if applicable. The review meeting will occur regardless of whether or not you participate. However, you will be notified of the decision whether or not you choose to attend.

**You may submit information and/or participate in the administrative review meeting. You have no right to request an administrative appeal hearing at this time.**

Attachment: State Form 113 (CW311), *Investigation of Child Abuse or Neglect*- DRAFT

**Section G, DCS Policy 2.3. Use the following language to notify a child care worker or a foster parent that the assessment is being returned for further assessment following administrative review.**

Date mailed/hand delivered: insert date

**NOTICE OF ADMINISTRATIVE REVIEW DECISION TO FURTHER ASSESS  
ALLEGATIONS AGAINST A CHILD CARE WORKER OR LICENSED RESOURCE  
PARENT**

This letter is to inform you of the outcome of the child care worker/foster parent assessment review meeting, held on Insert date at Insert meeting location, relating to assessment # Insert assessment number. The meeting was conducted by Insert name and title. DCS records indicate that you did/did not participate in that meeting. The assessment and any information you submitted were carefully considered. As a result of the review, DCS has returned the report for further consideration. You will be notified of the DCS decision when the assessment is complete.

**You have no right to request an administrative appeal hearing at this time.**

Attachment: none.

*Section H, DCS Policy 2.3. Use the following language to notify an alleged perpetrator, who is a licensed resource parent or child care worker, when allegations have been unsubstantiated (including the DCS decision to unsubstantiate following further assessment).*

Date mailed/hand delivered: insert date

**NOTICE OF DCS DECISION TO UNSUBSTANTIATE ALLEGATIONS OF CHILD ABUSE OR NEGLECT**

The Indiana Department of Child Services (DCS) local office in local office County notified you of its intent to classify allegations of child abuse and/or neglect in assessment #insert assessment number, as substantiated against:

name of alleged perpetrator  
address of alleged perpetrator

Because you were identified as an alleged perpetrator, you were notified of the intent to substantiate. Following a review of information included in the assessment, DCS has decided to unsubstantiate the allegations. A summary of the DCS decision concerning the allegations is attached as State Form 113(CW 311), *Investigation of Child Abuse or Neglect*.

**You have no right to administrative appeal of any allegation classified as unsubstantiated.**

Attachment: State Form 113 (CW311), *Investigation of Child Abuse or Neglect-Approved*

*Section I, DCS Policy 2.3. Use the following language to notify an employer when allegations against an employee have been substantiated. Also use this language to update an employer when allegations against the employee are subsequently unsubstantiated.*



Date mailed/hand delivered: insert date

**NOTICE TO EMPLOYER OF A REPORT OF CHILD ABUSE OR NEGLECT ASSESSMENT DECISION**

This letter is to inform you that the Indiana Department of Child Services (DCS) substantiated allegations naming name of perpetrator employee as the person responsible for child abuse and/or neglect.

*(Mark only the option that applies)*

The decision to substantiate made by DCS may be subject to Administrative Appeal in accordance with applicable law.

OR

As an employer, you were previously notified that the person identified above was substantiated as a result of a report of child abuse and/or neglect assessed by DCS. This is being sent to update that information and inform you that the allegations against name of perpetrator employee have been unsubstantiated.

In accordance with confidentiality laws and rules, DCS cannot release any other information to you without a signed authorization of the individual identified as a perpetrator of child abuse or neglect, unless you are entitled to receive additional information under Indiana law. If you are a child caring institution, group home, private security facility or child placing agency licensed by DCS and you believe you are entitled to receive additional information you may submit your request, with supporting documentation, to the DCS Central Office Licensing Unit for consideration. Any other request for further information concerning this assessment must be directed to the DCS local office in local office county County.

If this notice is addressed to a facility licensed by either DCS or the Indiana Family and Social Services Agency (FSSA), a copy of this information is also being sent to the appropriate licensing unit.

Attachment: None

*Section J, DCS Policy 2.3. Use the following language only for allegations substantiated prior to 10/15/06, to notify a child care worker perpetrator of the results of agency review completed as a courtesy after a child care worker perpetrator requested agency review of the decision to substantiate.*

Date mailed/hand delivered: insert date

**NOTICE OF A CHILD CARE WORKER (CCW) ASSESSMENT REVIEW DECISION FOR AN ASSESSMENT CLOSED PRIOR TO OCTOBER 15, 2006.**

The Indiana Department of Child Services (DCS) local office in local office County classified allegations as substantiated in assessment #insert assessment number (legacy number ), approved on Insert Date against:

name of perpetrator  
address of perpetrator

You are (1) defined by DCS Policy to be a child care worker, AND (2) allegations have been substantiated against you which identified you as a perpetrator of child abuse and/or neglect in an assessment that was closed prior to October 15, 2006, AND (3) you requested a review of the decision to substantiate in assessment #insert assessment number.

This letter is to inform you of the outcome of the courtesy review. A summary of the DCS decision concerning the allegations is attached as State Form 113(CW 311), *Investigation of Child Abuse or Neglect*.

