CHILD SAFETY FACTORS GUIDELINES

The Child Safety Factors Guidelines is to be used when completing the Child Safety Assessment.

Definition of Threatened Harm:
Threatened harm means any reasonably foreseeable substantial risk of harm to a child. Behavior/environment poses a risk but no actual harm has happened.

Key: * = actual harm, not threatened harm.

1. Behavior of primary-caregiver or others the primary-caregiver has allowed access to the child is violent or threatening violence.
   a. Parent/caregiver(s), regardless of gender, who are impulsive, exhibiting physical aggression, temper outbursts, or unanticipated and harmful physical reactions such as throwing things which causes danger to the child.
   b. Parent/caregiver’s behavior outside of home (e.g., drugs, violence, aggressiveness, hostility, etc.) creates an environment within the home which threatens child safety (e.g., drug parties, gangs, drive-by shootings, etc.).
   c. Violence includes acting dangerously toward a child or others including throwing things, bantering weapons, driving recklessly, aggressively intimidating and terrorizing.
   d. Family violence involves physical and verbal assault on a parent in the presence of a child; the child witnesses the activity and is fearful for self and/or others.
   e. Family violence occurs and a child has been assaulted. *
   f. Family violence occurs and a child has attempted to intervene.
   g. Family violence occurs and a child could reasonably be inadvertently harmed even though the child may not be the actual target of the violence.
   h. Other

2. Parent/caregiver has not, will not, or cannot provide sufficient supervision to protect the child from present or impending danger.
   a. Parent/caregiver does not attend to the child; the need for care goes unnoticed or unmet (e.g., child wanders outdoors alone, plays with dangerous objects, plays on unprotected window ledge, or is exposed to other serious hazards, etc.).*
   b. Parent/caregiver does not know or apply basic safety measures such as keeping medications, sharp objects, household cleaners, etc. out of reach.
   c. Parent/caregiver leaves child alone (acceptable time period varies with age and developmental stage).*
   d. Parent/caregiver makes inadequate and/or inappropriate baby-sitting or child care arrangements and/or demonstrates very poor planning for child’s care.
   e. Parent/caregiver makes impulsive decisions and plans that may leave child in precarious situations such as unsupervised or supervised by an unreliable person.
   f. Parent/caregiver is/has been absent from the home for lengthy periods of time, no other adult is available to provide basic care.*
   g. Parent/caregiver has abandoned the child.*
   h. Parent/caregiver arranged for care by an adult, but parent/caregiver’s whereabouts is unknown, or parent/caregiver has not returned according to plan, and child is with a
caregiver who is unable or unwilling to care for the child now.

i. The child has been abandoned at an institution or with someone who does not know who the caregiver is.*

j. Parent/caregiver has left the child with someone, but the parent/caregiver has not returned according to plans, or did not express plans to return, or has been gone longer than the person keeping the child expected or would be normally acceptable.

k. Other

3. Death of a sibling or other child in the household has occurred due to abuse/neglect or uncertain circumstances.

a. A child has died as a result of abuse or neglect.*

b. Cause of child’s death is uncertain/suspicious.

c. Other

4. One or more parent/caregivers’ behavior is dangerously impulsive or they will not/cannot control their behavior.

a. Parent/caregiver can not control sexual impulses.* Adult and parent/caregiver cannot protect the child.

b. Sexually abusive parent/caregiver has unsupervised access to the child.

c. Sexual abuse has occurred in which: the child discloses; family circumstances including opportunity may or may not be consistent with sexual abuse; and the parent/caregiver denies, blames the child or offers no explanation or an unbelievable explanation.*

d. Child is prostituted/exploited.*

e. Report of sexual abuse of child in the family of similar age/gender.

f. A person responsible for a child’s care allowing an untreated sex offender to reside in the household with unsupervised access to the child, or allowing the offender to have unsupervised contact with a child.

g. Adult uses child to sell or transport drugs*

h. Drug transactions occur in the home.

i. Parent/caregiver(s) have addictive patterns/behavior that are uncontrolled and leave the children in threatening situations such as failing to supervise or provide other basic care; may include addiction to substances, gambling, computers, etc.

j. Parent/caregiver who is not taking prescribed medication which is necessary for basic parental functioning

k. Parent/caregiver is seriously depressed and unable to control emotions or behaviors.

l. Primary caregiver is chemically dependent and unable to control the dependency’s effects.

m. Parent/caregiver makes impulsive decisions and plans that leave the children in precarious situations (e.g., unsupervised, supervised by an unreliable caregiver).

