



nevada

INDICATOR NAME: Family Violence Indicator

SETTING CRITERIA: IV-D --
Good Cause status (TANF)
IV-D discretion

IV-D & Non IV-D --
Self-report (Written for non IV-D)

ELIGIBLE PEOPLE: Current --
Case-level indicator

Future --
Participant-level indicator

IMPACT: Sends FV Indicator to the FCR

DURATION: Indefinite

REMOVAL CRITERIA: Good Cause --
End of Good Cause status

Other Bases --
Victim request (Written)

OVERRIDE: State-specific components not yet developed

The Domestic Violence section of the Nevada child support policy manual appears below. The policy statement defines domestic violence, sets out action to be taken when a person informs a IV-D worker of possible violence, and outlines the types of protections afforded family violence victims.

**Nevada Policy
October 20, 1998**

212 DOMESTIC VIOLENCE

A. WHAT IS DOMESTIC VIOLENCE?

Domestic violence includes acts of physical violence (slapping, punching, choking, etc.); threatening, coercive or harassing conduct; interference with the personal liberty of the victim; or forcible entry of the victim's residence against her will. A course of conduct intended to harass, such as arson, trespassing, larceny, destruction of private property, carrying concealed weapon without a permit and stalking may also be considered as domestic violence.

B. PERIOD SCREENING BY WELFARE DIVISION

The Welfare Division is required to periodically evaluate applicant[s]/recipients to identify victims of domestic violence. Evaluation is the responsibility of IV-A caseworkers by having the applicant/recipient review and sign Form 2678-EG (Exhibit 200-52) at initial application and redetermination. All welfare, program area and district attorney offices are requested to have brochures, posters and other informational material relating to domestic violence and local resources available (Exhibit 200-53) in their lobbies, restrooms, training rooms, etc.

C. DISCLOSURE OF DOMESTIC VIOLENCE

Any disclosure of domestic violence is voluntary. A custodial parent may disclose violence at any time, including but not limited to, during the initial interview with the IV-A caseworker or during the child support orientation when discussing good cause. If a custodial parent discloses domestic violence to a IV-D caseworker, the IV-D caseworker

must screen to determine if the disclosure is a current or past domestic violence situation and how the situation affects the custodial parent’s ability to participate in the child support program.

There are circumstances when requiring a family member to comply with child support requirements may endanger or threaten the physical safety of the household. If it is determined a member of the household would be endangered, temporarily waiving participation in child support activities may be necessary.

The following guidelines are to be used when disclosure of domestic violence occurs:

SITUATION	ACTION/RESPONSIBILITY
Family currently experiencing physical abuse and/or is fleeing from perpetrator.	<p>Public assistance case -- IV-D caseworker requests the custodial parent meet with a division social worker for an immediate assessment and potential referral/case management of a domestic violence situation. Advise custodial parent of the Confidential Address Program (CAP) administered through the Secretary of State’s office. Discuss good cause as an option (M.S. 204.2) for custodial parent.</p> <p>Nonpublic assistance case -- IV-D caseworker must provide custodial parent information on local domestic violence groups and community resources. Advise custodial parent of the Confidential Address Program (CAP) administered through the Secretary of State’s office. Discuss whether request for child support services should continue if perpetrator is the noncustodial parent.</p>
Claiming barriers to Employment & Training or Welfare eligibility activities	Refer custodial parent to their IV-A caseworker.
Claiming “Good Cause” to not cooperate with CSEP	IV-D caseworker must follow procedures in M.S. 204.2 for good cause/cooperation.
No immediate danger or barriers	Inform custodial parent of their local domestic violence community program.

Prior domestic violence occurrence may affect a custodial parent's current ability to cooperate with program requirements. Flexibility and sensitivity are required when working with domestic violence victims regarding program requirements. When the IV-D caseworker is unsure how to proceed with a past domestic violence case, the IV-D caseworker may consult with a social worker from the nearest Welfare District Office. The IV-D caseworker must explore alternative procedures to obtain information and documents including reasonable extending time limits if needed, and documenting the rationale used to make decisions.

D. CONFIDENTIALITY

The Welfare Division must not disclose to any person, other than the victim, a determination has been made on domestic violence. However, the Welfare Division may disclose the information to the Secretary of Health and Human Services or their designee for purposes of including information in the Federal Parent Locator Service (FPLS). Nevada's State Case Registry (SCR) will extract information on both parents such as name, Social Security Number, date of birth and case identification number. This information will be transmitted to the Federal Case Registry (FCR). The FCR is part of the FPLS and will contain basic information about persons who owe or who are owed child support. This information will be shared with other state child support agencies with the case.

If the IV-D caseworker is made aware of domestic violence in a family, the information provided to the FCR on the family may be kept confidential by the IV-D caseworker using the family violence indicator. When the family violence indicator is set, other agencies involved with the case will not have access to information on custodial parent and child(ren) involved.

