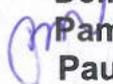
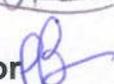


THE PHILADELPHIA DEPARTMENT OF HUMAN SERVICES
Children and Youth Division
Policy and Procedure Guide

Issue Date: February 23, 2010

TO: All CYD Social Work Services Staff (SWSS)¹ and Providers

FROM: Dell Meriwether, Deputy Commissioner 
 **Pamela Mayo, Operations Director**
Paul Bottalla, Policy and Planning Director 

RE: Using and responding to the Safety Alert Tool for families receiving In- Home Services and the Home and Community Services Information System (HCSIS) Reports for children in PA placements.

EFFECTIVE: Immediately

Purpose:

The purpose of this Guide is to inform DHS and Provider staff of the required use of the Safety Alert Tool for In-Home Protective Services (IHPS) and Family Stabilization Services (FSS) cases to report incidents. This Guide also informs DHS staff of the requirement for In-state providers to file a Home and Community Services Information System (HCSIS) report when reporting unusual incidents impacting the safety of children in placement in Pennsylvania and outlines the responsibilities of the DHS and Provider workers.

The CYD Policy Manual section affected by this guide is "Section 1330.1 "Reporting Incidents Regarding CYD Children" and this guide replaces the "Interim Use of the Critical Incident Report (CIR)" guide issued on May 5, 2008.

Discussion:

DHS contracted social service provider agencies are required to inform DHS of specific child safety concerns. This was developed to assure that the DHS chain of command (DHS worker, supervisor, administrator and director) are informed in a timely manner and can respond appropriately to situations that impact on the well being and safety of children and families receiving services.

The Safety Alert Tool was developed for IHPS and FSS providers to report concerns to DHS and ensure resolution of the safety of children.

The Safety Alert Notification process is designed to:

- Inform the responsible DHS team (DHS worker, supervisor and administrator) of incidents which have a high potential of impacting child safety.

¹ Social Work Services Staff (SWSS) refers to the CYD chain of command including Social Work Services Trainees, Social Work Services Managers 1, Social Work Services Managers 2, Social Work Supervisors, Social Work Administrators, and Human Services Directors.

- Advise the responsible DHS team of situations which warrant a review or change in assessment of safety and service activities.
- Assure the responsible DHS team that the appropriate protective services continue to be provided to address safety issues, pending a response to the safety alert by DHS.

In-State Residential Treatment Facilities (RTF), Institutional, Group Home and Foster Home placement providers are required to complete a HCSIS report on all children in their care whenever an unusual incident occurs (please refer to the procedure section for a list of examples).

HCSIS is a web-based information system developed by the Department of Public Welfare (DPW) to replace the manual paper-based process of incident reporting. HCSIS improved reporting capabilities, increased operational efficiencies, and standardized the reporting process statewide. HCSIS also provides a mechanism to generate and analyze aggregate data of reported incidents.

POLICY

All providers are required to take appropriate actions to protect children whenever they are at risk and ensure their safety. Providers are to report all abuse and neglect incidents to ChildLine and immediately verbally notify the responsible DHS chain during business hours and the DHS Hotline after-hours and weekends.

Safety Alert Process for Cases Accepted for In-Home Services (IHPS and FSS):

The IHPS and FSS provider agencies must follow all policies and procedures related to the Safety Alert Tool. The Safety Alert Tool provides directions and time frames for reporting based on the nature of the identified threats. The Safety Alert Tool must be completed by the provider within 24 hours of the event and emailed to the responsible DHS chain. If the DHS team does not respond to the safety alert within 3 business days, the provider must notify the director of the DHS team and the director will investigate the matter and determine next action steps to be taken. All safety alert reports and copies of all emailed communications regarding the report are to be kept in the DHS and provider case record.