n. Parent/caregiver spends money impulsively resulting in a lack of basic necessities.*

o. Parent/caregiver is emotionally immobilized (chronically or situational) and cannot control behavior.

p. Parent/caregiver is delusional and/or experiencing hallucinations.

q. Other

5. The current abuse or neglect is severe and suggests that there may be present or impending danger to the child.
a. Child has sustained injuries to the head/face.*
b. Child has multiple injuries on different parts of the body.*
c. Child has injuries in different stages of healing.*
d. Child’s injuries require medical attention.*
e. Child has extensive bruising.*
f. Child sustained internal injuries as a result of the abuse.*
g. Failure to thrive.*
h. Starvation/extreme malnutrition.*
i. Locking a child up/restraining a child.*
j. Child has been tortured.*
k. The incident was planned; had some element of premeditation. *
l. The nature of the incident or use of an instrument used can be reasonably assumed to heighten the level of pain or injury; e.g. cigarette burns. *
m. Parent/caregiver(s) can reasonably be assumed to have had some awareness of what the result would be prior to incident. *
n. Parent/caregiver(s) action was not impulsive; there was sufficient time and deliberation to assure that the actions hurt the child.*
o. Parent/caregiver(s) do not acknowledge any guilt or wrong doing and they intended to hurt the child.*
p. Parent/caregiver(s) shows no empathy for the pain or trauma the child has experienced and they intended to hurt the child.*
q. Parent/caregiver(s) may feel justified; may express that the child deserved it and they intended to hurt the child.*
r. The child has a credible account of the injury, which contradicts the explanation of the parent/caregiver.*
s. Parent/caregiver acknowledges the presence of injuries and/or conditions, but does not explain them or seem concerned.*
t. Parent/caregiver acknowledges the presence of injuries and/or conditions, but pleads ignorant as to how they came to be.*
u. Parent/caregiver may express concern for child's condition, but is unable to explain it. *
v. Family appears to be totally competent and appropriate with the exception of the abuse or neglect and the lack of an explanation or an explanation that makes no sense. *
w. "Battered Child Syndrome" case circumstances are present in which the family appears to be competent, but the child's symptoms do not match the family appearance and there is no explanation for the child's symptoms.*
x. Parent/caregiver’s explanations are far-fetched. *
y. Facts related to the conditions, the incident and injury, as observed by CPS and/or supported by other professionals, contradict explanations. *
z. History and circumstantial information are incongruent with the parent/caregiver’s explanation about the injuries and conditions.*
aa. Parent/caregiver’s verbal expressions do not match emotional response and there is not a believable explanation. *
bb. Other

6. Parent/caregiver’s impairment due to drug or alcohol abuse is seriously affecting his/her ability to supervise, protect, or care for the child.
a. Substance abuse prevents parent/caregiver from protecting or providing for the child.
b. Other safety factors are directly related to the use of drugs or alcohol.
c. Caregiver has addictions or periods of incapacitation due to substance abuse or other drug usage.

d. Drugs used in presence of children or paraphernalia left around and accessible to children.

e. Parent/caregiver drives with child in vehicle when legally intoxicated or appearing to be incapacitated by substance abuse.*

f. Other

7. There have been reports of harm and the child’s whereabouts cannot be ascertained and/or there is a reason to believe that the family is about to flee or refuses access to the child.
   a. Family is highly transient.
   b. Family has little tangible attachments (e.g., job, home, property, extended family, etc.).
   c. Parent/caregiver is evasive, manipulative, no-shows, suspicious.
   d. There is precedence for avoidance and flight.
   e. There are or will be civil or criminal complications that family wants to avoid.
   f. There are other circumstances prompting flight (e.g., warrants, false identities uncovered, criminal convictions, financial indebtedness, etc.).
   g. Parent/caregiver refuses to speak with CPS.
   h. Parent/caregiver is openly hostile and physically aggressive toward CPS.
   i. Parent/caregiver refuses access to the home.
   j. Parent/caregiver hides child; refuses access to child.
   k. Parent/caregiver avoids all contacts, fails to keep appointments, never shows up, and is never home.
   l. Parent/caregiver constantly lies and deceives in respect to the child, the child's condition, home conditions, events and circumstances related to the report and CPS intervention.
   m. Other

8. Child is fearful of being harmed by people living in or frequenting the home.
   a. Child describes threats against him or her that seem reasonable and believable.
   b. Child has reasonable fears of retribution or retaliation from parent/caregiver.
   c. Child demonstrates emotional and physical responses indicating fear of the home or people within the home (e.g., crying, jitters, inability to focus, withdrawal, nightmares, insomnia, etc.).
   d. Child states fearfulness and describes people and circumstances that are reasonably threatening.
   e. Child recounts previous experiences that form the basis for fear.
   f. Child's fearful response escalates at the mention of home, people or circumstances associated with reported incidents.
   g. Domestic violence situations involving physical and verbal assault on a parent/caregiver in the presence of a child and child is fearful for self and others.
   h. Other

9. Parent/caregiver has not or is unable to meet the child’s immediate needs for food, clothing, shelter, or medical care where the absence of these necessities is creating present or impending danger to the child.
   a. Parent/caregiver is or will be incarcerated, leaving the home without a responsible adult.

