

REGIONAL ABUSE AND MEDICAL SPECIALISTS POLICY, PROTOCOL, AND GUIDANCE

History and Purpose

The Regional Abuse and Medical Specialists (RAMS) are a team of social workers working between the NC Child Medical Evaluation Program (CMEP) and state child welfare in NC. The goal of the team is to improve safety and well-being outcomes for a specific subset of children involved with CPS assessments. RAMS social workers work with counties starting at initiation and ending with the case decision.

RAMS social workers provide live consultation to county CPS for cases identified as high risk for abuse and neglect fatalities per the Commission to Eliminate Child Abuse and Neglect Fatalities report in 2016. Specific groups include infants and children up to 3 years of age. RAMS assist with consultation that permits the county CPS team to gain real-time information from the treating medical systems. Additional children identified as vulnerable and at risk of repeat maltreatment as well as fatality were also included so as to improve the CPS understanding of medically complex issues.

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Legal Basis

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[§ 7B-302](#). Assessment by director; military affiliation; access to confidential information; notification of person making the report.

(a) When a report of abuse, neglect, or dependency is received, the director of the department of social services shall make a prompt and thorough assessment, using either a family assessment response or an investigative assessment response, in order to ascertain the facts of the case, including collecting information concerning the military affiliation of the parent, guardian, custodian, or caretaker of the juvenile alleged to have been abused or neglected, the extent of the abuse or neglect, and the risk of harm to the juvenile, in order to determine whether protective services should be provided or the complaint filed as a petition. When the report alleges abuse, the director shall immediately, but no later than 24 hours after receipt of the report, initiate the assessment. When the report alleges neglect or dependency, the director shall initiate the assessment within 72 hours following receipt of the report. When the report alleges abandonment of a juvenile or unlawful transfer of custody under G.S. 14-321.2, the director shall immediately initiate an assessment. When the report alleges abandonment, the director shall also take appropriate steps to assume temporary custody of the juvenile, and take appropriate steps to secure an order for nonsecure custody of the juvenile. The assessment and evaluation shall include a visit to the place where the juvenile resides, except when the report alleges abuse or neglect in a child care facility as defined in Article 7 of Chapter 110 of the General Statutes. When a report alleges abuse or neglect in a child care facility as defined in Article 7 of Chapter 110 of the General Statutes, a visit to the place where the juvenile resides is not required. When the report alleges abandonment, the assessment shall include a request from the director to law enforcement officials to investigate through the North Carolina Center for Missing Persons and other national and State resources whether the juvenile is a missing child.

(a1) All information received by the department of social services, including the identity of the reporter, shall be held in strictest confidence by the department, except under the following circumstances:

(1) The department shall disclose confidential information to any federal, State, or local government entity or its agent, or any private child placing or adoption agency licensed by the Department of Health and Human Services, in order to protect a juvenile from abuse or neglect. The disclosure of confidential information pursuant to this subdivision shall include sharing information with the appropriate military authority if the director finds evidence that a juvenile may have been abused or neglected and the parent, guardian, custodian, or caretaker of the juvenile alleged to have been abused or neglected has a military affiliation. Any confidential information disclosed to any federal, State, or local government entity or its agent under this subsection shall remain confidential with the other entity or its agent and shall only be redisclosed for purposes directly connected with carrying out that entity's mandated responsibilities.

(e) In performing any duties related to the assessment of the report or the provision or arrangement for protective services, the director may consult with any public or private agencies or individuals, including the available State or local law enforcement officers who shall assist in the assessment and evaluation of the seriousness of any report of abuse, neglect, or dependency when requested by the director. The director or the director's representative may make a written

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demand for any information or reports, whether or not confidential, that may in the director's opinion be relevant to the assessment or provision of protective services. Upon the director's or the director's representative's request and unless protected by the attorney-client privilege, any public or private agency or individual shall provide access to and copies of this confidential information and these records to the extent permitted by federal law and regulations. If a custodian of criminal investigative information or records believes that release of the information will jeopardize the right of the State to prosecute a defendant or the right of a defendant to receive a fair trial or will undermine an ongoing or future investigation, it may seek an order from a court of competent jurisdiction to prevent disclosure of the information. In such an action, the custodian of the records shall have the burden of showing by a preponderance of the evidence that disclosure of the information in question will jeopardize the right of the State to prosecute a defendant or the right of a defendant to receive a fair trial or will undermine an ongoing or future investigation. Actions brought pursuant to this paragraph shall be set down for immediate hearing, and subsequent proceedings in the actions shall be accorded priority by the trial and appellate courts.