Information concerning individuals contained in support enforcement cases will NOT be disclosed to anyone not directly involved in the administration of the program (45 CFR 303.212 Safeguarding Information).

The Uniform Interstate Family Support Act of 1996 (UIFSA) requires identifying information about the custodial parent and child (name, address, social security number,

etc.) be provided to the out-of-state child support office assisting Nevada in the establishment of paternity or the collection of child support. Before sending a UIFSA transmittal, contact the custodial parent to determine if there is a concern with address disclosure.

NRS 130.312 provided for confidentiality in instances where there is a serious risk of domestic violence or child abduction. A tribunal can order the address of the child or party to other identifying information not be disclosed if the health, safety or liberty of a part[y] or child would be unreasonably put at risk.

When a caseworker receives a request for information on a noncustodial parent or custodial parent, the caseworker must:

1. Identify the individual(s) and purpose for the information.
2. Determine type of information being requested.
 - a. If the request is for identifying information such as name, address, Social Security Number, case or IRS intercept information, deny the request.
 - b. If the request is for any type of court documents, release only the docket number and refer the individual to the appropriate county clerk's office. Certain court documents such as orders, bench warrants, etc., are classified as public records and available to the public.

* * *

Materials

Below is a statement given to each person who informs the Nevada IV-D agency that there may be a safety concern involving another person who has a role in his/her child support case.

NEVADA STATE WELFARE DIVISION

SUPPORT ENFORCEMENT MANUAL
MTL 7/98 17 Aug 98
EXHIBIT 200-56

Case Name _____ SSN _____

**NEVADA STATE WELFARE DIVISION
DOMESTIC VIOLENCE AWARENESS**

Domestic violence is defined as verbal, sexual, emotional, psychological and/or physical abuse between or among family members or intimate partners. Domestic violence is a problem, both in Nevada and the United States.

A *batterer* may be a person who:

- is very jealous[.]
- has an explosive temper[.]
- is controlling of their partner's behavior[.]
- has thrown things at their partner[.]

A *battered* person may be someone who:

- is frightened of their partner's temper[.]
- has been hit, kicked or shoved when their partner is jealous or angry[.]
- makes decisions about activities and friends out of fear of their partner's reaction[.]

If you or someone you know is in a domestic violence situation, help is available. There are people in your community who provide support and assistance.

To receive Temporary Assistance for Needy Families (TANF), you are required to cooperate with the employment and training program (known as NEON, New Employees of Nevada)[.] unless otherwise exempt[.] and [with] the Child Support Enforcement program. If you believe participating in these programs may put you or your family at risk of abuse, your worker may temporarily excuse you from such activities while you work through the domestic violence issues with the professionals in your community.

Any disclosure of domestic violence is directly VOLUNTARY. The purpose of this notice is to inform you about domestic violence and let you know there is community support to help you with this situation.

Disclosure of domestic violence remains CONFIDENTIAL. However, as required by law, if there are children being abused, a report will be made to a child protective services agency.

I have read and understand the above

Date

Case Manager's signature

Date

**DOMESTIC VIOLENCE STATEWIDE HOTLINE
1-800-500-1556**

DISTRIBUTION: WHITE - Client; CANARY - TANF Casefile
EG (10/97)

2678-

Materials

The court form below is used to gather information for the Nevada State Case Registry. It seeks information about whether domestic violence is a problem for the person completing the form or for his/her children. That portion of the form is highlighted on page 1.

CASE NO. _____
 DEPT. NO. _____

_____)
 _____)
 vs. _____)
 _____)

**IN THE _____ JUDICIAL DISTRICT COURT
 OF THE STATE OF NEVADA
 IN AND FOR _____**

CHILD SUPPORT IDENTIFICATION SHEET

CUSTODIAN

Name: _____
 (First) (Middle) (Last)

Residential Address: _____ Apt.# _____
 Mailing Address: _____ Apt.# _____
 City: _____ State: _____ Zip: _____ Telephone Number () _____
 Social Security Number _____ - _____ - _____ Date of Birth: _____
 Driver's License #: _____ State _____
 Are you employed? Yes No
 Name of Employer: _____
 Business Address: _____
 City: _____ State: _____ Zip: _____ Employer Telephone Number () _____
 Ethnicity: Caucasian Hispanic American Indian/Alaskan Native
 African American Asian or Pacific Islander Other

NON-CUSTODIAN PARENT

Name: _____
 (First) (Middle) (Last)

Residential Address: _____ Apt.# _____
 Mailing Address: _____ Apt.# _____
 City: _____ State: _____ Zip: _____ Telephone Number () _____
 Social Security Number _____ - _____ - _____ Date of Birth: _____
 Driver's License #: _____ State _____
 Are you employed? Yes No
 Name of Employer: _____
 Business Address: _____
 City: _____ State: _____ Zip: _____ Employer Telephone Number () _____
 Ethnicity: Caucasian Hispanic American Indian/Alaskan Native
 African American Asian or Pacific Islander Other

CHILD(REN) INVOLVED IN THIS CASE

Name: _____ SSN: ____/____/____/____ DOB: ____/____/____
 Name: _____ SSN: ____/____/____/____ DOB: ____/____/____

If more than 5 children qualify, list their names on a separate sheet of paper and attach.