Revised: 3-11
b. Failure to be given prescribed medication endangers the child’s life or causes illness.*

c. Child complains of extreme pain for which the parent/caregiver does not seek medical attention.*

d. Unreasonable delay in obtaining medical or dental services that endangers the child’s life or places child at risk of permanent disability.*

e. Parent/caregiver refuses medical care for child’s serious condition based on religious or social reasons.

f. A lack of motivation results in parent/caregiver abandoning their role to meet basic needs or failing to adequately perform the parent/caregiver role which would meet the child’s basic needs. The inability/ unwillingness to meet basic needs create a safety concern for the child.*

g. Lack of hygiene is so dramatic as to cause or potentially cause serious illness.*

h. Infant has not been fed for 12 hours.*

i. Food is not provided or only provided sporadically.*

j. Clothes are inadequate to protect child from the elements.*

k. Family has no food, clothing or shelter.*

l. Family finances are insufficient to support unusual need that, if unmet, could result in a threat of harm (e.g., medical need, etc.).

m. Family may be using resources for other than basic needs which leaves the family and children routinely without basic needs being met adequately (e.g., using resources for drugs, etc.).*

n. Because of unusual condition, the basic need of a child exceeds normal expectations and family is unable to adequately address (e.g., disabled child, etc.).*

o. Primary caregiver does not know what basic care is or how to provide it (e.g., how to feed, diaper, protect or supervise appropriate to child’s age, etc.).*

p. Parent/caregiver’s skill in parenting is exceeded by special needs and demands that a child displays in ways that affect safety.*

q. Parent/caregiver’s knowledge and skill is adequate for some children’s age and development, but not for others (e.g., can take care of an infant, but can not control a toddler, etc.).

r. Parent/caregiver does not want to be a caregiver and does not perform role, particularly in terms of basic needs.*

s. Parent/caregiver has an aversion to parenting and does not attend to basic needs.*

t. Parent/caregiver avoids the responsibilities concerned with parenting and basic care.*

u. Child has a physical or mental condition, that if untreated, serves as a threat of harm to the child’s safety and caregiver can not or will not control/address it.

v. Parent/caregiver does not recognize condition.

w. Parent/caregiver views condition as less serious than it is.

x. Young or limited parent/caregiver who has little or no knowledge of child's needs and capacity.

y. Other

10. The child’s physical living conditions are hazardous and present a situation of present or impending danger.

a. Housing is unsanitary, filthy, infested, a health hazard (e.g., human/animal feces, undisposed garbage, access to dangerous objects or harmful substances, etc.).

b. The physical structure of the house is decaying, falling down.

c. Wiring and plumbing in the house are substandard, exposed.
d. Furnishings or appliances are hazardous.
e. Heating, fireplaces, stoves, etc. are hazardous and accessible.
f. The home has easily accessible open windows, balconies, etc. in upper stories.
g. Methamphetamine lab exists in home with children. Methamphetamine making materials are present in/around the home.*
h. Other

11. Parent/caregiver has a severe or chronic mental or physical illness or disability and current protective factors are not in place to ensure child safety.
   a. Parent/caregiver(s) disorders reduce their ability to control their behavior in ways that threaten safety (e.g., extreme fears, phobias, etc.).
   b. Parent/caregiver is emotionally immobilized (chronically or situation ally) and can not control his/her behavior in ways that threaten safety.
   c. Parent/caregiver is delusional; experiencing hallucinations.
   d. Parent/caregiver is so depressed that he/she is not functionally able to meet basic needs of the child.*
   e. Parent/caregiver’s intellectual incapacity affects judgment/knowledge in ways that prevent providing adequate basic care.*
   f. Other

