

## SDM® INTAKE ASSESSMENT DEFINITIONS

### STEP 1. SCREENING

#### A. Screening Criteria

Using the definitions, indicate the type of maltreatment that meets the criteria in the definitions. For all criteria met, either check yes or the specific criteria. If no criteria are met, check no or if for a group of criteria, check none. For example, if no criteria under severe neglect are present in the call from the reporter, check none to indicate.

#### Physical Abuse

Act committed by parent/caregiver.

1. Non-accidental injury (check all that apply)

The parent/caregiver deliberately caused, or allowed another person to cause, an injury to a child. If the reporter does not know how a reported injury was caused, consider the allegation to be a non-accidental injury. If the reporter does not know whether the parent/caregiver's behaviour resulted in a physical injury, consider whether criteria for threat of physical abuse are met. Include physical injuries that result from a domestic violence incident. Do not include injuries that result from sexual acts.

Select if the exact cause of the injury is unknown or the intent of the parent/caregiver is unknown, but there is a basis to be suspicious that a parent/caregiver caused it and it was non-accidental.

- *Death of a child/another child at home (automatic immediate response).* Current allegation is that a child has died due to suspected physical abuse, and there is another child in the home.
- *Severe non-accidental injury (automatic immediate response).* A severe injury (including bruising, burns or scalding, broken skin, broken bones, any internal injuries, any injury to a child under the age of 3 years, or chronic bruising or injuries to adolescents) is one that, if left untreated, would cause permanent physical disfigurement, permanent physical disability, or death. Include visible injuries and suspected injuries due to symptoms such as loss of consciousness, altered mental status, inability to use an arm, inability to bear weight, etc.

- *Other injury.* Any visible or suspected injury that is not severe. A suspected injury may include a report by credible source of an injury that has not been seen, such as a child indicating that as a result of action by a parent/caregiver, there is a bruise, which is not visible to the reporter.

Examples include but are not limited to:

- Physician reports injury is consistent with non-accidental;
- Explanation does not match injury or there are inconsistent explanations; or
- Injury is in the shape of an object (e.g. linear bruising, loop marks).

## 2. Cruel or excessive corporal punishment

The specific actions were cruel or excessive, meaning that they reasonably could have caused physical harm to a child. It is not necessary that there is evidence that an injury has occurred. If there is an injury as a result, select "non-accidental injury."

Cruel punishment includes any type of discipline that could result in injury or physical harm, such as withholding food, water, or required care, or requiring a child to consume non-food items or inappropriate amounts of food, water, or non-food items; or a parent/caregiver's use of sadistic measures or weapons. Examples include but are not limited to:

- Direct physical contact with the child, such as hitting, biting, kicking, shaking, or use of an object;
- A pattern of withholding water or food (with the exception of desserts, snacks, or candy);
- Forcing a child to consume excessive amounts of food or water;
- Feeding/forcing the consumption of poisonous, corrosive, or unprescribed or mind-altering substances;
  - » Forcing a child to consume an extreme amount of hot sauce, salt, pepper, or non-food items. Washing a child's mouth out with soap is not considered an extreme measure unless child ingests sufficient soap to result in illness, vomiting, or physical distress.
- Exposing the child to physical elements or the environment as punishment;
- Child is locked out of the home and it is reasonable to expect that the child may be harmed due to weather or injured due to environment;

- Requiring unreasonable physical activity as punishment. The level of physical activity required of the child exceeds the child's ability to perform, and the child has or is likely to experience extreme pain, dehydration, or exhaustion; or
- Forcible confinement such as locking the child in a room or closet or using physical restraints.

3. Threat of physical abuse (check all that apply)

No event has occurred; however, the parent/caregiver behaves in ways that create substantial likelihood that the child will be physically abused.

