

Judging CPS Response

A Child Safety Decision

Introduction

The determination about how soon CPS should respond to a report of child abuse and neglect is a child safety decision. The decision is sometimes referred to as *determining the urgency response* or *prioritization of the CPS response*. It occurs after a report has been received, screened and assigned for an investigation or initial assessment. In simple terms, it refers to the question: how soon should contact be made with the child and family that have been reported? Methods and criteria related to judging the timing of the CPS response have been around the field for nearly thirty years. Mostly standards have been designed around the age of a child and the severity of the maltreatment reported. Priority response systems often have failed to inform decision making related to the total of what is reported versus focusing rather tightly on the nature of the maltreatment that was reported.

The correct standard for judging how urgent a response is present danger. The use of present danger to analyze the reported information provides a more precise way of selecting a reasonable response time.

Present danger exists at the highest safety threshold. Present danger is an immediate, significant and clearly observable threat to a child occurring in the present. Present danger contained or described within CPS reports establishes clearer direction about what the response must be. For example if you were to receive a report that a caregiver was in the process of beating a vulnerable child you could conclude that the child was in present danger and that an immediate response was appropriate.

Priority response systems in most states include a time frame that varies from responding immediately to responding the same or the next day to an extended

time up to 5 days or so. The variation in the time frame is based on criteria that ascribe certain conditions as more or less severe. Present danger always refers to that which is severe.

Using Present Danger to Determine CPS First Contact Response

When reporters describe circumstances that reveal any of the conditions described below, they are reporting present danger. When you screen and analyze reports with this kind of information the response decision should conclude – immediate! The exception would be if other information suggests that current circumstances mitigate the present danger. For example, a child with a serious injury may be at a hospital (a safe place) which allows for more time to respond.

Following you will see the identification of a present danger and a qualification of the present danger. In all instances, the recommended response is immediate. You may need to interpret what immediate response means in light of terms and time frames used in your state to prioritize report assignments.

Hitting, Beating, Severely Depriving = Respond Immediately

The caregivers' mistreatment of the child is occurring concurrent with the report. The maltreatment will typically be physical, verbal or sexual in nature. Neglect that is chronic may be occurring in the present sense, but does not necessarily meet the criterion of danger.

A Child Has Multiple/Different Kinds of Injuries = Respond Immediately

Although it is acceptable to consider this as injuries on different parts of the body as in bruises to the arms and lower legs, its intent is more accurately related to different kinds of injuries, as in a serious burn and bruising to the arms.

A Child Has Injuries to Face/Head = Respond Immediately

This includes bruises, cuts, abrasions, swelling or any physical manifestation alleged to have occurred as a result of caregiver treatment of the child.

Severe to Extreme Maltreatment = Respond Immediately

This maltreatment includes:

- Severe: biting, injuries to head, face, genitals, internal injuries; broken bones; oral sex, anal sex or sexual intercourse; constantly hitting; hitting or slapping the head or face; kicking; punching or blows to the abdomen; throwing or shaking; multiple injuries; diagnosable malnutrition; abandonment; consistent scapegoating; indifference, condemnation and/or rejection; serious unmet health needs/living arrangements
- Extreme: cruel restraint; vicious beatings; burns; physical torture; sexual abuse accompanied by physical abuse; bizarre sexual practices; pornographic/sexual exploitation; constantly berating; double binding; verbal assault/intimidation; psychological torture; life threatening unmet health needs/living arrangements.

Maltreatment Appears Premeditated = Respond Immediately

There must be supporting information reported that what has been alleged is associated with and a result of a deliberate, preconceived plan or thinking which the caregiver is responsible for and which preceded the maltreatment event.

Life Threatening Living Arrangements = Respond Immediately

This is based on specific information reported which indicates that a child's living situation is an immediate threat to his/her safety. This would include the most serious health circumstances: buildings capable of falling in, exposure to

elements in bitter weather, fire hazards, exposed electrical wiring, guns/knives available, etc.

Bizarre Cruelty = Respond Immediately

This qualifies the maltreatment that has been alleged and usually will require an interpretation. Such things as locking up children, torture, exaggerated emotional abuse, etc.

A Caregiver's Viewpoint of the Child is Bizarre/Extreme = Respond Immediately

This is the extreme, not just a negative attitude toward the child. It is consistent with the level of seeing the child as demon possessed.

A Child is Unsupervised or Alone = Respond Immediately

This could involve an older child. To be a present danger, it requires a vulnerable child. The time of day, of course, is important, as is the length of time the child has been unsupervised. This only applies if the child is truly without care, not someone is caring for the child and complaining that the mom is supposed to be there but isn't presently. Keep in mind the present time concept here. If the child was unsupervised last night but is not alone now, it is not a present danger.