Does this case involve domestic violence against you and/or the child(ren)? Yes No

Have you requested child support enforcement services from the district attorney's office (IV-D Services)? Yes No

 Signature Date
PLEASE SEE REVERSE SIDE (Draft) (Side 1 of 2) Sep/supinfo

Within ten (10) days after a Nevada court issues a child support order, each party listed in the order must file the following information with the court that issued the order and the Welfare Division:

1. Social Security Number;
2. Residential and mailing address;
3. Telephone number;
4. Driver's License number; and
5. Name, address and telephone number of employer.

Each party shall update the information filed with the court and the Welfare Division within ten (10) days after the information become[s] inaccurate. Information directed to the Welfare Division should be mailed to:

- Nevada State Welfare Division
Child Support Enforcement
3120 East Desert Inn Road
Las Vegas, Nevada 89121-3302
- Nevada State Welfare Division
Child Support Enforcement
350 South Center Street, Ste. 260
Reno, Nevada 89512-2118
- Nevada State Welfare Division
Child Support Enforcement
850 Elm Street
Elko, Nevada 89801-3349

This requirement can be found in Nevada Revised Statutes 125B.055.

(Draft) (Side 2 of 2) Sep/supinfo

Materials

The Nevada "Case Status" screen includes a family violence data field. The field, set in **bold** below, is titled "Good Cause;" however, as the attached codes indicate, it can be used for both TANF and non TANF situations.

XXXXXX	XXXX	CASE STATUS				XXXXXXX	XX/XX/XX
XXXX	XXXX					XXXXXXX	XX:XX
APPL RQSTD DT	X X	XXXX	APPL PRVD DT	X X	XXXX	APPL RECD DT	X X XXXX
CASE TYPE	N	STATUS P	EFF X X	XXXX	LEVEL OF SERVICE	F	
FNCT AREA	E	EFF X X	XXXX	NCP STATUS	EFF X X	XXXX	SYST INIT X X XXXX
CLOSURE REASON		EFF					
SUSP BILLING?		SUSP DISTRIB?		SUSP DISBURS?	Y	REASON	LC
OVERVERRIDE OOS BILLING		SUSP?		ADDR MATCH?	N	IRS FULL SRVC RQST	EFF
CONTINUED SERVICES				RESPONSE?			
COOP	EFF					GOOD CAUSE BASIS	DETERMINATON
IV-D OFFICE/WORKER (CST)		XX	XXXXXXXX			TRANSFER TO	
IV-D OFFICE/WORKER (NCP)		XX	XXXXXXXX			TRANSFER TO	
OOS CASE IND (Y/N/B)	N					CONVERTED CASE	
CASE REVIEW DATE						REASON	
XX	XXXXX	NCP	XXX XX	XXXX	JOHN	DOE	ACT
MTH	XX	XX	CST	XXX XX	XXXX	JANE	DOE
							SCRN

XXXXXX	XXXX	GOOD CAUSE BASIS					
XXXX	XXXX						
APPL RQSTD DT		4	CODE	DESCRIPTION			
CASE TYPE	N	STAT	A	POTENTIAL PHYSICAL HARM TO THE CHILD			
FNCT AREA	E	EFF	B	POTENTIAL EMOTIONAL HARM TO THE CHILD			
CLOSURE REASON			C	POTENTIAL PHYSICAL HARM TO THE PARENT ...			
			D	POTENTIAL EMOTIONAL HARM TO THE PARENT ...			
			E	THE CHILD WAS CONCEIVED AS A RESULT OF			
SUSP BILLING?				INCEST OR FORCIBLE RAPE			
OVERVERRIDE XXX BILL			F	LEGAL PROCEEDING FOR ADOPTION ARE PENDING ...			
CONTINUED SERVICE			G	PARENT RECEIVING PRE-ADOPTION SERVICES			
COOP	EFF		I	FAMILY VIOLENCE			
IV-D OFFICE WORKER			PF: 3 = Exit				
IV-D OFFICE/WORKER							
9NCP0 16	XXXXXX		TRANSFER TO				
XXX	CASE	IND	(Y/N/B)	N	CONVERTED CASE		
CASE REVIEW DATE					REASON		
XX	XXXXX	NCP	XXX XX	XXXX	JOHN	DOE	ACT
MTH	XX	XX	CST	XXX XX	XXXX	JANE	DOE
							SCRN