- *Dangerous behaviour in immediate proximity of the child—non domestic violence.* The parent/caregiver behaves in ways that are likely to result in injury to the child, including criminal incidents that occur while the child is present. Consider combination of child location, type of incident (e.g. pushing, throwing objects, use of weapons), and child vulnerability.
- *Dangerous behaviour in immediate proximity of the child—domestic violence.* There is domestic violence in the household that occurs while the child is present and is likely to result in injury to the child. Consider combination of child location, type of incident (e.g. pushing, throwing objects, use of weapons), and child vulnerability.
- *Threats of physical harm.* The parent/caregiver has made direct credible threats to cause physical harm to the child. If threats are clearly for the sole purpose of emotional abuse, select emotional abuse. If purpose cannot be discerned, select both threats of physical harm and emotional abuse.
- *Prior death of a child due to abuse or neglect and another child in the home.* There is a prior substantiated abuse or neglect incident that resulted in a child's death, AND there is a new child now living in the home.
- *Prior substantiated abuse, failed reunification, or failed services for abuse, and a new child in the household.* There is credible information that a current parent/caregiver had one or more children for whom there was failed reunification as a result of child abuse or neglect, OR a current parent/caregiver was previously substantiated for abuse or failed services; AND there is a new child now living in the home.

## Emotional Abuse

### 4. Severe emotional abuse (check all that apply)

Parent/caregiver actions, such as bizarre or cruel behaviour toward the child, domestic violence or discord in the home, mental health concerns, or substance abuse by the parent/caregiver have led to the child's severe anxiety, depression, withdrawal, or aggressive behaviour toward self or others. A child:

- Has diagnosis by a qualified professional indicating severe anxiety or depression;  
OR
- Exhibits symptoms of severe anxiety, depression, withdrawal, or aggressive behaviour toward self or others.

*See the definitions below for parent/caregiver actions.*

### 5. Threat of emotional abuse (check all that apply)

Parent/caregiver actions in one or more of the areas below are so persistent and/or severe that they are likely to result in the child's severe anxiety, depression, withdrawal, or aggressive behaviour. The child may or may not be symptomatic. Note: The following four areas constitute a threat of emotional abuse ONLY if the main definition (this paragraph) is also met.

- *Domestic/intimate partner discord.* The child has witnessed or is otherwise aware of physical altercations between adults in the home on more than one occasion, or a single occasion that involved weapons or resulted in any injury to an adult.
- *Bizarre or cruel behaviour.* For example, the parent/caregiver harms or threatens to harm pets/animals or threatens suicide or harm to family members (other than the child); confines the child in places such as closets or animal cages; consistently scapegoats the child; or consistently berates, belittles, or shames the child. Includes extreme discord in custodial arrangements and alienation of one parent/caregiver by another, including continuous comments that the other parent/caregiver does not care for the child or will go to jail, where the intent is to sever the child from the parent/caregiver.
- *Caregiver's mental health concerns.* The parent/caregiver is exhibiting symptoms of mental illness.
- *Caregiver's substance abuse concerns.* The parent/caregiver is abusing alcohol or other drugs.

## Neglect

Neglect is an act of omission by a parent, guardian, caregiver, or legal custodian in failing to provide for the adequate care and attention of the child's needs, resulting in physical or mental harm to the child or substantial risk of physical or mental harm to the child.

### 6. Severe neglect (automatic immediate response required)

- *Diagnosed malnutrition.* The child has been diagnosed as being malnourished.
- *Non-organic failure to thrive.* The child has been diagnosed as having non-organic failure to thrive OR has indicators of failure to thrive.
- *Child health/safety endangered.* The parent/caregiver has willfully not provided adequate clothing, shelter, supervision, care, or medical care to the extent that the child has already suffered or is likely to suffer serious illness or injury. For example:
  - » The child's clothing is so inappropriate for weather that the child suffered hypothermia or frostbite;
  - » Housing conditions result in lead poisoning, severely exacerbated asthma due to smoke exposure, and/or multiple bites from pest infestations;
  - » Housing is so unsafe that it is an acute fire hazard or has been condemned;
  - » There is methamphetamine production in the home/residence;
  - » Medical care has not been provided for a diagnosed acute or chronic condition and, as a result, the child has or is likely to require hospitalization/ essential medical intervention or surgery; AND the condition may worsen to the extent that unnecessary permanent disability, disfigurement, or death results as indicated by the opinion of a medical professional;
  - » The child is not supervised to the extent that he/she has been seriously injured or avoided serious injury only due to intervention by a third party;
  - » A young child is left in a motor vehicle during extreme temperature conditions;
  - » A parent/caregiver behaves recklessly in proximity of child (driving under the influence, using weapons, etc.); or