[10A NCAC 70A .0113](#) CONFIDENTIALITY OF COUNTY DSS PROTECTIVE SERVICES RECORDS

(b) The county director in carrying out his duties may share information and a summary of documentation from the case record without a court order with public or private agencies or individuals that are being utilized to provide or facilitate the provision of protective services to a child

Case Criteria for RAMS Consultation

Protocol—What you must do	Guidance—How you should do it
<p>Counties must contact RAMS for a consultation for any case screened in for assessment that meets any of the following criteria, regardless of whether the screening decision is abuse or neglect:</p> <ul style="list-style-type: none"> • A child is 3 and under AND there are concerns for unexplained/poorly explained injuries • A child is 3 and under AND there is concern for a sexually transmitted infection • A child is 3 and under AND another child who lives in the home has died as a result of suspected abuse or neglect • Any case with a concern for medical child abuse (Munchausen by Proxy) • Any case accepted for medical neglect with a medically complex child who: <ul style="list-style-type: none"> ○ Requires subspecialty care by 2 or more specialists OR ○ Receives a second report for medical neglect within 6 months regardless of the case outcome OR ○ Requires devices to sustain their function such as a tracheostomy or g-tube 	<p>Incidents would not be considered poorly explained or unexplained in cases where the discipline OR action by the caretaker explains the child’s injury and the reporting medical providers state that the mechanism of injury is plausible for having caused the injury. If after initiation, the child is determined to not have a current injury, the RAMS consultant may discontinue the consultation. The determination of this would be made by the RAMS consultant and their supervisor, not the county.</p> <p>During the course of an assessment for sexual abuse, if a child less than or equal to 3 years of age is identified as having a Sexually Transmitted Infection (STI), the RAMS team should be consulted.</p> <p>Medical Child Abuse (MCA) is oftentimes not identified at the time of the initial report. Allegations that may lead to MCA could resemble the following:</p> <ol style="list-style-type: none"> (1) caretaker withholding or providing false information to medical providers, (2) exaggeration of symptoms, (3) neglecting the child’s care or medical recommendations that would improve the child’s health, (4) an intentional act by the caretaker that impacts the child’s health resulting in the need for medical treatment (5) the caretaker coaching the child about the information they should give to medical providers about their symptoms or illness. <p>The list above is not all inclusive and the RAMS should be contacted in cases where there is a question about the need for their consultation.</p>

Process for RAMS Consultation

Protocol—What you must do	Guidance—How you should do it
<p><u>Intake Process</u> The RAMS Team <u>does not</u> provide consultation for Intake screening. The report <u>must</u> be screened in for assessment by the local county child welfare agency and meet the criteria prior to contacting the RAMS team.</p> <p>As local child welfare agencies are enrolled in the new statewide Intake System through the Child Welfare Information System (CWIS), screened in cases that meet the criteria for a RAMS consultation will generate a pop-up/button for the local Intake worker to select. This will generate an email to the RAMS with a copy of the intake report.</p> <p>The local Intake Supervisor must notify the RAMS team/consultant in addition to the CWIS system notification. The Intake Supervisor must contact the assigned Child Protective Services Supervisor about the need for RAMS consultation in cases where a different supervisor is providing oversight for the assessment case. The Child Protective Services Supervisor is responsible for contacting the RAMS team, via phone call, prior to the initiation of the case.</p> <p><u>Pre-Initiation Consult</u> The Child Protective Services Supervisor must contact the RAMS team/consultant prior to case initiation. However, if there are circumstances that prevent the county from accessing the RAMS consultant, the county should document their attempts to reach the RAMS consultant, proceed with their initiation, and the RAMS consultant will reach out to the county that same day.</p> <p><u>Initial and Ongoing Consultation</u> Upon initiation of the case, the CPS Supervisor must contact the RAMS consultant prior to the implementation of the initial safety plan with the family.</p>	<p>Each county should refer to their specific RAMS consultation process map. The process map is a visual aid for the assessment phase of a case which explains how RAMS fit into the county process beginning at intake, through case decision.</p> <p>When a screened in report meets the criteria for a RAMS consultation, the CWIS Intake system will generate a pop-up/button for the local Intake worker to select. Even though this will generate an email to the RAMS team inbox with a copy of the intake report, it is still expected that the county CPS supervisor contact the RAMS consultant for their county, or the specified on-call RAMS consultant.</p> <p>The RAMS role is to support, guide and mentor county supervisors. The county supervisor may choose to include their assessment worker in the pre-initiation conference if they feel this is helpful.</p> <p>If the CPS Supervisor is unable to reach a RAMS consultant by phone, the CPS supervisor must email their regional RAMS consultant. The regional RAMS consultant is able to answer email during regular business hours and if the RAMS consultant is out of office, their email will have contact for the covering RAMS consultant. The inability to connect with the RAMS consultant by phone should not delay initiation or safety planning by the county.</p> <p>The RAMS social workers are supervised by a Child Abuse Pediatrician but do not provide medical consultation or advice on cases.</p>