There are two types of safety alerts:

Present Danger: An immediate, significant, and clearly observable threat occurring to a child in the present. For providers, this means that the provider encounters these situations and recognizes that they are happening right now. The provider must ensure the safety of the children and immediately contact (verbally) both ChildLine and the responsible DHS chain during business hours and the DHS Hotline after-hours and weekends. The DHS chain and Hotline after-hours staff are expected to respond within 0-2 hours with a plan of action which includes DHS workers or Hotline after-hours workers conferencing the case with their supervisor or alternate supervisor and/or administrator. In addition, the DHS worker or Hotline after-hours worker must visit the home immediately to do a safety assessment, complete a Safety Plan, and determine next action steps to be taken to ensure the safety of children.

Significant Change in Family Circumstances: Circumstances that are emerging and are likely to result in serious harm to a vulnerable child in the near future. These represent the emergence of any new or suspected new threat or major change in the family. The provider must immediately contact (verbally) the responsible DHS chain during business hours and the DHS Hotline after-hours and weekends. Assigned DHS workers or DHS Hotline after-hours staff must consult with their supervisor or alternate supervisor and/or administrator and visit the

home within 24 hours. A Safety Assessment worksheet and new Safety Plan must be completed consistent with what the current Safety Assessment Policy states about intervals.

In-State Placement Provider HCSIS Report Notification:

All In-State placement providers are required to complete a HCSIS report on all children in their care whenever a child safety related incident occurs. The placement provider must take steps to ensure that children are safe and removed from any immediate safety threat/danger, and immediately contact (verbally and by email) the responsible DHS chain.

The placement provider is also required to submit two written reports to the State and DHS. The first written report must be submitted within 24 hours of the occurrence of the incident. A second written report must be submitted by the placement provider within 30 days of the safety related incident and must provide documentation of all subsequent actions taken in order to finalize the incident report.

Upon receipt of the HCSIS report, the responsible DHS chain must review the information provided to determine that all appropriate safety steps have been taken to ensure the safety of the children. Copies of all finalized HCSIS reports must be filed in the DHS case record.

- All out-of-state placement providers must continue to utilize the Unusual Incident Report (UIR) criteria and procedures currently in use.

Procedure

IHPS/FSS Provider Safety Alert Responsibility:

- ***For both Present Danger and Significant Change in Family Circumstances alerts, after the verbal notification, the provider must complete the Safety Alert Tool within 24 hours of the event and email to the responsible DHS chain.***
- ***If the DHS team does not respond to the safety alert within 3 business days, the provider must notify the director of the DHS team who will investigate the matter and determine next steps to be taken.***

DHS Chain Safety Alert Responsibility:

- ***Upon receipt of the initial oral report from the IHPS/FSS provider, the responsible DHS team must immediately conference and decides the appropriate response and plan of action.***
- ***DHS workers complete section 2 (Next Steps and Actions) of the Safety Alert Tool including action steps from the Safety Plan, unless the activities, actions and next steps are detailed in the ongoing email communication.***
- ***The completed Safety Alert Tool should be emailed to the IHPS/FSS worker and supervisor within 3 business days of receipt of the safety alert.***

In-State Placement Provider HCSIS Report Responsibility:

- ***Placement providers must file HCSIS reports on the following types of incidents: (Please note: the list of safety threats below is meant to be illustrative and is not limited to these examples only).***
 - *Death of a child.*
 - *Suicidal-physical act - a physical act by a child to commit suicide.*
 - *Injury or trauma of a child requiring treatment at a hospital.*
 - *Violation of a child's rights (including during a restraint).*
 - *Intimate sexual contact between child/ren and/or staff, consensual or otherwise.*

- *Child absence from premises for 4 hours or more without approval of staff persons or for 30 minutes or more without approval of staff persons, if the child may be in physical jeopardy.*
- *Abuse or misuse of a child's funds.*
- *Outbreak of a serious communicable disease.*
- *The arrest of a child or any incidents resulting in contact with either the police or fire departments.*
- *Illness of a child requiring outpatient/inpatient hospital care.*
- *Any condition which results in the closure of the facility.*
- *Any event/accident/injury, etc. which may involve a child's right to legal recovery; for example, an auto accident claim, a personal injury claim, a medical malpractice claim, etc.*