- » Parent/caregiver is breastfeeding while using dangerous substances (type of substances and amount resulted in or is likely to result in serious injury/illness to child).
- *Death of a child, neglect is suspected, and there are other children in the home.* A child has died, and while the cause of death has not been determined, a medical or law enforcement professional or other reliable source is concerned that the death may have been the result of abuse or neglect AND there is at least one other child in the home.

7. General neglect (check all that apply)

Consider age/developmental status of children. Minor or no injury or illness has occurred.

- *Inadequate food.* The parent/caregiver does not provide sufficient food to meet minimal requirements for the child to maintain health and growth. The child experiences unmitigated hunger; lack of food has a negative impact on school performance. Parent/caregiver's use of food banks as sources of food should not be considered failure to provide food.
- *Inadequate clothing.* The parent/caregiver provides clothing that is inappropriate for weather and results in health or safety concerns for the child. Clothing is consistently so unclean or inappropriate to the situation that the child experiences shame and/or ridicule.
- *Inadequate supervision.* The child is or has been left unsupervised for a period of time inappropriate to the child's age or developmental status. The parent/caregiver may be present but does not attend to the child (e.g. the child is playing with dangerous objects, running into the street, etc.)
- *Inadequate/hazardous shelter.* The residence is unsanitary, such as a pervasive and/or chronic presence of rotting food, human/animal waste, or infestations. The residence is dangerous, such as items (e.g. poisons, guns, drugs) within reach of child. The residence lacks basic necessities, such as utilities, plumbing, and/or sleeping facilities, AND these are necessary based on current conditions and the age/developmental status or special needs of the child.
- *Inadequate medical/mental health care or rehabilitation services.* The child has a mild to moderate condition and the parent/caregiver is not seeking or following medical/rehabilitative treatment and immediate harm may result or the child's health/development is likely to be seriously impaired as determined by a qualified medical practitioner. OR

The child has a severe chronic condition and the parent/caregiver is not seeking or following medical treatment or care is partial and immediate harm may result or the child's health/development is likely to be seriously impaired as determined by a qualified medical practitioner. OR

A parent/caregiver fails to seek ongoing or emergency mental health services for a child who is suicidal, threatening harm to self or others, including animals.

- *Child has no parent or guardian capable of providing appropriate care.* The parent/caregiver is unable to provide care for the child or youth.
  - » The parent/caregiver has been incarcerated or hospitalized, and there is inadequate or no provision for care for the duration of the parent/caregiver's absence. OR
  - » The parent/caregiver's whereabouts are unknown, and it appears that the parent/caregiver has no intention of returning. (If parent/caregiver absence does not appear permanent, select inadequate supervision. Permanent absence may be indicated by taking clothing or other belongings, quitting jobs, establishing another residence, or an absence that has exceeded planned return.) OR
  - » The parent/caregiver refuses to provide care for the child (e.g. parent kicks child out of the house or is threatening to do so) and as a result, the child has no parent/caregiver able to meet his/her needs for safety and well-being.
- *Failure or inability to protect.*
  - » The child is left with an inappropriate parent/caregiver (another child too young or developmentally incapable of supervising; a person known to neglect or abuse children; a person known to be violent, use alcohol/drugs, or have serious mental health concerns to the extent that his/her ability to provide care is significantly impaired). OR
  - » The parent/caregiver does not intervene despite knowledge (or reasonable expectation that the parent/caregiver should have knowledge) that the child is being harmed (includes physical, sexual, or emotional abuse or neglect) by another person.
- *Involving child in criminal activity.* The parent/caregiver causes the child to perform or participate in illegal acts that either:
  - » Create danger of serious physical or emotional harm to the child;

- » Expose the child to being arrested; or
- » Force a child to act against his/her wishes.

