

Chapter 5

SPECIAL CONDITIONS

5-1. Purpose. This chapter provides guidelines for assessment, documentation, and assignment of Special Conditions referrals at the Hotline. A Special Conditions referral is accepted when a child is in need of services or supervision from the Department and there are no allegations of abuse, neglect, or abandonment. Special Conditions include: Caregiver Unavailable, Child on Child Sexual Abuse, Foster Care Referral, and Parent Needs Assistance.

5-2. Information Collection for Special Conditions.

a. The Hotline counselor will utilize Intake Protocol to assess the reporter's concerns and determine if the information meets statutory criteria for abuse, neglect, or abandonment.

b. If the concerns do not meet criteria for abuse, neglect, or abandonment, the counselor must collect sufficient information to determine if a Special Conditions referral is appropriate.

c. The screening decision will be based on the Child Maltreatment Index section definitions for Special Conditions (CFOP 170-4) and the following criteria:

(1) For all Special Conditions other than Foster Care Referrals, the identified child must meet the statutory definition of a child.

(2) A Foster Care Referral may be accepted for a dependent young adult age 18-22 in a licensed foster care facility. If the young adult meets statutory criteria as a vulnerable adult and the concerns meet criteria for abuse or neglect of a vulnerable adult, an Adult Intake will be accepted rather than a Foster Care Referral.

(3) For Parent Needs Assistance, the reporter must be the parent/legal guardian requesting assistance for themselves.

(4) If the reporter is an employee of a DJJ facility or a Baker Act facility reporting that a child is locked out of their home due to the refusal, inability, or unavailability of the parent(s), a Caregiver Unavailable referral will be accepted if there are no additional concerns of abuse or neglect. If an investigator assigned to a Caregiver Unavailable referral reports to the Hotline that they suspect that the parent/legal guardian abused, neglected, or abandoned the child, the Hotline will enter a new In-Home intake.

d. The counselor must attempt to gather the home address, means to locate, and full demographic information for each child, and for household members when relevant, prior to closing the call.

e. Additionally, the counselor must attempt to gather the following information:

(1) The reporter's name, occupation, relationship to the child, contact information, and how they became aware of the situation they are reporting.

(2) Any risks or dangers the child protective investigator or case manager may encounter when making contact with the participants.

(3) The name and contact information of any source(s) whom the investigator may contact for more information.

(4) The current and 24 hour locations for all participants in the referral.

(5) Whether any participant in the referral has a disability, hearing impairment, or limited English proficiency. If a participant has a disability, hearing impairment, or limited English proficiency, the counselor must ask what device(s) or interpreters, if any, are needed for the participant to communicate.

(6) The following additional information specific to reports of Child on Child Sexual Abuse:

(a) The location and county where the incident occurred.

(b) The names and contact information for the parents of both children to be included as sources for the investigator.

(c) Whether the alleged aggressor child has access to any other children, including siblings.

f. For allegations of Child on Child Sexual Abuse, the counselor must transfer the reporter to the appropriate county sheriff's office at the conclusion of the call. If the location of the incident is known, the reporter will be transferred to the sheriff's office in that county. If the location of the incident is not known, the reporter will be transferred to the county where the victim child is located or where there is a means to locate the victim child.

5-3. Response Time for Special Conditions.

a. The response time decision should be based on whether the circumstances warrant a prompt response. For example: The parents have been hospitalized and the child needs to be placed as soon as possible.

b. A 24 hour response time will be assigned to all Parent Needs Assistance and Foster Care Referrals unless there are urgent circumstances that are not the result of maltreatment or a credible threat of immediate harm to the child. If there is an immediate, significant, and clearly observable danger to the child (e.g., the parent makes a credible threat to smother the child to make her stop crying), a report of abuse or neglect should be accepted instead of a Special Conditions referral.

