Understanding and Working with the Child Welfare System

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Why Discuss the Child Welfare System?

Depressed moms are at increased risk for exhibiting behaviors associated with child neglect, even if they would never intentionally harm their child. As a result, some of these moms may become involved with the child welfare system.

Therefore, it is important for all providers to understand the child welfare system, including what happens when a call is made and follow up steps.

Caring for a depressed mom includes understanding the systems she is engaged in.
National Statistics

- 59,557,447 US child population (of states reporting – 44 plus District of Columbia)
- 3.3 million total referrals of maltreatment regarding 5.9 million children (estimated for 52 states)
  - 60.7% screened-in for investigation
  - 39.3 % screened-out with no investigation
- Of the nearly 2 million reports that received a CPS response, 90.3% received an investigation and 9.7% received an alternative response
- Of the 1,793,724 reports that received an investigation, 436,321 were substantiated cases (with 688,251 victims) and 24,976 were indicated

(Nat’l Child Abuse and Neglect Data System, NCANDS, 2010)
## National Statistics

<table>
<thead>
<tr>
<th>Type</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>Neglect</td>
<td>78.3%</td>
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<tr>
<td>Physical Abuse</td>
<td>17.6%</td>
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<tr>
<td>Sexual Abuse</td>
<td>9.2%</td>
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<tr>
<td>Emotional Abuse</td>
<td>8.1%</td>
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<tr>
<td>Medical Neglect</td>
<td>2.4%</td>
</tr>
<tr>
<td>“Other” (abandonment, threats of harm, congenital drug exposure)</td>
<td>10.3%</td>
</tr>
<tr>
<td>Unknown</td>
<td>0.3%</td>
</tr>
</tbody>
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(Nat’l Child Abuse and Neglect Data System, NCANDS, 2010)
Child Abuse Statistics:  
Past and Current Perspectives

• Fatal child abuse:
  – Contrast with polio which killed 3,145 and disabled 21,269 in its worst year
  – Each year 1,500 – 2,000 children will die from abuse or neglect in the US
Colorado Statistics

• Colorado child pop. 1,227,763
• 72,818 referrals – 33,969 screened in (45.3%)
• 7,464 cases (11,166 victims) were confirmed/substantiated
• Of confirmed cases:
  • neglect  82.6%
  • physical abuse  13.0%
  • sexual abuse  9.7%
  • emotional abuse  4.3%
  • medical neglect  1.5%
  • unknown  0.3%
• 27 reported fatalities (rate of 2.2/100,000 compared to 1.69/100,000 in 2006)

(Nat’l Child Abuse and Neglect Data System, NCANDS, 2010)
Child Abuse Fatalities

- 1,537 children died as a result of child maltreatment
- Type of abuse resulting in death (duplicate and unique)
  - Neglect 68.1%
  - Physical Abuse 45.1%
  - Psychological Maltreatment 2.5%
  - Medical Neglect 8.6%
  - Sexual Abuse 1.3%
  - Other 26.2%
- Incidence rate of 2.07 per 100,000 children
- Decreased from rate of 2.32 in 2009

(Nat’l Child Abuse and Neglect Data System, NCANDS, 2010)
Definitions of Abuse and Neglect

• What is abuse? Per Colorado Children’s Code and Colorado Statutes, physical abuse is: an injury to a child under eighteen caused by a parent or person responsible for care through deliberate actions or negligence on the part of the caretaker.

• What is neglect? An omission or commission of action toward a child, by a caretaker that could result in imminent harm to the child. e.g. leaving a baby in a car while running an errand.
Types of abuse

- **Physical Abuse**: evidence of skin bruising, bleeding, malnutrition, failure to thrive, burns, fracture of any bones, subdural hematoma, soft tissue swelling or death
- **Does NOT** include physical discipline or use of an object unless there is physical evidence of injury
- **Sexual abuse**: any case in which the child is subjected to sexual assault or molestation, sexual exploitation, or prostitution
Understanding Neglect

• Neglect occurs when a parent or legal guardian fails to provide *adequate* food, clothing, shelter, medical care, or *supervision* thereby endangering the physical well-being of the child.