- *Child less than 12 years/criminal act/parents unable or unwilling to provide for needs.*

A child in the household is younger than 12 years of age and there are reasonable and probable grounds to believe that the child committed an act that, if the child were 12 years of age or more, would constitute an offence under the Criminal Code, the Narcotic Control Act (Canada);

AND

- » Family services are necessary to prevent a recurrence;

AND

- » The child's parent/caregiver is unable or unwilling to provide for the child's needs.

8. Threat of neglect (check all that apply)

No event has occurred; however, conditions exist that create a substantial likelihood that the child will be neglected.

- *Prior severe neglect, failed reunification, or failed services for neglect, and new child in the household.* There is credible information that a current parent/caregiver had one or more children for whom there was failed reunification or failed services as a result of neglect, OR a current parent/caregiver was previously substantiated for severe neglect; AND there is a new child now living in the home.
- *Prior death of a child due to neglect, and new child in household.*
- *Prenatal substance use.* There is a positive toxicology finding for a newborn infant or his/her mother OR other credible information that there was prenatal substance abuse by the mother (e.g. witnessed use, self-admission); AND there is indication that the mother will continue to use substances, rendering her unable to fulfill the basic needs of the infant upon discharge from the hospital AND may be unable or unwilling to meet the infant's basic needs.



- *Allowing a child to use drugs/alcohol.* The parent/caregiver provides (offers or knowingly allows the child to consume) alcohol, illegal drugs, or inappropriate prescription drugs to a child to the extent that it could endanger the child's physical health or emotional well-being, or result in exposure to danger because the child's thinking and/or behaviour are impaired. Consider the child's age and type of substance. For example:
  - » Providing methamphetamine, heroin, cocaine, or similar drugs to a child of any age;
  - » Providing enough alcohol to result in intoxication;
  - » Providing alcohol over time so that the child is developing dependency;
  - » Providing medications (includes prescription and over-the-counter) that are not prescribed for the child for the purpose of altering the child's behaviour or mood; or
  - » Providing glue or other inhalants to a child of any age.

Examples of substance use that should not be included are:

- » Use of small amounts of alcohol for religious ceremonies; or
  - » An older child is permitted to try a small amount of alcohol at a family occasion that did not result in intoxication.
- *Other high-risk birth.* No acts or omissions constituting neglect have yet occurred; however, conditions are present that suggest that only the external supports of the hospitalization or the limited time since birth are the reasons neglect has not occurred. Examples may include:
    - » Sole parent/caregiver or both parents/caregivers have not attended to the newborn in the hospital;
    - » Teen mother with no support system whose maturity level suggests she will be unable to meet the newborn's basic needs;
    - » A mother of any age with apparent physical, mental, or cognitive limitations who has no support system and may be unable or unwilling to meet the newborn's basic needs; or

- » A child was born with medical complications, and sole parent/caregiver's or both parents'/caregivers' response suggest parent/caregiver will be unable to meet the child's exceptional needs (e.g. does not participate in medical education to learn necessary care, indicates denial of diagnosis, etc.).

## Sexual Abuse

Sexual Abuse is defined in the following manner: the child has been or is likely to be exposed to harmful interaction for a sexual purpose, including sexual exploitation through the commercial sex trade and including conduct that may amount to an offence within the meaning of the Criminal Code.

