

SCREENING GUIDELINES FOR CHILD NEGLECT

Investigations of reports of neglect shall be categorized to include: an Intra-familial investigation and Specialized Assessment/Investigation.

Intra-familial investigations of neglect include an alleged perpetrator who:

- Is a family member.
- Has sanctioned or continued access.
- Is involved in the daily or regular care of the child.

Examples of an Intra-familial alleged perpetrator of neglect are mother, father, step-parent, paramour (living out of the home) of the parent/caretaker, an uncle, neighbor, an unlicensed daycare provider, etc.

A Specialized Assessment/Investigation includes an alleged perpetrator of neglect who meets the definition of an Out-of-home care setting; are responsible for the physical care/custody and control of a child; and/or has access to a child by virtue of his/her employment/affiliation to an institution. An example of a Specialized Assessment/Investigation alleged perpetrator includes a teacher, boy/girl scout leader, day camp counselor, licensed foster parent, licensed daycare provider, etc.

An Out-of-home care setting is a detention facility, shelter facility, foster home, pre-finalized adoptive placement, certified foster home, approved foster care, organization, certified organization, child day-care center, type A family day-care home, type B family day-care home, group home, institution, state institution, residential facility, residential care facility, residential camp, day camp, hospital, medical clinic, children's residential center, public or nonpublic school, or respite home that is responsible for the care, physical custody, or control of a child.

* Examples provided are not all inclusive. If more than one referral type is present, the totality of the circumstances should be used in the consideration of a screen in. If necessary, consult legal advisor.

ORC DEFINITIONS	SCREEN IN EXAMPLES (ASSOCIATED WITH ORC)	SCREEN OUT EXAMPLES
Neglected Child	Failure to Provide Basic Needs	Failure to Provide Basic Needs
Child who is abandoned by the child's parent, guardian or custodian. (ORC 2151.03) *To constitute abandonment, a parent must willfully leave a child with the intention of causing perpetual separation. A child is presumed abandoned when the parent has failed to visit or maintain contact with the child for more than ninety days, regardless of whether the parent resumes contact with the child after that period of ninety days. (ORC 2151.011)	*Parent leaves child with an inappropriate caregiver or no caregiver. *Caregiver can no longer provide for child's basic needs and parent's whereabouts are unknown. *Parent refuses to make alternate arrangements for child at caregiver's request.	*Parent leaves child in the care of a willing and appropriate relative or kin. *Child left with non-custodial parent beyond court ordered visitation
Child who lacks adequate parental care because of the faults or habits of the child's parents, guardian, or custodian. (ORC 2151.03)	Failure to Provide Basic Needs	Failure to Provide Basic Needs
	*Parent fails to provide child with food, shelter, or clothing.	*Parent allows child to reside with another who is providing for child's basic needs.

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<p>*Adequate parental care is the provision of adequate food, clothing, and shelter to ensure the child's health and physical safety and the provision of specialized services warranted by the child's physical or mental needs.(ORC 2151.011)</p> <p>*Because of the omission of the child's parents, guardian or custodian, the child suffers physical or mental injury that harms or threatens to harm the child's health or welfare.(ORC 2151.03)</p> <p>*Mental injury is any behavioral, cognitive, emotional, or mental disorder in a child caused by an act or omission endangering a child* and is committed by the parent or other person responsible for the child's care. (ORC 2151.011)</p> <p>* See conditions of an endangered child in description of an abused child.</p>	<p>*Parent tells child not to return home and has not arranged for another to meet child's needs.</p>	<p>*Parent provides food and child refuses to eat.</p>
	Lack of Utilities	Lack of Utilities
	<p>*Lack of utilities without access to alternative provisions which causes safety threat to child (e.g. lack of electricity for an infant who requires an apnea monitor; no access to water for personal hygiene; no heat source in winter).</p>	<p>*Lack of utilities with access to alternative provisions and no safety threat. (e.g. No water in the home, but parent brings water into the home or utilizes neighbors facilities)</p>
	Homelessness	Homelessness
	<p>*Homelessness and basic needs are not met.</p> <p>*Homelessness as a result of the faults and habits of caregiver (e.g. substance abuse).</p>	<p>*Homeless; however, basic needs being met by an alternate source. (e.g. Family resides in a shelter, camper or tent)</p>
	Lack of Supervision	Lack of Supervision
<p>*Factors to be considered in determining excessive periods of time include: length of time child left alone; age, development and maturity level of child; child's awareness of safety issues and ability to institute knowledge; child's responsibility for siblings or younger children.</p> <p>*Harm or potential harm exists because of being left alone or without monitoring.</p> <p>*Excessive periods of time without access to supervision or monitoring.</p> <p>*Child alone for extended period and no resources.</p> <p>*Child out in community unsupervised or</p>	<p>*Child understands safety issues and has access to resources. (e.g. an adult by phone, neighbor, etc. when left alone) amount of time child is left is appropriate to child's age and development and child is not fearful.</p>	