DHS HCSIS Report Responsibility:

- *Upon receiving the HCSIS report, staff from the DHS Deputy Commissioner's Office must pull the report from the HCSIS system and forward the report to the assigned DHS chain.*
- *The DHS chain must review the report to ensure that an appropriate safety plan has been put in place and if more information is needed, contact the placement provider.*
- *The DHS worker must file all finalized HCSIS reports in the case record.*
- *The DHS team must consult with the assigned City Solicitor (or their supervisor) when any youth committed to DHS is involved in any event/accident/injury, etc. which may involve a child's right to legal recovery; for example, an auto accident claim, a personal injury claim, a medical malpractice claim, etc.*
- *Any youth committed to DHS involved in an automobile accident must be examined by a physician within 24 hours of the accident and the results of the examination must be documented in the case record.*
- *A copy of the official police report documenting the accident must be obtained from the police district and filed in the DHS case record.*
- *An arrest of a child committed to DHS should be reported to the assigned City Solicitor.*

Attachment A - Safety Alert Tool

Questions regarding this Guide may be addressed to:

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IN HOME SERVICE PROVIDER SAFETY ALERT TOOL

While reporting information is critical to ensuring that families are receiving necessary and appropriate services, **actions to address and resolve incidents or stabilize volatile situations** involving families receiving In Home Protective Services (IHPS) or Family Stabilization Services (FSS) is the most important responsibility of the service provider.

The Provider must inform DHS of situations that have a high potential for impacting the safety of any child (ren) in the home and experienced by either the parent/caregiver(s) or the child (ren). There are two types of **Safety Alerts**.

- **Present Danger:** providers immediately take appropriate actions to protect the child (ren). Providers also immediately contact (verbally) both the Child line and the responsible DHS chain of command during business hours, and the DHS hotline after-hours and weekends. DHS is expected to respond within 0 -2 hours. This tool should be completed by the provider within 24 hours of the event and emailed to the DHS team.
- **Significant Change in Family Circumstances:** providers should immediately contact (verbally) the DHS chain of command during business hours, and the DHS hotline after-hours and weekends. This tool should be completed within 24 hours of the event and emailed to the DHS team.

This form provides directions for reporting the both levels of safety alert and is required to be submitted as part of the reporting process. The Provider must also immediately notify the DHS team verbally of any safety alert. Detailed instructions are provided below.

COMPLETE FOR ALL SAFETY ALERTS:

Family Name:	DHS Number:
AFS Date:	Date of Admission :
Provider Worker:	DHS Worker:
Telephone:	Telephone:
E-mail:	E-mail:
Provider Supervisor:	DHS Supervisor:
Telephone:	Telephone:
E-mail:	E-mail:

Date of Last Home Visit:

Date of Next Scheduled Home Visit:

Date of Last Safety Alert:

Total # of Safety Alerts since Date of Admission:

Safety Alert Type

Safety Alert: Present Danger

Safety Alert: Significant Change in Family Circumstances

Date/Time of Incident:

Date/Time Provider became aware of incident:

Date/Time of direct contact with DHS Team:

Person Spoken to:

Date/Time Form emailed to DHS Team:

FOR PRESENT DANGER ALERT ONLY:

Date/Time **Hotline** Notified:

If known, designation given the report by ChildLine or the Hotline

CPS (via ChildLine)

GPS

[Complete the appropriate page of this tool corresponding to the Safety Alert Type indicated above.]

PROVIDER PRESENT DANGER SAFETY ALERT

Present Danger is defined as: “immediate, significant and clearly observable threat occurring to a child in the present.” As a provider this means that you encounter these situations and recognize that they are happening right now. Present danger requires an immediate CPS protective response.