9. Any sexual act on a child by an adult caregiver or other adult in the household, or unable to rule out household member as alleged perpetrator

If the legal guardian is not the perpetrator and there is a concern about his/her ability to protect, consider also "failure or inability to protect." *Note: Household is composed of all persons who have significant in-home contact with the child, including those who have a familial or intimate relationship with any person in the home.*

Based on verbal or nonverbal disclosure, medical evidence, or credible witnessed act. If child knows that the perpetrator is not a household member, but does not know his/her identity, DO NOT SELECT.

Examples include: sexual touching or posing, invitation of sexual touching, intercourse, bestiality, sexual assault, sexual assault with a weapon, aggravated sexual assault.

10. Sexual act(s) among siblings or other children living in the home  
Children in a household engage in sexual behaviour that is outside of normal exploration or involves coercion or violence.
11. Sexual exploitation  
The parent/caregiver involves the child in obscene acts or engages the child in sexual exploitation or pornography, or the child is involved in sexual exploitation regardless of parent/caregiver knowledge.
12. Threat of sexual abuse (check all that apply)  
No sexual act or exploitation has occurred; however, the parent/caregiver behaves in ways that create substantial likelihood that the child will be sexually abused.
  - *Known or highly suspected sexual abuse perpetrator lives with the child. An individual with a known or suspected record for sexual crimes lives in the same residence as the child.*

- *Severely inappropriate sexual boundaries.* Adults in the home allow children to see sexually explicit material, witness sexual acts, or hear sexual language that is inappropriate to their age/developmental status for the purpose of sexual gratification for the adult; AND/OR
- *Caregiver possesses or is suspected of possessing/accessing child pornography.* A person is suspected or known to view, access, or possess child pornography.
  - » This has resulted in the child exhibiting age-inappropriate sexual behaviour; OR
  - » Emotional distress; OR
  - » The child exhibits neither reaction, but the behaviour of the adult is seen as grooming the child for future sexual abuse.

**Grooming** refers to a deliberate and escalating pattern of actions taken to lower a child's inhibitions in preparation for sexual abuse (e.g. treating the child as "more special" than another child, talking about sexual topics that are age-inappropriate, exposing the child to pornography, deliberate self-exposure).

## **B. Screening Decision**

If any of the above criteria are checked, the decision must be screen in. If no criteria are checked, the decision must be screen out. Select the appropriate recommended decision and then consider whether any override conditions exist.

Screen in: One or more criteria are selected. Select this decision if any criteria in Step 1A (Screening Criteria) are selected, which means that at least one reported allegation meets statutory requirements for an investigation.

Screen out. Select this decision if no criteria in Step 1A (Screening Criteria) are selected, which means that the report does not meet statutory requirements for an investigation.

## **OVERRIDES**

Consider both policy and discretionary overrides. If no policy or discretionary overrides are present, check the "No overrides" box and record the final screening decision.

## Policy Overrides

Screen in: No criteria are selected, but referral will be assigned. No further SDM assessments required.

Select this decision if no criteria in Step 1A (Screening Criteria) are selected, which means that the report does not meet Section 11 requirements for an investigation. However, a referral will be opened for an investigation due to local protocol. When a report is screened in through a policy override, no further SDM assessments are required.

- *Courtesy interview at law enforcement's request.* A law enforcement agency has requested a worker to assist in interviews of children.
- *Report does not require screening but does require a non-investigatory response by the agency.* For example: Repatriation of a child to another jurisdiction pursuant to Section 7 of the Child and Family Services Act or a service request for another jurisdiction.
- *Provincial/territorial protocol on children and families moving between provinces and territories.*
- *Response required by court order.*

Screen out: One or more criteria are selected, but referral will not be assigned.

- *Insufficient information to locate child/family.* Insufficient information to locate child/family. The caller was unable to provide enough information about the child's identity and/or location to enable an investigation. Do not select this item if partial information is available. Screener should either follow up on information to establish child's identity/location or forward screened-in referral for investigation.
- *Another community agency has jurisdiction.* Local protocol determines that agencies such as a First Nations Agency, law enforcement, probation, or court will be the investigating entity(ies) for this issue AND a child welfare response is not required.
- *Report of historical event and no current risk of harm described.* (record the time since alleged incident in months and years:) Note: Do not use if referred incident is sexual abuse unless the reported perpetrator is deceased or incarcerated until the time the victim is an adult.

