Department of Children & Family Services Building a Stronger Louisiana	**Division/Section**	Child Welfare
	Chapter No./Name	25 – Forms Manual
	Part No./Name	1 – 1000
	Section No./Name	470-FAC Notice to a Facility Administrator of a Child Abuse/Neglect Investigation
	Document No./Name	470-FAC Notice to a Facility Administrator of a Child Abuse/Neglect Report Instructions
	Effective Date	August 7, 2025

➢ PURPOSE

The purposed of the Form 470-FAC is to provide a written notification to a restrictive care facility or day care center of an abuse and/or neglect report and investigation. It also provides information about the investigation; confidentiality; limited release of information; and information about what may occur at the conclusion of the investigation.

The form is used for child abuse and/or neglect investigations of restrictive care facilities and day care centers.

➢ PREPARATION

The Form 470-FAC is prepared on local office letterhead. If the ACESS investigation case has been created prior to the initiation of the investigation or the notification to the facility administration/ director, the form may be prepared via the communications function in ACESS.

- Enter the date the form is initiated;
- Enter the name and address of the facility;
- Enter the name of the facility owner/director/administrator/family child day care home provider in the salutation;
- Enter the date the report was received by the agency;
- Enter the first and last name of the alleged child victim(s) in the space provided;
- Enter the worker's name;
- Enter the worker's telephone number;
- Enter the worker's email address;
- Enter the supervisor's name;
- Enter the supervisor's telephones number; and
- Enter the supervisor's email address.

The worker shall include their name, position/credential and sign the form. The signature is completed with the name and appropriate signage when the form is completed in ACESS.

The following information is auto populated in the appropriate text boxes:

- The date the form is initiated;
- The name and address of the facility;
- The name of the facility owner/director/administrator/family child day care home provider;
- The date the report was received by the agency;
- The first and last name of the alleged child victim(s);
- The worker's name;

- The worker's telephone number;
- The worker's email address;
- The worker's supervisor's name;
- The worker's supervisor's telephone number; and
- The worker's supervisor's email address.

➢ DISPOSITION

The form is scanned and attached to the ACESS investigation case when completed using the Word or PDF format. It is included in the ACESS record, when completed using the ACESS communication function.

The original is given to the facility administrator/director during the initial interview.