

# COURT OF QUEEN'S BENCH OF ALBERTA

## FAMILY LAW PRACTICE NOTE "5"

### ALLEGATIONS OF SEXUAL ABUSE

EFFECTIVE MARCH 1, 2011

**An error in posting Practice Note 5 has been detected, which inadvertently failed to include paragraphs 7, 8 & 9. These paragraphs have been reinserted (June 30, 2011).**

1. This Practice Note applies to family law actions where one parent makes an allegation of child sexual abuse against the other parent, or someone in his or her household, and is intending to raise the allegation in court proceedings for custody, access, parenting or contact.
2. In these circumstances, counsel for the party making the allegation or if none, the party, shall forthwith provide a completed Notification in Form 1 to the designated office of Children's Services in the appropriate region, and the Clerk of the Court in the appropriate judicial centre. A judge hearing an application for custody, access, parenting or contact may direct that a Notification in Form 1 be completed by a party to the proceeding.
3. Upon receipt of the Notification in Form 1, or upon receiving a complaint, a special investigator designated by Children's Services shall complete a Child Protection Screening [Form 2]. The information provided to the special investigator will be assessed in light of the provisions of the Child, Youth And Family Enhancement Act to determine if there are grounds for investigation. If it is determined that the matter does not warrant an investigation, a copy of completed Form 2 shall be forwarded to the case management judge assigned to the case.
4. If the information obtained from the Child Protection Screening requires further investigation, the special investigator shall commence that investigation process forthwith and may, for that purpose, utilize the assistance of the appropriate police authority as required. The special investigator shall complete an investigation report and attach it to a completed Form 3. A copy of Form 3 and the Investigation Report shall be forwarded to the case management judge assigned to the case.
5. The special investigator from Children's Services and the police authority or either of them shall be entitled to consult with other professionals if required during the course of the investigation, who may prepare a Specialized Referral Report. The special investigator will forward any reports to the case management judge assigned to the case.
6. All reports received from Children's Services will be placed in a sealed envelope on the court file. However, the parties or their respective counsel shall be entitled to receive a copy unless in the case management judge's discretion it is not in the children's best interests to do so or the report does not pertain to the issue before the court.

7. The action will be subject to case management and all applications shall be brought before the assigned case management Justice.
8. In cases where there is an allegation of abuse the case management Justice may order an early trial date.
9. This practice note only applies to the City of Edmonton and other areas within Region 6 of Child and Family Services at this time.

COURT OF QUEEN'S BENCH OF ALBERTA

THIS FORM SHALL BE SEALED ON THE COURT FILE UNLESS OTHERWISE ORDERED



Action No. \_\_\_\_\_

FORM 1

NOTIFICATION

FAMILY LAW - ALLEGATION OF SEXUAL ABUSE

TO: The Clerk of the Court of Queen's Bench of Alberta  
Judicial District of \_\_\_\_\_ (and)  
Child and Family Services Authority of \_\_\_\_\_

FROM: \_\_\_\_\_

1. Name of Mother \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_

2. Name of Father \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_

3. Name of any third party (step-parent) \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_

4. Name of Child(ren) a) \_\_\_\_\_  
& Date of Birth b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_  
e) \_\_\_\_\_

5. Allegation \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of person submitting notice \_\_\_\_\_

(Signature) \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

COURT OF QUEEN'S BENCH OF ALBERTA

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Action No. \_\_\_\_\_

FORM 2

FAMILY LAW - INVESTIGATION INTO ALLEGATION OF SEXUAL ABUSE

CHILD PROTECTION SCREENING

TO: The Clerk of the Court of Queen's Bench of Alberta  
Judicial District of \_\_\_\_\_

FROM: \_\_\_\_\_

1. Name of Mother \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_

2. Name of Father \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_

3. Name of any other relevant third party \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_

4. Name of Child(ren) and Date of Birth a) \_\_\_\_\_  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_  
e) \_\_\_\_\_

5. Allegation \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Matter is/is not proceeding to an investigation \_\_\_\_\_

7. Reasons \_\_\_\_\_  
Name \_\_\_\_\_  
(Signature) \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_

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Action No. \_\_\_\_\_

FORM 3

FAMILY LAW - INVESTIGATION INTO ALLEGATION OF SEXUAL ABUSE  
INVESTIGATION REPORT

TO: The Clerk of the Court of Queen's Bench of Alberta  
Judicial District of \_\_\_\_\_

FROM: \_\_\_\_\_

1. Name of Mother \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_
2. Name of Father \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_
3. Name of any other relevant third party \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_
4. Name of Child(ren) \_\_\_\_\_  
and Date of Birth a) \_\_\_\_\_  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_  
e) \_\_\_\_\_
5. Allegation \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The investigation report is attached.

Name \_\_\_\_\_  
\_\_\_\_\_  
(Signature)  
Address \_\_\_\_\_  
\_\_\_\_\_  
Telephone No. \_\_\_\_\_

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Action No. \_\_\_\_\_

FORM 4

NOTIFICATION

FAMILY LAW - ALLEGATION OF SEXUAL ABUSE

SPECIALIZED REFERRAL REPORT

TO: The Clerk of the Court of Queen's Bench of Alberta  
Judicial District of Edmonton

FROM: \_\_\_\_\_

1. Name of Mother \_\_\_\_\_  
Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

2. Name of Father \_\_\_\_\_  
Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

3. Name of any third party (step-parent) \_\_\_\_\_  
Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

4. Name of Child(ren) \_\_\_\_\_  
and Date of Birth a) \_\_\_\_\_

b) \_\_\_\_\_

c) \_\_\_\_\_

d) \_\_\_\_\_

e) \_\_\_\_\_

5. Allegation \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. The Referral Report is attached.

Name of person submitting report \_\_\_\_\_

(Signature) \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_