- *Previously investigated incident and same allegation.* The reported incident contains the same allegations as a prior referral that has been screened in and investigated, regardless of whether the investigation is complete. Do not apply this override if new perpetrators, victims, or allegations are involved, or if there has been a new incident subsequent to the assessment/investigation.

### **Discretionary override to screen in or screen out**

Unique circumstances not captured by the screening criteria support a final screening decision different from the recommended screening decision. For example, the referral does not contain any current allegations of abuse or neglect, but significant prior history on the family suggests a response is warranted (e.g. third-party abuse—physical, emotional, or sexual—and parent/caregiver is requesting services on behalf of the child). Use of discretionary override requires consultation with a supervisor.

## **STEP 2: RESPONSE PRIORITY**

### **A. Decision Trees**

Complete the decision trees based on the criteria selected in Step 1A unless the criterion selected requires an automatic immediate response. **If there is an automatic immediate response**, go directly to the override section. If a discretionary override is used to screen in a referral, do not complete any of the decision trees. Go to Step 2B and assign the response time based on the prospective safety of the child.

### **Physical Abuse**

Is the child under 3 years of age or vulnerable due to disability or in need of immediate medical attention, or were parent/caregiver actions or threats brutal or extremely dangerous?

- The child has not reached his/her third birthday or has the equivalent vulnerability of a child under the age of 3 years due to developmental, physical, or emotional disability.
- The child requires immediate medical evaluation or treatment or is currently receiving emergency medical evaluation or treatment. Exclude evaluation solely for forensic purposes, medical evaluation, or treatment that has concluded.
- Regardless of whether an injury has occurred, the parent/caregiver acted in brutal or extremely dangerous ways; or the parent/caregiver has made threats (other than empty threats or threats made solely for intimidation) of brutal or extremely dangerous acts toward the child. Examples include the following.

- » Brutal: hitting with closed fist; hitting child's head, back, or abdomen with substantial force; choking, kicking, or hitting with belt buckle or other dangerous object; using restraints; poisoning. Consider age and vulnerability of the child. Include actions that could reasonably result in severe injury or death.
- » Child is presently being threatened with a dangerous weapon by a parent/caregiver.
- » Extremely dangerous: dangling the child from heights, exposing the child to dangerous extremes of temperature, or throwing objects at the child that could cause severe injury or death.
- » Self-referrals from parents/caregivers who state that they are unable to cope or feel they will hurt or kill their child.

Does the alleged perpetrator have access to the child within the next five days?

Does the alleged perpetrator live in the home or have access to the child in the home, or has the alleged perpetrator physically contacted the child away from the home or threatened to physically contact the child away from the home?

Is there prior history of physical abuse, current domestic violence, parent/caregiver mental health concerns, or substance abuse concerns, OR is the child fearful or vulnerable?

There is credible information\* that:

- There are one or more prior investigations for physical abuse; or
- There are physical altercations between the parent/caregiver and another adult living in the home within the past year, regardless of whether the child was present. Include situations where one of the adults does not live in the home but has substantial contact in the home, or has lived in the home but continues to behave in threatening ways.

\*Credible information includes statements by the reporter, past investigation or case records, or police reports.

- A parent/caregiver has current mental health concerns based on diagnosis of a major mental illness (e.g. schizophrenia, bipolar disorder, depression) or exhibits symptoms that suggest a probability that such a diagnosis exists, such as hearing voices; paranoid thoughts; severe mood changes; suicidal thoughts or behaviour; or extremely depressed affect, thoughts, or behaviours that present danger to self or others.
- A parent/caregiver has a substance abuse problem.