• Emotional abuse = identifiable impairment or substantial risk of impairment of the child’s intellectual or psychological functioning or development

• Adequacy
• Supervision
Conditions That Are Risk Factors for Child Abuse & Neglect

✓ CHILD FACTORS
  – Chronological age of child
  – Temperament and behavior
  – Developmental disabilities
  – Attachment and bonding
  – Premature, acute or chronic illness
  – Unwanted child or child of another partner
Conditions That Are Risk Factors When Determining Child Abuse & Neglect

✓ PARENT / CAREGIVER FACTORS
  - Low self-esteem
  - Borderline intellectual functioning
  - Abuse as a child
  - Depression or other mental illness
  - Impulsive or anger control issues
  - Substance abuse or addiction
  - Ignorance or unrealistic expectations of child development and child care
  - Sense of entitlement, possession, or acceptance of violence as discipline or mode of conflict resolution
Conditions That Are Risk Factors When Determining Child Abuse & Neglect

✓ SOCIAL-SITUATIONAL FACTORS
  – Structural / economic
  – Domestic violence
  – Values and norms about violence, discipline
  – Devaluation of children
  – Abnormal child-rearing practices
  – Cruelty in child-raising practices
  – Prior involvement of DHS and law enforcement
Conditions That Are Risk Factors When Determining Child Abuse & Neglect

✓ FAMILY FACTORS
  – Domestic violence
  – Stepparent head of household, unrelated male partner in the home
  – Single parent home
  – Foster homes, kinship care and residential facilities
    (Placement out of home does not always mean safety)
  – Adolescent parents
  – Scapegoating of a child in home
  – Adoptions, particularly with cultural mismatch and language difficulty
Conditions That Are Risk Factors When Determining Child Abuse & Neglect

✔ TRIGGERING EVENT
  - Acute event or chronic, of a long duration and build-up of stress
  - Crying
  - Sick or irritable child
  - Temperamental child, ‘pushing buttons’
  - Toileting or potty accidents or routine incidents of elimination
ETIOLOGY OF CHILD ABUSE
Kempe and Helfer’s Model

Potential for abuse within the adult

Child victim

Crisis/Stressor

Added into the formula, must be the degree of Parent/Child attachment (Lack of Attachment or Dysfunctional Attachment)
The Potential for Abuse

- Caregiver’s Family History
  - History of abuse in caregiver’s childhood
  - Violence in the home
  - Learned behavior/parenting skills
- Caregiver’s Expectations of the Child
  - Unrealistic expectations and demands
- Caregiver’s Network of Support
  - Social/physical isolation
The “Special” Child

- Caregiver’s perception of the child
- Special Child
  - unplanned, unwanted
  - premature
  - disabled/special needs
  - not “biologically” related
The Crisis

- A Single Triggering Event
  - Crying
  - Wetting the bed
  - Illness
- Series of Crises
  - Move-Homelessness
  - Loss of job
  - Chronic illness
  - Death
  - Divorce
Reporting Child Abuse

- Anyone can report known or suspected child abuse to law enforcement or Child Protective Services.

- However, certain individuals are compelled by law to report known or suspected child abuse.

- Those individuals are commonly known as Mandated Reporters.
(1) Persons required to report such abuse or neglect or circumstances or conditions shall include any:

a) Physician or surgeon
b) Child health associate
c) Medical examiner or coroner
d) Dentist
e) Osteopath
f) Optometrist
g) Chiropractor
h) Chiropodist or podiatrist
i) Registered nurse or licensed practical nurse
j) Hospital personnel engaged in the admission, care and treatment of patients
k) Christian science practitioner
l) Public or private school official or employee
m) Social worker or worker in family child care home, foster care home, or child care center
n) Mental health professional
o) Dental hygienist
p) Psychologist
q) Physical therapist
r) Veterinarian
s) Peace officer
t) Pharmacist
u) Commercial film and photographic print processor
v) Firefighter
w) Victim’s advocate
x) Licensed professional counselors
y) Licensed marriage and family therapists
z) Unlicensed psychotherapists
aa) Clergy member
Colorado Childrens Code 19-3-301
Reporting Requirements

• Any person specified who has reasonable cause to know or suspect that a child has been subjected to abuse or neglect, or who has observed the child being subjected to circumstances or conditions which would reasonably result in abuse or neglect shall immediately report this to law enforcement or social services.

• Failure to report is a Class 3 Misdemeanor
Who should report

- You may make an anonymous report; however that eliminates you as a resource for the intake worker during the investigation.

  (It is beneficial to the investigation to have professional contact information as a mandated reporter)

- Any county child welfare agency is prevented, by Colorado Statute, from revealing reporter information.
Exclusions

- You are not mandated to make a report if:
  - You learn of the suspected abuse or neglect after the alleged victim is eighteen years of age or older; AND
  - You do **NOT** have reasonable cause to know or suspect the perpetrator - Has subjected any other child **currently** under eighteen years of age to abuse or neglect **OR**
  - The Perpetrator Is **not currently in a position of trust**, as defined in section 18-3-401 (3.5), C.R.S., with regard to any child currently under eighteen years of age.
Exclusions

• Mandated reporter provisions shall not apply to a person who acquires knowledge or suspects that a child has been subjected to abuse/neglect during a communication about which the person may not be examined as a witness (privileged communication).