MALTREATMENT

Maltreating Now: The parents' mistreatment of the child is occurring right now. The maltreatment will typically be physical, serious emotional, or sexual in nature.

Injuries to Face/Head: This includes bruises, cuts, abrasions, swelling or any physical manifestation alleged to have occurred as a result of parental treatment of the child.

Serious Bodily Injury: Typically, this includes bone breaks, deep lacerations, serious or questionable burns, malnutrition, etc. Also includes multiple serious injuries to a child, like severe burn and a broken arm, and provider is concerned the injuries resulted from maltreatment.

Several Victims: This includes maltreatment that includes more than one child that just occurred.

Life-Threatening Living Arrangements: This is based on specific information which indicates that a child's living situation is an **immediate** threat to his/her safety. This would include the most serious health circumstances: buildings capable of falling in, exposure to elements in bitter weather, fire hazards, electrical wiring exposed, guns/knives available, etc.

Unexplained Injuries: This refers to a serious injury to a child which parents and others cannot or will not explain or provide an explanation that is not plausible.

Bizarre Cruelty: This describes maltreatment that has been alleged and includes extreme events such as locking up children, torture, exaggerated emotional abuse, etc.

Sexual Abuse and Accessible to Maltreater: History of report of sexual abuse and the maltreater has current or immediate unapproved access to the child or children.

CHILD

Child Under 10 Or Vulnerable Child Due To Disability Is Unsupervised: Any child under 10 or any child who is vulnerable due to a disability is left alone with no competent supervision and is alone right now. This does not include circumstances where the provider finds the child alone and the caregiver returns while the provider is there.

Child Needs Medical Attention Now: Medical care is needed for a child and if not received will seriously affect the child's health or wellbeing and neither caregiver nor provider is able to ensure immediate medical attention.

Parent/Caretaker Viewpoint of Child Is Bizarre: Parent/Caretaker viewpoint of child is extremely distorted and unusual, such as believing the child is possessed by demons, or that an infant is overtly rejecting them. This does not include a general negative perception of a child.

Child Fearful: This includes children who are anxious or described as, or report being obviously afraid of their present circumstance, the home situation, or a person with access to the home because of a concern of personal threat. Available information may be from actual communication or emotional/physical manifestation from the child's perception of their situation. This does not refer to generalized fear or anxiety.

Suicide or Suicide attempt: This refers to any incident where a child intentionally harms him or herself or completes suicide.

PARENT/CAREGIVER

Parent/Caregiver Unable to Perform Parental Responsibilities Now: This only refers to those parental duties and responsibilities essential to basic care or assuring safety. This is not associated with whether parents are effective parents generally, but whether their inability to provide basic duties leaves the child in a threatened state now.

Parent/Caregiver Described as Dangerous Now: This includes parents who are currently observed to be or described as physically/verbally imposing and threatening, brandishing weapons, very aggressive, currently behaving in attacking or aggressive ways, etc.

Parent/Caregiver Behavior Is Out of Control Now: This includes parents/caregivers who demonstrate emotional upset or depressed people who cannot focus themselves or manage their behavior in ways to properly perform their parental responsibilities. Their actions or lack of actions may not be directed at the children, but may affect them in dangerous ways.

Parent/Caregiver Intoxicated or Under Significant Influence of Drugs Now: Applying the present time context, this refers to a parent who is drunk now or whose use of drugs or alcohol substantially impairs their ability to meet the child needs or to keep the child safe and there is no other responsible adult in the home who can. The severity of the parent's condition is more important than the use of a substance (drinking compared to drunk).

Domestic Violence and Child Maltreatment Occurring Now: This includes family situations in which both domestic violence and child abuse are co-occurring in the present time.

Parent/Caregiver Will Flee with Child: This only refers to families who are likely to flee TODAY as a result of child maltreatment. Transient families and those with limited personal possessions are included.

Parent/Caregiver Refuses Access to Child or Overtly Rejects Intervention: This refers to situations where the parent/caregiver hides the child from the provider, or adamantly refuses to allow the provider into the home and will not allow services to be provided.

