SWIFT COUNTY CHILD PROTECTION ASSESSMENT SCREENING CRITERIA GUIDE
April, 2004

I. Introduction

The following screening criteria was established in an attempt to enhance consistency when assigning child protection assessments in accordance with M.S. 626.556. Agency staff responsible for screening child maltreatment reports must continue to exercise professional judgment in determining which reports require formal assessment.

II. Neglect

Neglect[1] means failure by a person responsible for a child's care to supply a child with necessary food, clothing, shelter, health, medical, or other care required for the child's physical or mental health when reasonably able to do so; failure to protect a child from conditions or actions that seriously endanger the child's physical or mental health when reasonably able to do so; failure to provide for necessary supervision or child care arrangements appropriate for a child after considering factors as the child's age, mental ability, physical condition, length of absence, or environment, when the child is unable to care for the child=s own basic needs or safety, or the basic needs or safety of another child in their care; failure to ensure that the child is educated in accordance with state law (120A.22[1] & 260C.163, subd. 11[2]), which does not include a parent's refusal to provide the parent's child with sympathomimetic medications, consistent with section 125A.09, subdivision 3.

Nothing in this section shall be construed to mean that a child is neglected solely because the child's parent, guardian, or other person responsible for the child's care in good faith selects and depends upon spiritual means or prayer for treatment or care of disease or remedial care of the child in lieu of medical care; except that a parent, guardian, or caretaker, or a person mandated to report has a duty to report if a lack of medical care may cause serious danger to the child's health. This section does not impose upon persons, not otherwise legally responsible for providing a child with necessary food, clothing, shelter, education, or medical care, a duty to provide that care.

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[1] Compulsory Instruction@ statute

[2] Presumptions regarding truancy or educational neglect: AA child's absence from school is presumed to be due to the parent's, guardian's, or custodian's failure to comply with compulsory instruction laws if the child is under 12 years old and the school has made appropriate efforts to resolve the child's attendance problems; this presumption may be rebutted based on a showing by clear and convincing evidence that the child is habitually truant. A child's absence from school without lawful excuse, when the child is 12 years old or older, is presumed to be due to the child's intent to be absent from school; this presumption may be rebutted based on a showing by clear and convincing evidence that the child's absence is due to the failure of the child's parent, guardian, or custodian to comply with compulsory instruction laws@

Neglect includes prenatal exposure to a controlled substance, as defined in section 253B.02, subd. 2[3], used by the mother for a non-medical purpose, as evidenced by withdrawal symptoms in the child at birth, results of a toxicology test performed on the mother at delivery or the child at birth, or medical effects or developmental delays during the child's first year of life that medically indicate prenatal exposure to a controlled substance.
Neglect also means Amedical neglect@ as defined in section 260C.007, subd. 4, clause (5)[4].

Swift County will normally assess the following types of reports:

A. Medical Neglect

1. Consistent refusal or failure to seek medical treatment for illness or injury.
2. Inappropriate medication or lack of follow through on medical, dental or mental health care for a health problem, symptoms or condition which, if untreated, could place the child in immediate or future jeopardy, incapacitation or death.
3. Prenatal exposure to substance abuse, as evidenced by a positive toxicology screen on the mother or infant.

B. Failure to Thrive Based on a health care professional=s referral.

C. Failure to Provide Adequate Food, Shelter and/or Clothing.

1. Inadequate Shelter - The periodic or continuing failure to provide adequate shelter and protection from weather elements and from environmental hazards in the dwelling and on the property, which have the potential for injury, illness and/or disease in which are under control of the caretaker.

    a. Adequate shelter includes appropriate heat, appropriate sanitation and appropriate sleeping arrangements.
    b. Environmental hazards in the home or on the property include, but are not limited to, items such as a broken window or glass, gas leaks, open and accessible containers of dangerous drugs or household poisons, exposed electric wiring, scalding water, unprotected space heaters, lead-based paint,