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	<p>supervised by inappropriate caregiver and a safety threat exists.</p> <p>*Failure to protect child from severe weather conditions.</p> <p>*Young child playing with dangerous objects or in dangerous places without intervention.</p> <p>*Infants/toddlers in home or car without direct supervision.</p> <p>*Parent / Caretaker encourages or fails to intervene in sexual activity of a child as outlined in the sexual abuse guidelines.</p> <p>*Parent/Caretaker fails to intervene or allows unsupervised contact between an indicated and/or substantiated perpetrator and/or convicted sexual offender and his/her victim.</p>	<p>*Parent takes child to planned parenthood, etc. for precaution of sexually transmitted disease and/or pregnancy.</p>
	<p align="center">Dirty or Unsafe Home</p> <p>*Based on child's age and developmental status, home content presents health or safety hazard (e.g. clutter or debris are present to the point that it prevents entrance to or exit from dwelling; exposed wiring within reach of child; uncovered holes in exterior doors, walls, windows unstable physical structure; fire hazard (combustible material near furnace); excessive garbage or rotted food that threatens health; human/animal waste accessible in living quarters; improper disposal of human waste).</p> <p>*Bugs and/or rodents that pose a health and safety hazard (e.g. cockroaches inhabit infants body and/or bedding; rat</p>	<p align="center">Dirty or Unsafe Home</p> <p>*Dirty home without health hazards or safety issues.</p> <p>*Clutter of dirty clothes, newspapers, boxes, etc. that does not interfere with entrance to and exit from the home.</p>

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	<p>bites on a child; Maggots on kitchen counters, stove, etc.)</p> <p>*Child has access to weapons which creates threat of harm.</p> <p>*Improperly restraining child which prevents exit from a specified area resulting in a threat of harm (e.g. chaining/tying child to bed, duct taping child to toilet).</p> <p>*Locking child in confined space (e.g. room, basement, closet, dog cage).</p>	
	Child's poor hygiene	Child's poor hygiene
	<p>*Child's health is affected (e.g. Bleeding, painful rash, skin condition, loss of teeth or hair, chronic tooth pain).</p>	<p>*Child has poor hygiene, absent a health risk.</p> <p>*Child has dirty clothes.</p> <p>*Child has access and chooses not to wear clean clothing.</p>
	Head lice	Head lice
	<p>*Child has untreated head lice with open sores and/or infection.</p>	<p>*Repeated head lice, but being treated.</p> <p>*Child sent home or can not return to school due the school's no nit policy.</p>
	Domestic Violence	Domestic Violence
	<p>*Pattern of domestic violence in the household which impacts parents ability to meet child's physical, emotional and safety needs.</p>	<p>*Verbal arguments and/or isolated domestic violence incident in which children were not present and no impact on parent's ability to meet child's basic needs.</p> <p>(Refer to guidelines for an abused child)</p>

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	Access to Illegal Drugs	Access to Illegal Drugs
	*Safety issue as a result of the presence of drugs in the home.	*Parent arrested for drug offense without the presence of safety issues.
	Caregiver Substance Abuse	Caregiver Substance Abuse
	*Resulting in lack of supervision and/or lack of basic needs.	*Caregiver uses drugs/alcohol, however not currently having an effect on parenting ability.
	Child Substance Abuse	Child Substance Abuse
	*Parent fails to seek/refuses treatment for child abusing drugs/alcohol.	*Substance abuse by a child however parent is attempting to seek treatment services and/or remove access / availability of substance. *Parent is unaware of child's substance abuse.
Child whose parents, guardian, or custodian neglects the child or refuses to provide proper or necessary subsistence, education, medical or surgical care or treatment, or other care necessary for the child's health, morals, or well being. (ORC 2151.03)	Educational Neglect	Educational Neglect
	*Truancy officer and/or school staff have made reasonable efforts to engage parents in resolving enrollment/attendance issues with no resolution. *Parent consistently has older sibling stay home from school to care for younger children. *Due to faults/habits of parents child has missed school to the extent that academic progress is impeded.	*Community truancy officer and/or school staff engages family for resolution. *Five year old child not attending kindergarten. *Child repeatedly misses school due to ongoing medical issues with verification of medical treatment. *Parent home schooling child. *Teenager is repeatedly truant, however parent attempts to intervene or has no knowledge. *Parent not participating in child's IEP and/or parent/teacher conferences.