12. Child is vulnerable due to lack of self-protection skills or the presence of special needs that parent/caregivers are unwilling to meet, and these are presenting the threat of present or impending danger.
   a. Provocative behaviors (sexually or physically acting out, aggressive, etc.) that do not demonstrate the ability to self-protect.
   b. Seeks out or stimulates physical aggression as a means of gaining attention.
   c. Child threatens or attempts suicide.
   d. Child talks about suicidal thoughts.
   e. Child's emotional state is such that immediate mental health/medical care is needed and primary caregiver will not provide the care.
   f. Child is capable of and likely to self-mutilate.
   g. Child is a physical danger to others.
   h. Child abuses substances; may overdose and parent/caregiver have no strategy to deal with it.
   i. Child is so withdrawn that basic needs are not being met.
   j. Child exhibits severe anxiety or depression.
   k. Child is born drug exposed or has fetal alcohol syndrome.
   l. Other

13. Parent/caregiver describes or acts toward the child in predominantly negative terms or has extremely unrealistic expectations given the child’s age or level of development and this presents present or impending danger.
   a. Parent/caregiver’s expectations of a child far exceed the child's capacity; thus, placing the child in harmful situations (e.g., allows young child to boil water, plug in appliances, etc.).
   b. Parent/caregiver’s expectations of the child are totally unrealistic in view of the child's condition.
   c. Parent/caregiver expects a child to perform or act in a way that is improbable/impossible
given the child’s age (e.g., babies and young children expected not to cry; remain still for extended periods of time; not to soil themselves/be toilet trained; eat neatly; care for younger siblings; stay alone, etc.).

d. The child is seen as the devil, demon possessed, evil, bastard, product of rape, etc.
e. The child has taken on the same identity, as someone the parent/caregiver hates, is hostile toward, fearful of, and parent/caregiver transfers feelings and perceptions of the person to the child (e.g., mother who hates child’s father, etc.).
f. The child is seen by the parent/caregiver as deformed, ugly, deficient, and embarrassing.
g. The child is considered by the parent/caregiver to be punishing, torturing them.
h. One parent/caregiver is jealous of the child and believes the child is a detriment or threat to the parent/caregiver’s relationship or stands in the way of the parent/caregiver’s best interest.
i. Parent/caregiver sees child as an undesirable extension of self and this results in extremely harsh/dangerous treatment of child.
j. Child is blamed and held accountable for CPS involvement.
k. Parent/caregiver’s unreasonably or in hostile manner directly associate difficulties in their lives, limitations to their freedom or financial or other burdens to the child.
l. Conflicts that parent/caregiver’s experience with others (e.g., family members, neighbors, friends, school, police, CPS, etc.) are considered to be the child’s fault.
m. Losses (e.g., job, relationships, etc.) the parent/caregiver experiences are attributed to the child.
n. Child is openly unwanted.
o. Other

14. Parent/caregiver lacks the knowledge, skill, or motivation to parent and this presents a threat of present or impending danger.
a. Because of an unusual condition, the basic needs of the child exceed normal expectations and the family is unable to adequately address (e.g., disabled child).*
b. Parent/caregiver does not know what basic care is or how to provide it (e.g., how to feed, diaper, protect or supervise appropriate to child’s age).
c. Parent/caregiver’s skill in parenting is exceeded by special needs and demands that a child displays in ways that affect safety.
d. Parent/caregiver’s knowledge and skill are adequate for some children’s ages and developmental stages, but not for others (e.g., can take care of an infant but cannot control a toddler).
e. Parent/caregiver does not want to be a caregiver and does not perform role, particularly in terms of basic needs. *
f. Parent/caregiver does not recognize the condition.
g. Parent/caregiver views the condition as less serious than it is.
h. Parent/caregiver leaves child alone (acceptable time period varies with age and developmental stage).
i. Previous termination of parental rights and no evidence of rehabilitation
j. Child is living with or cared for by a person who has been convicted of child abuse or neglect of any child in the past and no evidence of rehabilitation
k. New child born to or going to live with a caregiver who has other children in out of home care
l. Other
15. Parent/caregiver and others with access to the child has made credible threats which would result in present or impending danger to the child.
   a. Parent/caregiver states he/she will harm the child.
   b. Parent/caregiver describes conditions and situations that stimulate him/her to think about harming the child.
   c. Parent/caregiver talks about being worried, fearful, preoccupied with abusing or neglecting the child.
   d. Parent/caregiver identifies things that the child does that aggravate, annoy the parent/caregiver in ways that the parent/caregiver wants to attack the child.
   e. Parent/caregiver describes incidents involving discipline that have gotten out-of-hand.
   f. Parent/caregiver is distressed, "at the end of their rope", and is asking for some relief in either specific terms ("take the child") or general terms ("please help me before something awful happens").
   g. One parent/caregiver is expressing a concern for what the other parent/caregiver or someone in a caregiving role is capable of or may do.
   h. Other