[3] For purposes of this section and section 626.5562, Acontrolled substances@ means a controlled substance listed in section 253B.02, subdivision 2 (cocaine, heroin, phencyclidine, methamphetamine, and amphetamine, or their derivatives).
[4] M.S. 260C.007, subdivision 4, clause (5): AMedical neglect@ includes, but is not limited to, the withholding of medically indicated treatment from a disabled infant with a life-threatening condition. The term Awithholding of medically indicated treatment@ means the failure to respond to the infant=s life-threatening conditions by providing treatment, including appropriate nutrition, hydration, and medication which, in the treating physician=s or physicians= reasonable medical judgment, will be most likely to be effective in ameliorating or correcting all conditions, except that the term does not include the failure to provide treatment other than appropriate nutrition, hydration, or medication to an infant when, in the treating physician=s or physicians= reasonable medical judgment: (i) the infant is chronically and irreversibly comatose; (ii) the provision of treatment would merely prolong dying, not be effective in ameliorating or correcting all of the infant=s life-threatening conditions, or otherwise be futile in terms of the survival of the infant; or (iii) the provision of the treatment would be virtually futile in terms of the survival of the infant and the treatment itself under the circumstances would be inhumane.

discarded refrigerators with doors, open wells without covers, animal wastes, feces, rodents and insects.

2. Inappropriateness of condition of clothing presenting a health or safety hazard.

3. Inadequate Food

   a. Child routinely lacks sufficient quantity or quality of food.

   b. Child suffers from malnutrition or developmental lags.

D. Failure to Protect

1. Person poses physical or sexual threat to child(ren) and parent or caretaker does not act to protect child(ren).
2. Parent or caretaker exposes children to threatening or dangerous conditions or situations.
3. Report of abuse between siblings and parent or caretaker does not act to protect child(ren).
4. The parent or other person responsible for the care of the child engages in violent behavior that demonstrates a disregard for the well-being of the child as indicated by action that could reasonably result in serious physical, mental, or threatened injury, or emotional damage to the child.

E. Chronic and severe use of alcohol or a controlled substance by a parent or person responsible for the care of the child that adversely affects the child=s basic needs and safety.

F. Reports of abandonment, desertion or illegal placements, including illegal adoptions.

G. Lack of Supervision: Failure to provide necessary supervision or child care arrangements appropriate for a child after considering factors as the child's age, mental ability, physical condition, length of absence, or environment when the child is unable to care for the child's own basic needs or safety, or the basic needs or safety of another child in their care.

1. The decision to assess the reports of unsupervised children will be made in light of the following considerations, according to the Swift County Family Services policy:

   a. Length of time.
   b. The maturity and intellectual level of the child(ren).
   c. The accessibility of the parent, guardian or other designated adult.
   d. The health or physical status of the child(ren).
   e. The behavioral history of the child(ren).
   f. Whether a child is using a stove, iron or appliance which poses a danger because of their age.
   g. Whether the parents have discussed an escape plan, held a fire drill and discussed emergency safety procedures with the child(ren).

h. Whether the residence has an operational smoke detector.
i. Whether there are unusual and/or dangerous hazards in the home.
j. The children's reaction to being left alone.
k. The ages and number of the children in the home.
l. Whether the child has completed a Babysitting Clinic.

H. The reliability/capability of the person the parent has chosen to provide supervision.

1. Based on the above factors, the following reports will be considered for assessment:

   a. Reports of children 7 and younger left alone.
   b. Reports of children 8-9 left home alone for more than 3 hours.
   c. Reports of children 10 through 13 alone for more than ten hours.
   d. Reports of children 14 and 15 alone for up to 24 hours.
   e. Reports of children ages 16 or older where the parent has been gone for 24 hours or more if the children did not know the whereabouts of the parent or when they will return.
   f. Reports indicating that teenage children are left unsupervised while parents are on an extended absence will be screened, considering adequate adult back-up supervision.

