

Response Priorities - Emergency, Immediate, and Routine

Rhode Island Department of Children, Youth and Families

Policy: 500.0015

Effective Date: July 7, 1984

Revised Date: December 9, 2011

Version: 3

Call Floor and Investigative staff must respond appropriately to each report or allegation of child abuse or neglect. The Department utilizes three categories to prioritize Call Floor and Investigative responses to all child abuse and neglect reports: Emergency, Immediate and Routine. Each response priority has criteria, a time limit for the Call Floor to process the report and a time limit for the initiation of the investigation. If there is a question about response priority, the more urgent priority is utilized.

Related Procedures

[Response Priorities - Emergency, Immediate, and Routine](#)

Related Policy

[Information/Referral \(I/R\) Reports](#)

Response Priorities - Emergency, Immediate, and Routine

Procedure from Policy 500.0015: Response Priorities - Emergency, Immediate, and Routine

- A. If the child is in immediate danger and immediate police assistance is required, the Call Floor worker:
1. Instructs the caller to notify the police and after terminating the call, notifies the police.
 2. Puts the caller on hold and notifies the police.
 3. Places a three-party call with the police and the reporter.
- B. Call Floor workers initially set the response priority for each referral of child abuse or neglect. The Call Floor worker searches RICHIST for prior agency involvement. Response priorities delineate the time limit for the Call Floor to process the Child Protective Services (CPS) report and for the initiation of an investigation:
1. Emergency Response - Call Floor must process the CPS report within ten minutes after the call is completed. The Call Floor worker immediately notifies the Call Floor Supervisor. The Supervisor reviews the report and, regardless of how much information is missing, forwards the report to the Investigative Unit within ten minutes after the call is terminated. A Child Protective Investigator (CPI) responds to the report within ten minutes of assignment.
 2. Immediate Response - Call Floor must process the CPS report within one hour after the call is completed. A CPI must respond to the report within the shift in which the call was received.
 3. Routine Response - Call Floor must process the CPS report within one hour after the call is completed. A CPI must respond to the report within twenty-four hours of assignment.
 4. If there is a question as to which response priority to use in a particular case situation, the more urgent priority is chosen.
- C. Response priorities reflect the level of harm or risk of harm to the child.
1. Emergency Response criteria include:
 - a. Child in imminent danger of physical harm.
 - b. Child abandoned and in imminent danger (otherwise Immediate Response).
 - c. Child unsupervised and in imminent danger (otherwise Immediate Response).
 - d. Family may flee or child may disappear.
 - e. Child at hospital for examination/parents present and awaiting questioning.
 - f. Child death due to alleged child abuse or neglect/other children in family.
 - g. Other circumstances of the case constitute an emergency.
 2. Immediate Response criteria include:
 - a. Alleged abuse or neglect in which the child is not in imminent danger but other risk factors are present.
 - b. Child abandoned but not in imminent danger.
 - c. Child unsupervised but not in imminent danger.
 - d. Child hospitalized on seventy-two hour hold.
 - e. Child held by police/physician/nurse practitioner for DCYF placement.
 - f. Other but not emergency.
 3. Routine Response criteria are used for all other reports in which there is minimal risk of harm to the child.
- D. While certain reports clearly mandate the response priority to be used, other reports are less detailed and require a certain level of training, judgment and expertise on the part of

the worker/supervisor. Certain factors specific to the case situation, when applied to the allegations, may more clearly define risk to the child, including:

1. The child's age, sex, physical, and mental condition.
 2. The mental and physical condition of the caretaker(s).
 3. The mental and physical condition and/or location of the alleged perpetrator(s).
 4. Any history of prior incidents/harm to the child.
 5. The need for medical attention for the child.
 6. The nature and condition of the physical environment (safety/health).
- E. The Call Floor worker completes a CPS report as completely as possible. For immediate and routine situations, the CPS report is processed in the usual manner.
- F. Upon review of the data by the Call Floor Supervisor, the Investigative Supervisor, and/or the assigned CPI, a decision may be made to change a particular response priority.
1. For good cause a response priority can be upgraded at any time.
 2. At no time can a response priority be downgraded without prior Administrative approval.
 3. Any change in response priority must be indicated in a Case Activity Note. If downgraded, this change must be documented in a Case Activity Note by the approving Administrator.
- G. If a child or children are left unattended and an emergency response is required, the Call Floor worker asks local police to respond. If the police find a caretaker present and appropriate:
1. The Call Floor worker who contacts and receives the return call from the police notes directly on the CPS report the information that was reported and the name of the officer who responded.
 2. If there are no other allegations, the case is not assigned as an investigation.
 3. These CPS reports are assigned to the Assistant Director for Review and downgrade to Information/Referral (I/R) Report in conformance with [DCYF Policy 500.0040, Information/Referral \(I/R\) Reports](#):
 - a. If downgraded, the Assistant Director documents the reason in a Case Activity Note and close the case.
 - b. If not downgraded, the Assistant Director assigns the case to the Investigative Assignment Supervisor.
 4. Paragraph G, 1-3 are not to be used for other allegations which the Department is clearly responsible to investigate.
- H. Investigative Unit functions include:
1. The completed CPS report is reviewed by the Investigative Assignment Supervisor.
 2. The referral is assigned to a CPI within the guidelines of the specific response priority.
 3. An investigation is initiated within the specified response priority time frames.