

	Division of Family and Children Services Child Welfare Manual	Chapter 2: Intake Effective Date:

Lack of Supervision Reference Guide

This resource was developed in response to concerns that Agency staff has erroneously coded cases as **lack of supervision** as a “catch all” for many maltreatment allegations. This tool can be used to clarify this category in all stages of the case continuum.

The following questions should be asked when assessing lack of supervision for children living with a parent/guardian/custodian or children in DFCS custody placed in foster care:

1. Does the child know the emergency plan for the family?
2. Does the child know the parent's phone numbers (work and home)?
3. Does the child have access to the phone numbers of nearby relatives, neighbors or friends?
4. Can the child demonstrate the plan and recite the numbers?
5. What is the availability of the parent during this time?
6. Are there environmental factors that add risk to the situation (firearm safety, water safety, any other potential hazards, etc.).
7. Are there factors that reduce risk (i.e. supportive/available neighbors)?
8. Does the child demonstrate dependability, responsibility and trustworthiness?
9. Does the child have any physical, developmental, genetic, behavioral, emotional, cognitive, or psychiatric disabilities?
10. The length of time and the time of day that the child will be left unsupervised.
11. Identified environmental danger(s) (e.g. unattended in a car or bathtub, or with unrestricted access to a swimming pool).
12. The child's level of discomfort of being left without adult supervision.
13. The specific nature of the child's activities while he or she is left unsupervised (e.g. age-appropriate play activities versus accessing pornography on the Internet, vandalism, or shoplifting);
14. The child's knowledge and use of protocols for safely answering the telephone and/or door when he or she has been left unsupervised;
15. The child's accessibility to his or her parent or to another, specific, informed individual designated to be his or her caregiver;

16. The physical, emotional, and mental capabilities of the designated caregiver

- (e.g. a young baby-sitter or an elderly grandmother asked to care for too many children simultaneously);
17. The number, ages, and maturity of the other children under the caregiver's supervision; and
 18. The age-appropriateness of the responsibilities given to the child.

Some child injury risks are unpredictable or unavoidable; caregivers may underestimate the supervisory requirements for some children, and even the most careful caregiver may experience a brief lapse of supervisory attention, proximity, and/or continuity that leads to childhood injury. In these circumstances, counseling regarding child supervision may be an appropriate initial intervention. Be mindful of the emotional burden a caregiver endures when a child in his or her care suffers a preventable injury. When a reasonable suspicion exists that a pattern of caregiver decisions or behaviors have placed a child at significant ongoing risk for physical, emotional, or psychological harm, lack of supervision may be substantiated.

Children in the Custody of a Parent/Guardian/Custodian

Use the following guidelines for determining if lack of supervision exists when children are alone without adult supervision.

1. Children eight years or younger should not be left alone;
2. Children between the ages of nine years and twelve years, based on level of maturity, may be left alone for brief (less than two hours) periods of time; and,
3. Children thirteen years and older, who are at an adequate level of maturity, may be left alone and may perform the role of babysitter, as authorized by the parent, for up to twelve hours.

These guidelines pertain only to children who are **not** in the department's custody.

EXCEPTIONS

There are circumstances where children due to mental or emotional limitation or maturity level cannot be evaluated based on the guidelines outlined above. These situations should be staffed on a case by case basis with a supervisor in making an investigative decision. For example:

1. An older child with a special condition or disability who is left alone or as a caregiver for younger children.
2. A child younger than 13 years, who exhibits exceptional maturity and has participated in a course on babysitting may be left alone or to care for other children. The investigative case manager must verify that the child participated in the skills class.

Children in DFCS custody (Foster Care Only)

Children in DFCS custody have experienced abuse or neglect and may require a higher level of supervision than children who have not experienced maltreatment. Conversely, DFCS has a responsibility to move children in care toward independence and may benefit from experiences that foster a sense of responsibility and self-control. Therefore, while DFCS will allow children in care to be home alone, the acceptable age where this can occur is different than that of children not in DFCS custody. Children in DFCS custody are not permitted to babysit. Therefore, the following rules apply to children in DFCS custody in a foster care placement.

1. Reliable and competent youth, 13 years and older, may be left under their own supervision under certain circumstances and as agreed upon (and documented) by the SSCM and placement provider.
2. Plans for ILP-eligible youth (age 14 and older) to be left under his/her own supervision, must be agreed upon and documented in the Written Transitional Living Plan (WTLP) and signed by the SSCM, ILP Coordinator, placement provider, and youth.

The primary factor to consider in determining if youth may be left alone is their ability to function for short periods of time independent of a caretaker. Examples of factors to be considered for children in foster care are as follows:

1. Length of time the youth has been in this home.
2. Youth's history of emotional/psychological stability.
3. Youth's history of running away and other status offenses.
4. Youth's history of delinquent behavior.
5. Youth's history of alcohol and substance abuse.
6. Number of youth present in the home and their relationship with each other.
7. Gender mix and the relationships of the youth to be left without adult supervision.
8. Youth's history of sexual acting out.
9. Youth's school performance.
10. Youth's ability to readily access foster parent or other identified person should the need arise.
11. Physical health
12. Medical, intellectual and developmental age.
13. Child's current behavior (has there been recent behavioral improvements or successes?)
14. Youth's comfort (and desire) to be left without adult supervision.

This is NOT an all-inclusive list. The foster parent and Case Manager together must determine the feasibility of leaving older youth alone in the foster home for short periods of time.

Children in Congregate Care Settings

Congregate care cover settings include: group care/residential care, shelter care and juvenile detention facilities. All congregate care arrangements are conceptually related because care is primarily provided by a shift of unrelated

caregivers. Children in congregate care should be supervised at all times.

Use the following guidelines for determining lack of supervision in congregate care:

1. Is there an adequate number of staff to properly supervise children placed at the facility at all times?
 - a. What is the Agency's required staff-to-youth ratio? (Use the highest level, when there is a mixed ratio.)
 - b. Was the staff physically located where they were assigned? (e.g. was the staff assigned to sit in the hallway in her position? Did bed checks occur as defined by the Agency?)
 - c. What is the plan to "cover" when there are mitigating circumstances?
 - d. Do staffing patterns ensure adults are present at most vulnerable shift times (early morning and late night?).
 - e. Does the case documentation by the facility reflect the communication of information regarding child specific behavior during the proceeding shift.
 - f. Is the Agency accredited?
2. Was staff awake and alert?
3. Does the staff assigned to supervise the child(ren) have the appropriate training and experience to handle the behavioral or other related supervision issues?
4. What are the physical conditions of the facility? Are their environmental factors that add further risk to the situation?
 - a. Are required monitoring devices (cameras) functional in addition to staff present?
 - b. Are the children's medications locked and inaccessible?
 - c. Are chemicals and cleaning supplies locked and inaccessible?
 - d. Are knives or other potential weapons locked and inaccessible?
5. What is the previous history (Child Protective Services and Office of Regulatory Services) on this facility?
6. Did the facility review and take into account the child's history (e.g. child perpetrator, history of runaway, history of assaulting other's or the child's mental limitations)
 - a. What are the sleeping arrangements?
7. Did the agency notify DFCS of any behavioral issues?