2. Based on the above factors, Swift County accepts the following guidelines for older children providing supervision to younger children:

   a. It is acceptable for children ages 10-11 to babysit for short periods of time.
   b. It is acceptable for children ages 12-13 to babysit, with the expectation that the parent, guardian or caretaker will be returning to supervise the child within 10 hours.
   c. It is acceptable for children ages 14 and 15 to babysit, with the expectation that the parent, guardian or caretaker will be returning to supervise the children within 24 hours.
   d. It is acceptable for children ages 16 and older to babysit younger children for more than 24 hours if the whereabouts of the parent and when they are to return are known and appropriate contacts can be made with the parent or designated adult.

I. Educational Neglect

Failure to take steps to ensure that a child is educated in accordance with state law. Presumptions regarding truancy or educational neglect (260C.163, subd. 11) are as follows: A child's absence from school is presumed to be due to the parent's, guardian's, or custodian's failure to comply with compulsory instruction laws if the child is under 12 years old and the school has made appropriate efforts to resolve the child's attendance problems. This presumption may be rebutted based on a showing by clear and convincing evidence that the child is habitually truant. A child's absence from school, without lawful excuse, when the child is 12 years old or older is presumed to be due to the child's intent to be absent from school.

This presumption may be rebutted based on a showing by clear and convincing evidence that the child's absence is due to the failure of the child's parents, guardian, or custodian to comply with compulsory instruction laws.

Criminal Violation of Neglect/Child Endangerment: If the report alleges a violation of a criminal statute involving sexual abuse, physical abuse, or neglect or endangerment, under section 609.378, the local law enforcement and local welfare agency shall coordinate the planning and execution of their respective investigation and assessment efforts to avoid a duplication of fact-finding efforts and multiply interviews. Section 609.378 provides that:

(1) A parent, legal guardian or caretaker who willfully deprives a child of necessary food, clothing, shelter, health care, or supervision appropriate to the child's age, when the parent, guardian, or caretaker is reasonably able to make the necessary provisions and deprivation harms or is likely to substantially harm the child's physical, mental, or emotional health, or
(2) A parent, legal guardian, or caretaker who knowingly permits the continuing physical or sexual abuse of a child is guilty of neglect of a childY.@

In addition, this section provides that Aa parent, legal guardian or caretaker who endangers the Child's person or health by intentionally or recklessly causing or permitting a child to be placed in a situation likely to substantially harm the child's physical, mental, emotional health, or cause the child's death or knowingly causing or permitting the child to be present where any person is selling or possessing a controlled substance, as defined in section 152.01, subdivision 4, in violation of section 152.021, 152.002, 152.03, 152.024 is guilty of child endangermentY@

This section also provides that Aa person who intentionally or recklessly causes a child under 14 years of age to be placed in a situation likely to substantially harm the child's health or cause the child's death as a result of the child's access to a loaded firearm is guilty of child endangermentY@. If a parent, guardian, or caretaker in good faith selects and depends upon spiritual means or prayer for treatment of care of disease or remedial care of the child, this treatment constitutes Ahealth care@ as used in clause (1).

III. Sexual Abuse

ASexual abuse@ means the subjection of a child by a person responsible for the child's care, by a person who has a significant relationship to the child, as defined in section 609.341[5], or by a person in a position of authority, as defined in section 609.341, subd. 10[6], to any act which constitutes a

[5] M.S. 609.341 defines Asignificant relationship@ as a situation in which the actor is: 1) the complainant=s parent, stepparent, or guardian; 2) any of the following persons related to the complainant by blood, marriage, or adoption: brother, sister, stepbrother, stepsister, first cousin, aunt, uncle, nephew, niece, grandparent, great-grandparent, great-uncle, great-aunt; or 3) an adult who jointly resides intermittently or regularly in the same dwelling as the complainant and who is not the complainant=s spouse.