A Child is Fearful/Anxious of the Home Situation = Respond Immediately

This does not refer to generalized fear or anxiety. Children who are described as being obviously afraid of their present circumstance, the home situation, or a person because of a concern of personal threat would fit this threat. Information

would likely describe actual communication or emotional/physical manifestation from the child's knowledge or perception of their situation.

A Child Needs Immediate Medical Care (Any Age) = Respond Immediately

To be a present danger, the medical care required must be significant enough that its absence could seriously affect the child's health and well-being. In other words, if children were not being given routine medical care, it would not constitute a present danger situation. It should have an emergent quality.

Caregivers Are Unable to Provide Basic Care = Immediate Response

This only refers to those caregiver duties and responsibilities consistent with basic care required to assure child safety. This is not associated with whether caregivers are effective caregivers generally, but whether their inability to provide basic duties leaves the child in danger.

Caregiver Behavior is Bizarre = Respond Immediately

This requires interpretation of the information referred beyond what the reporter might be saying. Unpredictable, incoherent, weird, outrageous, or totally inappropriate behaviors fit this threat.

Caregivers are Described as Dangerous = Respond Immediately

Dangerous caregivers may be behaving in bizarre ways; however, this is intended to capture a more specific type of behavior. Information would be considered present danger when caregivers are described as physically/verbally imposing and threatening, brandishing weapons, known to be dangerous and aggressive, currently behaving in attacking or aggressive ways, etc.

Caregivers are Out-of-Control = Respond Immediately

This threat may include aspects of the two preceding influences. However, this allows for capturing emotional upset or depressed people who cannot focus themselves or manage their behavior in ways to properly perform their caregiver responsibilities. Their actions or lack of actions may not be directed at the children, but may affect them in dangerous ways.

Caregiver is Under the Influence of Substances = Respond Immediately

Applying the present time context, this refers to a caregiver who is drunk or high or is consistently drunk or high all the time. The state of the caregiver's condition is more important than the use of a substance (drinking compared to drunk).

Caregiver(s)' Whereabouts are Unknown = Respond Immediately

The whereabouts of caregivers of the child are unknown at the time when the referral is received and this affects the safety of the child.

A Child is Subject to Present/Active Domestic Violence = Respond Immediately

This considers family situations in which the alleged child maltreatment is accompanied by domestic violence. The report may include an identification of presently active domestic violence and child maltreatment or a general recurring state of domestic violence that includes child maltreatment that may not presently be active. The report may describe that a child is being mistreated and that a caregiver is also being mistreated, thus suggesting a violent situation, which is generalized among members. Concern is heightened if both abuses are presented as occurring during the same time, and more concerning if that same time is *now*.

(Jurisdictions may have to adjust this present danger threat of harm based on what responsibility is assumed for reported domestic violence with no reported child maltreatment.)

The Family May Flee = Respond Immediately

This may require some interpretation and worker judgment. Transient families, homes, which are not, established, families with limited possessions, etc. Under any reporting circumstances involving a child being maltreated accompanied by an indication a family will flee, then the nature of the maltreatment must be considered serious until confirmation can occur based on the initial assessment.

The Family Hides a Child = Respond Immediately

This should be thought of in both overt and covert terms. Observations about a child being physically restrained within the home or caregivers who avoid allowing others to have personal contact with their child can be considered. This may include passing a child around to other adults, relatives or different homes. Regardless of the severity of the reported maltreatment, concern must escalate when children are being hidden.

Child has Exceptional Needs and There is a Question as to Whether the Caregivers Can/Will Meet Those Needs. = Respond Immediately

“Exceptional” refers specifically to child conditions, which are either organic or naturally induced such as developmental disabilities, critical medical needs, blindness, physical handicap, etc. The key here is that the caregivers, by not addressing the child’s exceptional needs, will not/cannot meet the child’s basic needs thus posing a present danger.

Both Caregivers Have Not/Cannot/Do Not Explain Injuries = Respond Immediately

Caregivers are unable or unwilling to provide an explanation regarding moderate to serious injuries, which is consistent with the facts.

Some Things to Keep In Mind

- **The threshold for safety is harm that is so severe that it reasonably can lead to serious injury, disability, severe trauma, and death to vulnerable children.**
- **Present danger refers to family conditions that threaten a child's safety NOW!**
- **Information reported to CPS consistent with present danger should prompt an immediate response.**
- **An immediate response is qualified as a face-to-face encounter with a child and family.**
- **Failure to factor in present danger when prioritizing referrals for assignment and contact could result in serious injury, disability, severe trauma or death to vulnerable children.**
- **The present danger standard is the best means by which to effectively judge response time at intake.**