- » The parent/caregiver is diagnosed with chemical dependency or abuse AND is currently using. Current use does not require that parent/caregiver be under the influence at the moment of the call, but that the parent/caregiver has used within the past two weeks and has not entered into a formal or informal program to achieve abstinence; OR
- » The parent/caregiver is using illegal drugs; OR
- » The parent/caregiver's alcohol use suggests a probability that dependency or abuse exists, such as blackouts, secrecy, negative effects on job or relationships, rituals around drinking, etc.

OR

- Does the child express credible fear of going/remaining home?
- A child is vulnerable if, due to age, developmental status, or physical disability, he/she is unable to protect him/herself and/or will not be seen within the five days by other adults who would report concerns (e.g. school personnel).

Is there a protective adult in the home?

An adult is protective if:

- He/she is not the alleged perpetrator, and there is information that he/she is able and willing to prevent further physical abuse incidents. When assessing likelihood of prevention, consider whether he/she has successfully intervened against aggression toward the child in the past, has awareness of the current incident, or has a commitment to nonviolent parenting. An indicator of protectiveness may be that the alleged incident occurred more than 60 days ago with no subsequent incident. OR
- He/she may have been the alleged perpetrator, but he/she still can be considered currently protective if there is information that he/she has acknowledged the harm caused to the child and expressed remorse and commitment to future nonviolent parenting, and there has been an absence of physically abusive behaviour by the parent/caregiver for at least five days. Answer "no" if there is a pattern of cyclical violence and remorse.

## Neglect

Does the child need immediate medical/mental health evaluation, and care is not being provided?

Medical personnel indicate that the child needs immediate medical/mental health attention; or the presence of failure-to-thrive indicators, e.g. underweight, minor not fed, listlessness; or the refusal of the parent/caregiver to meet the child's medical/mental health needs or treat a serious or significant injury/condition; or the child is actively considering or planning suicidal act and parent/caregiver's not providing the necessary care.

Are the child's physical living conditions immediately hazardous to his/her health or safety?

Based on the child's age and developmental status, the child's physical living conditions are hazardous and immediately threatening. Examples include the following.

- Leaking gas from stove or heating unit.
- Substances or objects accessible to the child that may endanger his/her health and/or safety.
- Lack of water or utilities (heat, plumbing, electricity) and no alternate or safe provisions are made.
- Open/broken/missing windows.
- Exposed electrical wires.
- Excessive garbage or rotted or spoiled food that threatens the child's health.
- The child has suffered serious illness or significant injury due to living conditions, and these conditions still exist (e.g. lead poisoning, rat bites).
- Evidence of human or animal waste throughout living areas.
- Guns and other weapons are not locked.
- Methamphetamine production in the home.

Is the child currently unsupervised?

Based upon local community standards, the child is not receiving appropriate supervision from his/her parent/caregiver, and there is no appropriate alternative plan for supervision pending commencement of a response within five days.

- The child is currently alone (time period varies with age and developmental stage).



- The parent/caregiver does not attend to the child to the extent that need for care goes unnoticed or unmet (e.g. the parent/caregiver is present, but the child can wander outdoors alone, play with dangerous objects, play on unprotected window ledge, or be exposed to other serious hazards; a child with some suicidal ideation is not closely monitored).
- The child is currently receiving inadequate and/or inappropriate child care arrangements.
- The child has been abandoned and has no parent/caregiver willing and able to provide care for a minimum of five days.

Is the child a drug-exposed newborn who will be discharged within five days AND no parent/caregiver appears willing and/or able to provide for the child upon discharge?

The hospital advises that the newborn will be discharged within five days OR there is reason to believe that the parent/caregiver will remove the child against medical advice; AND the sole parent/caregiver or both parents/caregivers do not appear willing and/or able to provide for the child. Indicators include the following.