[6] M.S. 609.341 defines Aposition of authority@ as including but not being limited to any person who is a parent or acting in the place of a parent and charged with any of a person=s rights, duties or responsibilities to a child, or a person who is charged with any duty or responsibility for the health, welfare, or supervision of a child, either independently or

violation of section 609.342 (criminal sexual conduct in the first degree), 609.343 (criminal sexual conduct in the second degree), 609.344 (criminal sexual conduct in the third degree), 609.345 (criminal sexual conduct in the fourth degree), or 609.3451 (criminal sexual conduct in the fifth degree). Sexual abuse also includes any act which involves a minor which constitutes a violation of prostitution offenses under sections 609.321 to 609.324 or 617.246. Sexual abuse includes threatened sexual abuse.

Swift County Family Services will consider for assessment the following reports of sexual abuse:

A. Sexual contact by parent, guardian, or caregiver.

B. Pain or injury in the genital area that cannot be explained by the parents, the child's history or injuries, or medical diagnosis.

C. Child has a sexually transmitted disease.

D. Child is the subject of pornography or exposed to pornography or sexually inappropriate behavior of adults.

E. Juvenile Prostitution.

F. Child Protection may also assist the local law enforcement agency when requested in situations outside the family unit.

G. Threatened Sexual Abuse:

1. Threatened sexual abuse as indicated by a clear statement of intent of sexual contact.

2. The child lives with a known sexual abuse perpetrator who has not completed sexual abuse treatment and there is no safety plan provided for that child.

H. Guidelines for common and uncommon sexual behavior in children (adapted from Wurtele and Miller-Perrin, 1992):

1. Preschool (0 – 5 years)

Uncommon: discussion of sexual acts; contact experiences with other children without clothing.

Common: Sexual language relating to differences in body parts, bathroom talk, pregnancy and birth. Genital stimulation at home and in public. Showing and looking at private body parts.

2. School Age (6 – 12 years)

Uncommon: Use of explicit sexual words and discussion of sexual acts.

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through another, no matter how brief, at the time of the act. For the purposes of subdivision 11 (Asexual contact@), Aposition of authority@ includes a psychotherapist

Common: Questions about menstruation, pregnancy, sexual behavior. "Experimenting" with same age children, including kissing, hugging, holding hands, and role-playing. Genital stimulation at home or other private places.

3. Adolescence (13 – 16 years)

Uncommon: Sexual interest in much younger children.

Common: Questions about decision making, social relationships and sexual customs. Masturbation in private. Experimenting between adolescents of the same age, including open-mouth kissing, fondling and body rubbing. Also interest in other peers' bodies. Sexual intercourse occurs in approximately one-third of this age group.

IV. Physical Abuse

APhysical abuse@ means any physical injury, mental injury, or threatened injury, inflicted by a person responsible for the child's care on a child other than by accidental means, or any physical or mental injury that cannot reasonably be explained by the child's history of injuries, or any aversive or deprivation procedures, or regulated interventions, that have not been authorized under section 121A/67 or 245.825[7]. Abuse does not include reasonable and moderate physical discipline of a child administered by a parent or legal guardian which does not result in an injury. Abuse does not include the use of reasonable force by a teacher, principal, or school employee as allowed by section 121A.582.

Actions which are not reasonable and moderate include, but are not limited to, any of the following that are done in anger or without regard to the safety of the child: throwing, kicking, burning, biting, or cutting a child; striking a child with a closed fist; shaking a child under age three; striking or other actions which result in any non-accidental injury to a child under 18 months of age; unreasonable interference with a child=s breathing; threatening a child with a weapon, as defined in 609.02, subd. 6[8]; striking a child under age one on the face or head; purposely giving a child poison, alcohol, or dangerous, harmful, or controlled substances which were not prescribed for the child by a practitioner, in order to control or punish the child; or other substances that substantially affect the child's behavior, motor coordination, or judgment or that results in sickness or internal injury, or subjects the child to medical procedures that would be unnecessary if the child were not exposed to the substances; or unreasonable physical confinement or restraint not permitted under

