Montana Department of Justice Office of the Child and Family Ombudsman Meeting the Child Part Two: A Systemic Report



Contact the Ombudsman:

1-844-25CHILD

1-844-252-4453

DOJOMBUDSMAN@mt.gov

Table of Contents

INTRODUCTION
THE ISSUE
What is an Immediate Danger Assessment?
SYSTEMIC INVESTIGATION METHODOLOGY
What happens when a report of suspected child abuse is made?
How will the Child and Family Services Division know if a child is at risk of abuse or neglect?
When Immediate Danger is identified7
Process to identify Immediate Danger:
OUTCOME9
Chart identifying Immediate Danger Assessment errors:
SUMMARY AND RECOMMENDATIONS:
Recommendation #1:
Recommendation #2:
Recommendation #3:
CONCLUSION
APPENDIX
GLOSSARY

INTRODUCTION

In 2014, the Montana Department of Justice: Office of Child and Family Ombudsman began responding to citizen requests to review and investigate specific Department of Public Health and Human Services: Child and Family Services Division actions or omissions in response to child abuse reports. Between 2014 and November 2023, the Office of Child and Family Ombudsman responded to 2,613 citizen requests and completed a total of 996 case reviews and investigations. During that period, the Office of Child and Family Ombudsman collected a tremendous amount of data and flagged cases with similarities. As a result, the Office of Child and Family Ombudsman and its partners have identified statewide trends in the child welfare system.

THE ISSUE

The stakeholders to Montana's child protection system, public policy leaders, and citizen advocacy organizations have contacted the Office of Child and Family Ombudsman with concerns about children placed out of their homes. The Office of Child and Family Ombudsman is responding to this concerning trend with an analysis of 60 cases in which a Child Protection Specialist conducted an Immediate Danger Assessment. In 2018, a record number of Montana children were in state care¹, a total of 3,951 that year. In the last five years the number of Montana children in state care has been reduced by 38% to a total of 2,456 by June 2023². The goal of the report is to provide evidence-based information about how and when the Child and Family Services Division determines whether a family needs formal support, and if a child may need an out of home placement.

Meeting the Child Part Two: A Systemic Report is an analysis of the Immediate Danger Assessment procedure conducted by the Montana Department of Public Health and Human Services Child and Family Services Division. The data set of 60 cases is divided into two parts. Part One of the report was released to the public in July 2023, in response to concern that Child and Family Services may be removing children from legal caregivers without adequate evidence of abuse or neglect. <u>Meeting the Child Part One</u> provided details on the three cases which did result in the removal of a child or children. Part Two will measure the details of each case to identify any errors or omissions in how the required procedure was followed.

What is an Immediate Danger Assessment?

An Immediate Danger Assessment is a tool used by the Child Protection Specialist in the field to determine whether a child is at immediate risk of harm while in the care of a caregiver, or directly for the caregiver. The goal of this report is to provide evidence-based information and guidance to improve Montana's response to vulnerable children. The Office of the Child and Family Ombudsman extends our appreciation to the Department of Public Health and Human Services and Child and Family Services Division leadership for their consultation and partnership.

MCA 41-3-1215 requires the Office of Child and Family Ombudsman to provide oversight of the child protective services provided by the Department of Public Health and Human Services to identify and report on trends in the handling of the cases and make recommendations to improve

¹ https://www.casey.org/media/montana-fact-sheet-2021.pdf

² Presentation to the 2023 Biennium Legislative Interim Committees, Child and Family Services Division (November, 2023)

the child protective services system. Systemic investigations review numerous cases to find information about a single specific trend, area of practice, or pattern that affects multiple cases and families in Montana's child welfare system.

The Child and Family Services Policy Manual requires an Immediate Danger Assessment be completed at each initial contact with a child who has been alleged to be abused or neglected by their caregiver(s):

- 1. The Child Protection Specialist must complete an Immediate Danger Assessment(s) on each open report within 24 hours of the initial face-to-face contact with the identified child(ren).
- 2. If the Child Protection Specialist identifies that there is an Immediate Danger to a child or children in the home, whenever possible, the Child Protection Specialist must consult with the Child Protection Specialist Supervisor, or higher-level administrator, prior to leaving the situation to assure the Protection Plan fully addresses the safety concerns identified as Immediate Danger(s) to the safety of the child(ren).
- 3. Unless an Immediate Danger is identified the Child Protection Specialist must consult with the Child Protection Specialists, or higher-level administrator, within twenty-four hours of the first face-to-face contact with all children in the family.
- 4. The Child Protection Specialists, or higher level administrator, will document consultations."³

Two hundred twenty-two (222) random cases were selected from the Child and Family Services Division Montana Family Safety Information System database for this report. Of those, sixty (60) child protection reports were assigned to the field offices' Child Protection Specialists for investigations. These cases were analyzed for this report. The methodology section on page 4 details the case selection process. The overall results of the analysis are:

- 75%, or 45 cases, were conducted according to the Child and Family Services Policy Manual.
- 25%, or 15 cases, were not conducted according to the Child and Family Services Policy Manual.
- 12%, or 7 cases, had more than one procedural violation of Child and Family Services Policy Manual.

SYSTEMIC INVESTIGATION METHODOLOGY

Based upon trainings and consultations with the United States Ombudsman Association, the Office of Child and Family Ombudsman adopted protocol and procedures for systemic reviews and reports about Montana's child protection system. The protocol's three steps are:

- 1. Identify the issue.
- 2. Assess the issue.

³ State of Montana, Department of Health and Human Services, Child and Family Services Division. (2022).