**You have no right to administrative appeal.**

Attachment: State Form 113 (CW311), *Investigation of Child Abuse or Neglect*- Approved (including completion of the "Edits Due to Appeal" section)

*Section K, DCS Policy 2.3. Use the following language only for allegations substantiated prior to 10/15/06, to notify a licensed resource parent of an agency review decision completed prior to denial or revocation of a foster home license based on the substantiation.*

Date mailed/hand delivered: insert date

**NOTICE OF AN ADMINISTRATIVE REVIEW DECISION FOR AN ASSESSMENT CLOSED PRIOR TO OCTOBER 15, 2006**

The Indiana Department of Child Services (DCS) local office in local office County classified allegations as substantiated in assessment #insert assessment number (legacy number ), approved on Insert Date against:

name of perpetrator  
address of perpetrator

You are (1) a Licensed Resource Parent or have applied to be a Licensed Resource Parent AND (2) allegations have been substantiated against you which identified you as a perpetrator of child abuse and/or neglect in an assessment that was closed prior to October 15, 2006, in assessment #insert assessment number.

This letter is to inform you of the outcome of a DCS courtesy review of the decision to substantiate. A summary of the DCS decision concerning the allegations is attached as State Form 113(CW 311), *Investigation of Child Abuse or Neglect*.

**You have no right to administrative appeal.**

Attachment: State Form 113 (CW311), *Investigation of Child Abuse or Neglect- Approved (including completion of the "Edits Due to Appeal" section)*

*Section L, DCS Policy 2.4. Use the following language to notify a DCS employee that the employee has been substantiated against, and administrative review will be conducted or following administrative review to inform the employee that the case is being returned for further assessment or that the allegations have been unsubstantiated.*

Date mailed/hand delivered: insert date

**NOTICE OF ASSESSMENT OUTCOME FOR A DEPARTMENT OF CHILD SERVICES (DCS) EMPLOYEE**

The Indiana Department of Child Services (DCS) substantiated allegations of child abuse and/or neglect against you, in assessment #insert assessment number, approved on Insert Date. A summary of the DCS decision concerning the allegations is attached as State Form 113/CW 311, *Investigation of Child Abuse or Neglect*.

***Use the following paragraph before administrative review:***

You will receive an administrative review of the decision. The review will be conducted by an Administrative Review Team within fifteen (15) days of the date that the substantiation was approved. You may submit appropriate information you would like to be considered during the review to feel is appropriate to Insert person's name and email address. You will be advised in writing of the Administrative Review Team decision. If substantiation of any allegation is upheld, you will be advised of your right to administrative appeal, if any.

***Use the following paragraph after the administrative review (do not use this paragraph if the substantiation is upheld):***

This letter is to inform you of the outcome of the Administrative Review Team's administrative review of the decision to substantiate against you. The meeting was conducted on Insert date. The assessment and any information you submitted were carefully considered.

As a result of the review:

- DCS has returned the report for further consideration. You will be notified of the DCS decision when the assessment is complete. During the completion of the assessment, your name will continue to appear on the Child Protection Index, or
- DCS has decided to unsubstantiate the allegations and remove your name from the Child Protection Index (CPI).

**You have no right to an administrative appeal hearing at this time.**

Attachment: State Form 113 (CW311), *Investigation of Child Abuse or Neglect- Approved*  
(include any appropriate edits due to appeal)

*Section M, DCS Policy 2.2 and 2.5. Use the following language when (1) an alleged perpetrator requested administrative review or appeal prior to October 1, 2010, AND (2) the request was stayed due to pending criminal charges or a pending Child in Need of Services (CHINS) case by a DCS local office or Regional Manager (RM), AND (3) a denial under Section E of this tool is not applicable, AND (4) the Stay has not yet been lifted and the original request addressed.*

Date mailed/hand delivered: insert date

**NOTICE OF DEADLINE TO REACTIVATE ADMINISTRATIVE REVIEW OR APPEAL REQUEST**

The Indiana Department of Child Services (DCS) local office in local office County classified allegations as substantiated in assessment #insert assessment number (legacy number ), approved on Insert Date against:

name of perpetrator  
address of perpetrator

You requested an Administrative Review Appeal to contest the DCS decision to substantiate the allegations. Your request was Stayed (placed on hold) because the facts and circumstances of the assessment were being considered in a pending Court action in case number insert the criminal or CHINS case number by a Court.

Because the Court may no longer have jurisdiction over the case resulting in the Stay of your request, you may now have the right to pursue your original request. To reactivate your request, you must present a copy of this letter with the final Order of the Court to the following DCS office:

Insert DCS local office address

Your request to reactivate the Administrative Review or Appeal must be submitted in writing within fifteen (15) days of the date of this letter. If the Court continues to have jurisdiction over the case listed above, your request to reactivate must be submitted, with the final Court Order, within fifteen (15) days of the date that the Court ends its jurisdiction over the case.

Attachments: None.