[7] MN Statute 245.825 is in regard to the rules governing the use of aversive and deprivation procedures in all licensed facilities and licensed services serving persons with mental retardation or related conditions. **Minnesota Rules 9525.2730 prohibits the use of aversive or deprivation procedures that restrict the consumers= access to nutritious diet, drinking water, adequate ventilation, necessary medical care, ordinary hygiene facilities normal sleeping conditions, and necessary clothing.**

[8] MN Statute 609.02, Subd. 6 defines Adangerous weapon@ as the following: any firearm, whether loaded or unloaded, or any device designed as a weapon and capable of producing death or great bodily harm, any combustible or flammable liquid or other device or instrumentality that, in the manner it is used or intended to be used, is calculated or likely to produce death or great bodily harm, or any fire that is used to produce death or great bodily harm.

section 609.379[9], including but not limited to tying, caging, or chaining; or in a school facility or school zone, an act by a person responsible for the child=s care that is a violation under section 121A.58.

A. Reports of non-accidental injuries:

   1. Injuries requiring medical attention.
   2. Injuries observable but not requiring medical attention.
   3. No observable injury but child reports body pain as the result of discipline or physical force.
   4. A medical professional reports a suspicious explanation of an injury.

B. Reports of physical discipline which pose a risk of injury, including but not limited to the age of the child, use of weapon, choking, hitting with a closed fist, smothering, kicking, throwing, shaking, burning, biting, or poisoning.

C. Reports of physical punishment prohibited by the child's physical condition.

D. Reports of confinement or restraint including but not limited to tying, locking, caging, or chaining.

E. Threatened physical abuse

   1. Child is threatened with a weapon.
   2. Verbal threats of further physical abuse by a substantiated physical abuse perpetrator.
   3. Verbal threats of death or serious injury.

V. Threatened Injury

AThreatened injury@ means a statement, overt act, condition, or status that represents a substantial risk of physical abuse or mental injury. Threatened injury includes, but is not limited to, exposing a child to a person responsible for the child's care, as defined in paragraph (b), clause (1) who has: subjected a child to, or failed to protect a child from, an overt act or condition that constitutes egregious harm, as defined in section 260C.007, subdivision 14, or a similar law of another jurisdiction; been found to be palpable unfit under section 260C.301, paragraph (b), clause (4), or a similar law of another jurisdiction; committed an act that has resulted in an involuntary termination of parental rights under section 260.301, or a similar law of another jurisdiction; or committed an act that has resulted in the involuntary transfer of permanent legal and physical custody of a child

[9] MN Statute 609.379 is regarding reasonable force. AReasonable force may be used upon or toward the person of a child without the child=s consent when the following circumstances exists or the actor reasonably believes it to exist: a) when used by a parent, legal guardian, teacher, or other caretaker of a child or pupil, in the exercise of lawful authority, to restrain or correct the child or pupil; or b) when used by a teacher or other member of the instructional, support, or supervisory staff of a public or nonpublic school upon or toward a child when necessary to restrain the child from self-injury or injury to any other person or property.

to a relative under section 260C.201, subdivision 11, paragraph (e), clause (1), or a similar law of another jurisdiction.

VI. Emotional Abuse/Mental Injury

AMental injury@ means emotional harm from a pattern or behavior which contributes to impaired emotional functioning of the child which may be demonstrated by a substantial and observable effect in the child's behavior, emotional response, or cognition that is not within the normal range for the child's age and stage of development, which due regard to the child's culture. Mental injury includes an injury to the psychological capacity or emotional stability of a child as evidenced by an observable or substantial impairment in the child's ability to function within a normal range of performance and behavior with due regard to the child's culture.

VII. Additional Definitions

A. MN Rules 9560.0214, subd. 11. Family unit. AFamily Unit@ means:

1. the child; and
2. all persons related to the child by blood, marriage, or adoption; and
3. persons living within the same household as the child; or
4. the child's guardian.