Homicide, Suicide or Attempted Suicide of Parent/Caregiver: This includes any situation where a parent/caregiver dies as a result of murder or suicide, or whenever a parent/caregiver attempts suicide.

COMPLETE SAFETY ALERT SUMMARY

PROVIDER SAFETY ALERT: SIGNIFICANT CHANGES IN FAMILY CIRCUMSTANCES

“Significant Changes in Family Circumstances” are those circumstances that are emerging and are likely to result in serious harm to a vulnerable child in the near future. These represent the emergence of any new or suspected new threat or major change in the family including but not limited to:

- Any Parent/Caregiver or adult in the home is recently reported to be behaving violently, dangerously or in a bizarre or unusual manner or their behavior is out of control.
- Parenting skills or motivation to parent is seriously deteriorating and no responsible adult is present in the home to assure child’s basic safety needs are met.
- Parenting skills or motivation to parent is seriously deteriorating and no responsible adult is present in the home to assure child’s basic safety needs are met.
- Parent/Caregiver threatens to seriously harm the child or asks for the child to be removed from the home and there is no other responsible adult in the home who can assure child safety.
- Child shows serious untreated physical or emotional problems or symptoms that have persisted and seems to require medical attention in the very near future.
- Circumstances or conditions are likely to change soon (within the next week or two) that will result in children having no supervision, or no place to live or no responsible guardian or caregiver.
- Family will have no heat in winter, no way to safely store food, or will have no food and/or shelter in the upcoming week or two and the provider has made all reasonable efforts to assist the family in securing the appropriate resources but has been unable to do so.
- Any aspect of the safety plan is not in place or is compromised, e.g. safety providers not there when scheduled, caregivers not allowing providers to carry out plan, caregiver allowing access to maltreater who is supposed to be out of the home, service provider problems, decrease in parent/caregiver cooperation with the safety plan, etc.
- Escalation of individual or family condition, behavior, emotion, perceptions, attitudes, motives, intentions which are the safety reasons for provider involvement.
- Insufficient safety plan based on escalation or changes in occurrence of threats.
- Entry of new caregiver or adult companion in home.
- Birth of a child to any family or household member.
- A child 5 years of age or younger or any child under 18 with serious physical or mental health issue, cognitive delay diagnosis, or disabilities who was not seen after a second scheduled attempt within a week.
- Elimination or reduction of threats (individual or family condition, behavior, emotion, perceptions, attitudes, motives, intentions etc.)

COMPLETE SAFETY ALERT SUMMARY

SAFETY ALERT SUMMARY

SECTION 1: TO BE COMPLETED BY PROVIDER

Include the date the incident or event identified occurred, those involved, the nature, extent and duration of the event or events resulting in this safety alert, information detailing what actions the provider worker has initiated to date and any next steps the provider believes are needed

SUMMARY OF PRESENT DANGERS/SIGNIFICANT CHANGE IN FAMILY CIRCUMSTANCES:

ACTIONS TAKEN BY PROVIDER:

PROVIDER CONCERNS/NEXT STEPS:

SECTION 2. NEXT STEPS AND ACTIONS TO BE TAKEN:

This section is to be completed by the DHS worker with approval by the DHS supervisor for safety alerts regarding present danger and significant changes in family circumstances. If the activities, actions, and next steps are detailed in the ongoing email communication with the provider, this does not need to be completed. The completed form should be emailed to provider worker and supervisor within three business days of receipt of safety alert. Ongoing communication between the DHS worker and provider is essential until the situation is controlled.

SUMMARY OF ASSESSMENT OF SAFETY ALERT AND NEXT STEPS:

NEXT STEPS:

	Next Steps	Person Responsible
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

**Copies of the completed form should be maintained in both the DHS and Provider files as well as copies of any email communications.
NOTE: Providers are not required to complete these tools when the information is provided to them by DHS.**