• Some professional parties may have to obtain a “release of information” or other authorization prior to making a child abuse report when that report includes privileged communication.
Ramification

• If by employment or other reason you meet the definitions (as listed) of who is required to make a report;
• You are subject to criminal and civil penalties for WILLFULLY failing to report suspected or known child abuse to law enforcement or CPS agency (a, b)
• If you WILLFULLY make a FALSE report of child abuse you are subject to criminal and civil penalties. (a, b)
• (a) class 3 misdemeanor and shall be punished as provided in section 18-1.3-501, C.R.S.;
  (b) Shall be liable for damages proximately caused thereby.
“To Be or Not To Be”

• Regardless of your professional standing if you know or suspect a child has been abused or neglected contact Child Protective Services or local law enforcement.

• Denver County Hotline - 720.944.3000
WHERE TO REPORT

• Reports need to be made in the county in which the family resides.
• If a there is a split household then the report needs to be made to the county that the victim spends majority of the time.
In Denver County
24 hr. HOTLINE:
720-944-3000
WHAT TO REPORT?

1. Names of people involved, especially children, parents, alleged perpetrator and the address where the family resides.

2. Dates of birth, addresses, phone numbers, relationships, what you know as a fact, what you have observed, any observed or reported injuries as well as answering questions such as, school child attends and other persons involved with the child or family.
REPORTER’S RIGHTS & RESPONSIBILITIES

Responsibility: to report suspected abuse/neglect (reporter doesn’t need to prove A/N).
Rights: reporter does not have to give name, but it is helpful in case the worker has questions. The law prevents disclosure of reporter’s name, but we can’t guarantee it will never be known from other sources.
Hotline and Intake Staff

- The hotline staff are trained to ask questions that will result in the most relevant information.
- The intake workers are highly trained in interviewing skills, assessment skills and decision making. They are all Child Protection Professionals with expertise in child behavior and development.
What happens after you report when it is determined to be an immediate risk

1. If the information indicates immediate danger of harm to a child, it is referred to an on-call worker.

2. The on call worker will begin an investigation immediately, which includes interviewing the child and other significant participants.

3. If it is determined that there is not immediate risk to the child then all reports are reviewed the following day by the triage team to determine if they meet the state requirements for investigation.

4. If a reporter would like to know the status of a report they can call the next business day after 11 am.
What happens after you report when there is not immediate risk

1. The referrals are reviewed by intake supervisors or the RED team which consists of supervisors and staff who review the report and prior history and determine the response time. These options are 72 hrs. or 5 working days.

2. All referrals rising to the level of a full assessment, based on the referral information, are assigned to a caseworker.

3. The caseworker has a response time of 72 hrs. or 5 working days to begin the investigation and make contact with any and all victims.
Referral Process: Initial Assessment

- The county department shall enter all referrals into the State Department's automated system... and conduct an initial assessment.
- The initial assessment shall decide the appropriateness of further investigation.
Referral Process: Initial Assessment

The county department gathers and documents the following information, as available:

1. Family members and birth dates.
2. Relationships of individuals in the household.
3. Identified alleged victims, birth dates, and their current location.
4. Reasonable effort to secure the identity of the person alleged to be responsible for the abuse or neglect, as well as the responsible person's date of birth, Social Security Number, and last known address.
5. Presenting problems - specific allegations.
6. Reporter's credibility and name, address, and phone number.

7. Relationship of reporter to family.
8. Other potential witnesses.
9. Collateral agencies and individuals involved with the family.
10. Records check - results of internal and State automated case management system inquiries.
11. Date and time intake report received.
12. Response assessment based upon reporter's information.
13. Referrals made.
14. Decision as to investigation response and caseworker's signature (name).
15. Supervisory approval of the decision and signature.
Referral Process: Initial Assessment

Q: How does DDHS determine jurisdiction for county investigations of child abuse?

A: The County responsible for investigation is the county of residence for the child’s parent or legal guardian.

In the absence of a court order the legal guardian is the parent with whom the child primarily resides.

In absence of a parent and court order the guardian is the individual with whom the child primarily resides.
Referral Process: Response Time

• Response Time = A period of time in which a Caseworker must complete Face to Face contact with the victim.
• The county department's decision of how quickly to initiate an investigation is based on specific reported information that is credible and that indicates whether a child may be unsafe or at risk of harm. (7.202.4)
• The county department shall assign priority in response time using the following criteria:
Referral Process: Response Time

- *Immediate and/or same day* response is required when the report indicates that:
- Without immediate response, the child is in danger of moderate to severe harm, or
- The child's vulnerability or factors such as drug and alcohol abuse, violence, isolation, or risk of flight from one county to another county or state, increase the need for immediate response.
- If the report is received after regular business hours, the time frame is immediate and/or up to eight hours.
Referral Process: Response Time

• End of the third calendar day following receipt of the report when the report indicates that:
• Without a response within three days, the child is in danger of moderate to severe harm, or
• Factors such as drug and alcohol abuse, violence, isolation, or risk of flight from one county to another county or state, increase the need for intervention in the near future.
Referral Process: Response Time

• **Within five (5) working days** from the date the report is received when the report indicates maltreatment or risk of maltreatment to a child and indicates an absence of safety concerns.