B. APerson responsible for the child's care@ means: (MN Statutes 626.556, subd. 2b)

1. An individual functioning within the family unit and having responsibilities for the care of the child such as a parent, guardian, or other person having similar care responsibilities, or
2. An individual functioning outside the family unit and having responsibilities for the care of the child such as a teacher, school administrator, other school employee or agents, or other lawful custodian of a child having either full-time or short-term care responsibilities including but not limited to, day care, babysitting whether paid or unpaid, counseling, teaching, and coaching.

C. Abuse Outside the Family Unit (MN Statutes 626.556, Subd. 10a)

If the report alleges neglect, physical abuse, or sexual abuse by a person responsible for the child's care functioning outside the family unit in a setting other than a facility as defined in subdivision 2[10], Swift County Family Services shall immediately notify the appropriate law enforcement agency, which shall conduct an investigation of the alleged abuse or neglect. Swift County Family Services shall offer appropriate social services for the purpose of

[10] MN Statutes 626.556, subdivision 2 defines Afacility@ as: a **licensed or unlicensed** day care facility, residential facility, agency, hospital, sanitarium, or other facility or institution required to be licensed pursuant to sections 144.50 to 144.58, 241.021, or **245A.01 to 245A.16, or chapter 245 B, or a school as defined in sections 120A.05, subdivisions 9, 11, and 13; and 124D.10; or a nonlicensed personal care provider organization as defined in sections 256B.04, subdivision 16, and 256B.0625** (relates to facilities licensed by the Department of Health, Human Services, or Corrections).

safeguarding and enhancing the welfare of the abused or neglected minor. (MN Statutes 626.556, subd. 10a)

D. Reports Not Requiring Assessment or Investigation by Local Agency (MN Rule 9560.0224)

When the local agency receives a report of maltreatment that does not involve an alleged offender from within the family unit or from within a facility, the local agency shall notify the law enforcement agency orally as soon as the report is received. Written notice must be sent within 24 hours. The local agency shall make appropriate Social Services available to the child and family.

E. Child Maltreatment in Schools (MN Statutes 626.556, Subd. 3b)

The Department of Children, Families, and Learning is the agency responsible for assessing or investigating allegations of child maltreatment in schools as defined in sections 120A.05, Subd. 9, 11, and 13 and 124D.10 (Elementary, Middle, and High Schools and Charter Schools). Any child protection reports received must be forwarded to the Department of Compliance and Monitoring at the Department of Children, Families, and Learning.

F. Child Maltreatment in Facilities (MN Statutes 626.556, Subd. 3c)

The following agencies are the administrative agencies responsible for assessing or investigating reports of alleged child maltreatment in facilities:

1. Swift County Family Services is responsible for assessing or investigating allegations of maltreatment in child foster care, family child care, and legally unlicensed child care and in juvenile correctional facilities licensed under section 241.021 located in Swift County.
2. DHS is responsible for assessing or investigating allegations of maltreatment in facilities licensed under chapters 245A and 245B, except for child foster care and family child care.
3. The Department of Health is the agency responsible for assessing or investigating allegations of child maltreatment in facilities licensed under sections 144.50 to 144.58, and in unlicensed home health care.

VIII. Head Lice Reports

Intake calls regarding lice should be re-directed to public health, UNLESS

The family has experienced the following:

A. Multiple infestations over an extended period of time.
B. The children have had 7 or more absences from school with lice being a contributing factor as documented by school staff.
C. Potential or actual health problems resulting from use or misuse of lice treatment material.
D. Health problems resulting from lack of treatment efforts.

E. Failed attempts by public health or other agencies to educate, provide treatment materials and/or actual assistance with the treatment (family=s unwillingness to cooperate).

F. Emotional or mental limitations of the care giver(s) to eradicate the lice.

IX. Domestic Violence

Reports which allege a child(ren) was present during a domestic abuse situation and the child(ren) was in sight and sound of the domestic abuse or there is information that a weapon was used or a threat to use a weapon is contained in the report, an Alternative Response assessment will be initiated.