5-4. Documentation of Special Conditions Intakes.

a. The counselor must thoroughly search for each participant in FSFN and check for any open intakes prior to generating a new Special Conditions intake or creating new persons in FSFN.

(1) A Caregiver Unavailable or Parent Needs Assistance intake should not be generated if the participants are found in an open intake of abuse or neglect. The counselor must sequence the special conditions concerns as a supplemental report to the open Child Intake.

(2) A Child on Child Sexual Abuse intake cannot be combined with a report of maltreatment by a caregiver. For statistical reasons, each Child on Child intake must be generated as an initial intake. A Child on Child intake shall only be sequenced as a supplemental intake to an open Child on Child intake when the inappropriate sexual behavior or juvenile sexual abuse involves the same victim, alleged aggressor, and behaviors.

(3) A Foster Care Referral cannot be combined with an In-Home or Other intake. If there is an open Institutional intake involving the same foster home and the same participants, a supplemental intake must be generated instead of a new Foster Care Referral.

b. The participants and their assigned roles on the intake will vary based on the type of Special Conditions.

(1) Caregiver Unavailable. Participants will include the child and the unavailable parent/caregiver(s). The Referral Name (RN) will be the mother if she is a participant on the intake, or the father or other legal guardian if the mother is not a participant. All parent/caregiver(s) should be assigned the Parent/Caregiver (PC) role. The child's participant role will be Identified Child (IC).

(2) Child on Child Sexual Abuse. Participants will include the alleged aggressor child and the victim child only. The victim child's participant roles will be RN and Victim (V). The alleged aggressor child's participant role will be Alleged Juvenile Sexual Offender (JS). If there is more than one victim child on the intake, RN will be the youngest victim child. The parents of the two or more children should be listed in the "Source Information" section of the intake if their information was obtained.

(3) Foster Care Referral. Participants will include the foster child and the foster parent(s) or licensed family shelter employee(s). The foster parent or licensed family shelter employee's participant roles will be PC and RN and the child's participant role will be IC.

(4) Parent Needs Assistance. Participants will include all children and adults in the household. The RN will be the mother if she is a participant on the intake, or the father or other legal guardian if the mother is not a participant. The participant role of the child/children with whom the parent needs assistance will be IC. If there are any children in the home with whom the parent does not need assistance, their participant role will be Child in the Home (CH).

c. Under the Special Conditions tab on the intake, the counselor will select the Special Conditions type and document the concerns in the narrative field. The narrative must support the selected Special Conditions type.

d. For Foster Care Referrals, the counselor must change the investigative subtype to "Institutional," search for the provider in FSFN, and attach the provider to the intake if the provider is found. For all other Special Conditions, the investigative subtype will be "In-Home."

e. For Special Conditions intakes with an immediate response priority, the counselor must document the rationale for their response time decision on the Decision tab (e.g., "The child's sole custodian has died and the child needs immediate placement.").

f. The county of assignment will vary based on the type of Special Conditions. A secondary county (i.e., law enforcement jurisdiction) should not be assigned for Special Conditions except for Child on Child Sexual Abuse.

(1) Caregiver Unavailable intakes should be assigned to the county where the child is currently located.

(2) Child on Child Sexual Abuse intakes should be assigned to the county where the victim child resides. The secondary county will be the county where the incident occurred, if known. Otherwise, the secondary county will be the county where the victim child is located.

(3) Foster Care Referrals should be assigned to the county where the foster home is located.

(4) Parent Needs Assistance intakes should be assigned to the county where the family resides. If the family is currently located in a county in which they do not reside and they are not

expected to return home within the next 24 hours, or there are urgent circumstances, the intake should be assigned to the county where the investigator can locate the family.

g. Before screening in the intake, the counselor must ensure that they have selected “No” for “Background Check Required” and “Reason: Special Conditions.”

h. For Child on Child Sexual Abuse, the counselor must ensure that the box is checked on the Decision tab for “Send a Florida Administrative Message to Law Enforcement.”