- The parent/caregiver uses substances (such as methamphetamine, heroin, or cocaine) that typically result in severely impaired ability to function.
- The frequency and/or quantity of parent/caregiver substance use suggests a high probability that he/she will be unable to meet the needs of the newborn upon discharge.
- Prior failed reunification.

## **Sexual Abuse**

Is there current abuse as evidenced by disclosure, credible witnessed account, or medical evidence?

Disclosure may be verbal or nonverbal (e.g. extreme sexual acting-out behaviour). Medical evidence includes medical findings related to sexual abuse, as well as suspicious findings such as sexually transmitted diseases in young children.

Is there a current physical injury as a result of the abuse, or is the child suffering severe emotional trauma?

Does the child have an injury that occurred as a result of the reported sexual abuse incident(s)?  
Is the child reported to be suffering severe emotional trauma as a result of the sexual abuse?

Is the non-offending parent/caregiver willing and able to protect and cooperate?

Is the non-offending parent/caregiver supporting the child's disclosure and demonstrating the ability/willingness to prevent the alleged perpetrator from having access to the child? Will the non-offending parent/caregiver not pressure the child to change his/her statement? Will the non-offending parent/caregiver cooperate with the investigation?

Does the perpetrator have access to the child within the next five days?

Does the suspected perpetrator have the ability to have physical, verbal, or written contact with the child?

## **Emotional Abuse**

Does the child need mental health evaluation, and care is not being provided?

Is the child exhibiting behaviour that requires immediate mental health evaluation as evidenced by the following AND care is not being provided?

- Is the child threatening to commit suicide, behaving in suicidal ways, or harming him/herself (e.g. cutting)?
- Is the child currently acting out in extremely violent ways or threatening to act in violent ways? Examples include using guns, knives, explosives, fire-setting, and/or cruelty to animals.
- Is the child acutely depressed, anxious (e.g. unable to perform basic tasks of daily living), or withdrawn? For example, the child has an inability to engage in any social activity.

Is the parent/caregiver behaviour cruel, bizarre, or extremely dangerous?

Examples include the following.

- Bizarre, extreme, or cruel behaviour. For example, the parent/caregiver harms or threatens to harm pets/animals or threatens suicide or harm to family members (other than the child); confines the child in places such as closets or animal cages; consistently scapegoats the child; consistently berates, belittles, or shames the child. There is extreme discord in custodial arrangements or alienation of one parent/caregiver by another.
- Unusual forms of discipline that rely on humiliation, fear, and intimidation, such as forcing a 10-year-old to wear diapers or forcing the child to stand in a corner on one leg.

- Extreme rejection of the child, such as not speaking to the child for extended periods, acting as if the child is not present for long periods, or misusing time-out technique by using time limits far beyond what would be appropriate for the child's age/developmental status. Domestic violence incidents that involve weapons resulting in serious injury to any adult, or during which the child attempts to intervene or is directly in the path of violence.

## **OVERRIDES**

### **Increase to immediate whenever:**

- Law enforcement is requesting immediate response. A law enforcement officer is requesting an immediate child protective services response.
- Forensic considerations would be compromised by slower response. Physical evidence necessary for the investigation would be compromised if the investigation does not begin immediately, OR there is reason to believe statements will be altered if interviews do not begin immediately.
- There is reason to believe that the family may flee. The family has stated an intent to flee or is acting in ways that suggest an intent to flee, OR there is a history of the family fleeing to avoid investigation.

### **Decrease to five days whenever:**

- Child safety requires a strategically slower response. The child's current location is such that initiating contact may create a threat to the child's safety OR the value of coordinating a multiagency response outweighs the need for immediate response.
- The child is in an alternative safe environment. The child is no longer in the same place or is with the parent/caregiver who is the alleged perpetrator, and the child is not expected to return within the next five days.
- The alleged incident occurred more than six months ago AND no maltreatment is alleged to have occurred in the intervening time period. The incident being reported occurred at least six months prior to the report AND no other maltreatment is alleged to have occurred in the intervening time period.