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		*Child sent home or can not return to school due the school's no nit policy.
	Failure to Thrive (non-organic)	Failure to Thrive
	<p>*Child diagnosed or medical professional has suspicion of failure to thrive for non-organic reasons.</p> <p>*Parent is not providing adequate sustenance, care, etc. to sustain life, weight gain and/or growth.</p>	*Child diagnosed as Failure to Thrive (organic) and parents seeking medical care.
	Medical Neglect	Medical Neglect
	<p>*Parent uses and/or sells child's prescription for self and does not provide it to the child.</p> <p>*Failure to obtain or follow medical treatment that has an impact on child's life functioning.</p>	<p>*Refusal and/or failure of medical treatment does not impact the child's health and safety; this could include decisions based on religious beliefs.</p> <p>*Child has minor symptoms that are not life threatening, includes decisions based on religious beliefs.</p>
	<p>*Failure to provide or unreasonable delay seeking medical care for a condition that could cause permanent disability if not treated.</p>	<p>*Child has terminal illness/disease and parents choose not to utilize and/or continue extraordinary medical treatment based on moral/religious beliefs.</p>
	<p>*Failure to provide emergency medical care for a potential life threatening condition, illness or injury.</p>	<p>*Failure to attend well child check ups.</p> <p>*Parent chooses not to immunize child.</p>
	<p>*Child diagnosed as organic failure to thrive and parents are not seeking treatment.</p> <p>*Failure to seek medical, psychological and/or psychiatric care for child who is verbalizing, or making gestures that are attempts to cause serious harm to him/herself (e.g. self-mutilation, eating disorder, suicidal threat).</p>	<p>*Parent chooses not to administer medication prescribed for treatment of Attention Deficit/Hyperactivity Disorder.</p> <p>*Parent seeks medical or psychological care for child's suicide attempt.</p>

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	<p>*Parent removes child from psychiatric hospitalization against medical advice.</p>	
<p>Child whose parents, legal guardian, or custodian have placed or attempted to place the child into the temporary or permanent custody of any association or institution that is not certified by the department of job and family services without the written consent of the office in the department that oversees the interstate compact on placement of children in violation of sections 5103.16 and 5103.17 of the ORC. (ORC 2151.03)</p>	<p>*Parents place child in another state without the consent of the department of job and family services.</p> <p>*Parent transfers custody of a child to an unlicensed agency.</p> <p>*Parent places child for adoption without an Ohio approved homestudy.</p>	
<p>Child is subjected to out-of-home care child neglect. (ORC 2151.03) Out-of-home care child neglect means any of the following when committed by a person responsible for the care of a child in out-of-home care:</p> <ol style="list-style-type: none"> 1. Failure to provide reasonable supervision according to the standards of care appropriate to the age, mental and physical condition, or other special needs of the child. 2. Failure to provide reasonable supervision according to the standards of care appropriate to the age, mental and physical condition, or other special needs of the child, that results in sexual or physical abuse of the child by any person. 3. Failure to develop a process for all of the following: Administration of prescription drugs or 	<p>*Locking child in confined space (e.g. room, basement, garage, closet, dog cage, etc).</p> <p>*Restraining child, unless legally authorized to do so (e.g. chaining/tying child to bed, duct taping child to toilet).</p> <p>*Failure to provide reasonable supervision.</p> <p>*Failure to provide for basic need of child.</p> <p>*Failure to follow custodial agency recommendations regarding mental health treatment and or medication.</p>	<p>*Child is segregated with appropriate supervision.</p> <p>*Child denied snack.</p>

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<p>psychotropic drugs for the child; Assuring that the instructions of the licensed physician who prescribed a drug for the child are followed; Reporting to the licensed physician who prescribed the drug all unfavorable or dangerous side effects from the use of the drug.</p> <p>4. Failure to provide proper or necessary subsistence, education, medical care, or other individualized care necessary for the health or well-being of the child;</p> <p>5. Confinement of the child to a locked room without monitoring by staff.</p> <p>6. Failure to provide ongoing security for all prescription and nonprescription medication.</p> <p>7. Isolation of a child for a period of time when there is substantial risk that the isolation, if continued, will impair or retard the mental health or physical well-being of the child. (ORC2151.011)</p>		