Process for RAMS Consultation

Protocol—What you must do	Guidance—How you should do it
<p>The RAMS team will provide guidance and support throughout the life of the assessment. The CPS supervisor must meet with the RAMS consultant a minimum of every other week during an open assessment. Reasons to consult the RAMS more frequently can include but are not limited to, if there has been a change in circumstances that impact safety. The CPS assessment worker can be included in these meetings. As the RAMS function to coach, mentor and guide the county in gathering information to reach the most appropriate safety plan and case decision, the RAMS recommendations and suggestions are contributions to the assessment. The RAMS recommendations and suggestions do not serve as a complete guide to assessments. The county is expected to follow policy for CPS Family and Investigative Assessments as per the NC child welfare policy manual.</p>	

Escalation Process for Consultation Conflicts

Protocol—What you must do	Guidance—How you should do it
<p>Per NC G.S. § 108A-1 and NC G.S. § 7B-300 North Carolina Child Welfare is a state-supervised, county-administered system. The RAMS are a service partnership between the CMEP and the State Child Welfare section. There may be times when the RAMS and the local county Child Welfare agency do not agree. In cases where the RAMS team/consultant and the county disagree about plans related to the safety of children or policy interpretation, the following escalation process will be followed:</p> <ol style="list-style-type: none"> 1. The RAMS team/consultant will notify the county CPS supervisor of the need to meet to address the concerns with the current safety plan. The county CPS supervisor must notify the next level of management within the county to attend the meeting. 2. The RAMS consultant will contact the RAMS Manager to discuss the case and share where there are differences in the safety assessment/plan with the county. 3. RAMS staff will coordinate with the county to schedule a meeting with the RAMS consultant, RAMS Manager, Regional Child Welfare Consultant (RCWC), county CPS Supervisor and their manager as soon as possible, but this will always occur the same day as the safety concern was identified. 4. If safety concerns remain after the initial meeting, the RCWC will include the county director in the discussion about safety concerns. The RCWC will notify their manager that the safety concerns have not been resolved and will coordinate a meeting with the county staff, including the director, RAMS manager, the RCWC, and RCWC manager in attendance the same day the concern was identified. 5. The RCWC team is responsible for addressing any practice or safety concerns with the county in accordance with current child welfare statute and policy. The RAMS team can be available if either the RCWC team or county request their assistance. The RCWC team will follow their protocol in documenting and addressing these concerns. 	<p>The escalation process is an important step when counties and RAMS do not agree about plans related to child safety. Counties should have developed a specific escalation process during onboarding with the RAMS.</p> <p>The escalation process should take place the same day a disagreement is identified. In an effort to provide children with immediate safety and prevent further harm, next level management in the county, including the director, RAMS next level of management, and the RCWC should meet to discuss case specifics around safety.</p> <p>RAMS are State-level consultants who support counties in making policy-driven decisions for child safety and consider medical guidance as a part of the decision-making process. The RAMS are social workers and do not provide medical consultation or advice, but are supervised by a Child Abuse Pediatrician. The county director is ultimately responsible for the safety and well-being of children in their county.</p>

Escalation Process for Consultation Conflicts

Protocol—What you must do	Guidance—How you should do it
<p>Per NC G.S. § 7B-300 the County Child Welfare Director is responsible for all safety/case decisions, and any policy questions or concerns must be sent to the Regional Child Welfare Consultant.</p>	

Required Documentation and Forms

Protocol—What you must do	Guidance—How you should do it
<p>The county must provide RAMS with:</p> <ul style="list-style-type: none"> • Screened-in intake report • Complete demographic information for the child and family • Any Safety Assessments, risk assessments or tools completed with the family • Any requested documentation <p>If applicable to the case, the county must also provide RAMS with:</p> <ul style="list-style-type: none"> • Photos of injuries • CME Reports • Medical records 	<p>RAMS consultant may request any other documents generated during the assessment phase such as risk assessments, Strengths & Needs, and the case decision summary.</p> <p>RAMS may also request medical records for the case. The RAMS consultants are social workers and not medical providers. The RAMS consultants are not able to interpret medical records for the county. Instead, the RAMS consultants are able to assist the county with generating questions for medical teams to assist with county understanding of needed items for safety planning.</p>

Closure of the RAMS Consultation Process

Protocol—What you must do	Guidance—How you should do it
<p>The RAMS team/consultant will provide consultation prior to the county’s case decision staffing. Prior to a case decision being made by the county, consultation <u>must</u> be had with the RAMS team. If the county’s case decision changes between consultation with RAMS and the decision date, consultation should occur again with the RAMS team. Any case the RAMS teams has consulted on, the case decision must be discussed with the RAMS team prior to the case decision date and entry into the system. If there is a disagreement, the escalation process should be followed to resolve. Once a case decision has been made, the RAMS team will cease consultation services. The RAMS team is designed to provide coaching and mentorship for CPS assessment teams at the county level. The RAMS do not provide case consultation for In-Home or Permanency cases.</p>	