• **Working Day** = Excludes Weekends and Holidays

• **Calendar Days** = No exception for weekend or holiday.
Referral Process: Response Time

- If the referral meets standard for five-working-day response, the referral will be placed in the Assignment Box for Review same day or next business day by the RED TEAM.

- If the referral may qualify for Immediate or 3 Calendar Day response, the referral will be reviewed for assignment by a supervisor same day (report received).

- If a supervisor determined the referral indicates an immediate threat to child safety the report will be assigned same day to a Caseworker for immediate Assessment.
Assignment Boxes

Denver Police receive a copy of every report received by Denver Human Services. This ensures that proper reporting procedures are followed by mandated reporters.
RED TEAM
Evaluate to determine Assignment

• Every 3 and 5 Day Referrals are reviewed by the RED Team same-day or the day after the report is received.
• RED TEAM = Read, Evaluate, Direct
• RED Team is a multidisciplinary group that conducts comprehensive evaluations of every referral.
• Evaluation = Does the referral contain information of abuse and neglect as defined in law? and / or Do other sources of family information in conjunction with current allegations demonstrate a child is at risk of harm?
RED TEAM

Facilitator, Reader, Framework, TRAILS History, Court History
RED TEAM
Evaluate to Determine Assignment

• RED Team utilizes multiple sources to inform their decision making:
  • Criminal databases, school information, collateral contacts, child abuse database, caseworker’s professional knowledge of family etc.
  • Additional factors evaluated: Complicating factors in the home (unemployment, mental health), family strengths, child vulnerability (age, disability), grey areas.
The Hotline is a component of:
Denver Department of Human Services, Division of Family & Children Assessment Services (Intake) section.

Intake
Investigates Reports of Maltreatment

Hotline
Collects Reports of Maltreatment

Permanency (Ongoing)
Provides ongoing treatment & case management
Investigation Process

Elements of an investigation:
• Contact the reporter
• Interview the victim or victims
• Document any observed injuries
• Interview the parents or caretakers
• Interview the perpetrator if other than the parent
• Talk to collateral parties, such as school personnel, medical provider, family members, therapists, etc.
• Review prior history with DDHS, DPD, DPS or other states/counties if needed
Determining Safety of Children

- Throughout the investigation the workers are constantly assessing the safety and risk of all children in the home, and if determined that there are safety or risk concerns for the children the worker works with the family, friends and professionals to minimize or eliminate the safety and risk to the children.
After the Investigation

• Assessments can will be closed with community resources provided

• Cases that are opened for services will have Team Decision Making Meeting. This is a meeting to with the family to determine if:
  – Voluntary case will be opened for services to stabilize the family or
  – Those cases in which the safety concerns can not be resolved a Dependency and Neglect case will be filed in Denver Juvenile court
Team Decision Making Meeting (TDM)

• A TDM is held: when out of home placement or a Dependency and Neglect petition is being considered.

• Parties included at TDM would be: The caseworker, supervisor, the parents/caretakers, a facilitator, and anyone the family requests to be present at the meeting.
WHAT HAPPENS UPON COMPLETION OF THE INVESTIGATION?

If the investigation results in a founded allegation the information is recorded in the computer system and a letter sent to the Person Responsible for Abuse or Neglect (PRAN).
Frequently Asked Questions

• **Should I try to get as much information as possible about what happened?** You should ask enough to know the basic information, then discontinue asking questions and leave the details to the investigating worker.

• **What should I do if the child says they are being molested?** You should refrain from reacting verbally, emotionally or physically to the declaration and move to a different topic. Then report the outcry as quickly as possible, being sure to report only what you know and not what you suspect or believe.
Outcome of Report

• Reporters may call the Hotline or worker to know the status of the report.
• Because of confidentiality we can only tell you if the report was assigned for investigation or not.
Abuse and Neglect is Determined by the Colorado Children's Code and Volume Seven Requirements

- Often personal values and expectations, socioeconomic status, media trends and cultural beliefs interfere with the ability to make an unbiased report of child abuse or neglect.
What Can You Know

• If you are working with a child who is involved in the system or you think is involved with the system contact the hotline and they will take that information a relay that to the appropriate caseworker

• Due to confidentiality no one can confirm or deny involvement without consent from the parent
Mandatory Reporter Letter

• As of the result of the Child Welfare Action Committee all mandated reporters who have an ongoing relationship with the child are sent a letter within 30 days of the report to inform them if there was and investigation or not, and if the family received services.
QUESTIONS???