3. Develop a timeline for the investigation and report.

Considerations for reporting include questions such as:

- ➤ Is this an issue of public interest?
- > Will there be value to the recommendations?
- ➤ Are there reasonable grounds?
- ➤ How many people will the report impact?
- > Do the impacted people include vulnerable populations and decision makers?
- > Is the issue within the Office of Child and Family Ombudsman authority?
- Does the Office of Child and Family Ombudsman have the resources to complete the review?

To assess the Child and Family Services Division's adherence to the procedures guiding Immediate Danger Assessments, the Office of Child and Family Ombudsman pulled 222 closed reports. These reports were received by Child and Family Services Division within a 90-day window following the Child and Family Services policy updated in April 2022, from within the Child and Family Services Division Montana Family Services Information System database.

Reports were initially sorted by Child and Family Services Division Region (Figure A1), and then the Office of Child and Family Ombudsman selected reports from as many distinct counties within a region as were available. A variety of priorities were included (P1, P2 and P3) as well as a variety of *Substantiated* and *Unsubstantiated* reports until there were 10 investigations for each of the six regions.

During the review of the 60 selected cases, the Intake Assessment Form created by Centralized Intake was reviewed in Montana Family Services Information System to find allegations and the identified children. The report's corresponding Family Functioning Assessment was reviewed to examine documentation surrounding the first date of the face-to-face contact between the Child Protection Specialist and the identified child(ren).

This report includes an overview of the procedures for when a report of suspected child abuse is made to Montana's Child Abuse Hotline and assigned to the field for investigation.

What happens when a report of suspected child abuse is made?

Pursuant to MCA § 41-3-201(1), in Montana an individual who knows, or has reasonable cause to suspect, that a child is being abused or neglected, should call the Centralized Intake hotline at 1 (866) 820-5437 to make a report. The Child and Family Services Division operates a toll-free child abuse hotline 24 hours a day, 7 days a week.

Centralized Intake Specialists are trained to collect detailed information about the concern. The Centralized Intake Specialists use the information provided to screen calls, assess the level of risk to children, assign the type of maltreatment alleged and prioritize reports according to the urgency with which a Child Protection Specialist needs to respond.

According to <u>MCA 41-3-102</u>, child maltreatment is defined as: 1. Actual physical or psychological harm to a child

- 2. Substantial risk of physical or psychological harm to a child
- 3. Abandonment

The specific type of maltreatments include:

> Physical abuse / Physical neglect / Psychological abuse or neglect / Sexual abuse

Child and Family Services Division has field offices across the state, broken into six regions (See appendix for <u>map</u>). The Centralized Intake Specialist sends all reports of suspected child maltreatment to the proper field office for investigation. Once a report is received by the field office, the Child Protection Specialist must make face-to-face contact with the identified child(ren) within the timeframes assigned.

The timeline of a case begins when the Centralized Intake Specialist enters the report and sends it to the field, not when the Child Protection Specialist first sees it on their caseload.

In June 2022, the Office of Child and Family Ombudsman investigated the timeliness of Child Protection Specialist responses to reports designated P2, requiring Child and Family Services Division to see the child face-to-face within 72 hours, as well as the barriers identified by the field when the timelines are missed.

How will the Child and Family Services Division know if a child is at risk of abuse or <u>neglect?</u>

The Child and Family Services Division uses *The Montana Safety Assessment and Management System* to ensure that ongoing safety assessments guide the Child Protection Specialist's decision making throughout the life of the case. The Family Functioning Assessment is the primary tool. The scope of the assessment is identifying safety threats, immediate and/or impending, and working with families to mitigate those threats, while assessing the vulnerability of the indicated children and protective capacities of the caregivers.

Children are initially considered "safe" when there is no immediate danger threat identified, or the caregivers' protective capacities are sufficiently controlled for any existing threats. To make this determination, the Child Protection Specialist must complete an Immediate Danger Assessment (CFS-SAMS-501) on each open report within 24 hours of the first face-to-face contact with the identified child(ren). Child Protection Specialist have *The Montana Safety Assessment and Management System Field Guide*, which defines the Immediate Danger Threats and Safety Threshold Criteria.

The Immediate Danger Assessment form also has guidance and requires the signature of the Child Protection Specialists (Figure A3 and A4).

The main function of the Immediate Danger Assessment is to determine whether the identified child(ren) need immediate protection from serious harm.

Immediate Danger(s) is/are Immediate, Significant and Clearly Observable family conditions or threats to child safety that are actively occurring or "in process" of occurring and will likely result in severe (serious) harm to a child. (CFS-SAMS-501).

The Immediate Danger Assessment includes 27 "Immediate Danger Threats" which are specific behaviors or conditions that are associated with a child being in immediate danger of serious harm. Not all safety threats included on the Immediate Danger Assessment are stand-alone threats that point to Immediate Danger, but combined with others increases the risk to a child. See Figures A3 and A4 for an example form of an Immediate Danger Assessment. The determination of whether a child is in Immediate Danger of serious harm is based upon credible information available at the time of the assessment.

<u>When Immediate Danger is identified, what are the options for the Child and Family</u> <u>Services Division to engage the family and improve child safety?</u>

When Immediate Danger has been identified with a family, the Child Protection Specialist must implement a Protection Plan. Below is a chart that outlines the components of a Protection Plan.

PROTECTION PLAN
WHEN: When Immediate Danger is Identified
WHY: To Control Safety
WHAT: Immediate Risk of Harm
PURPOSE: To Complete the Family Functioning
Assessment and Investigation
EFFECT: Short term (30 days if the child is out of the
home or 60 days if the child is kept in the home)

(Field Guide 8/2015)

Once Immediate Danger has been identified, either an *In-Home* or *Out-of-Home Protection Plan* may be offered to the family. The type of Protection Plan may be dependent on several factors including the type of alleged abuse/neglect, caregiver protective capabilities and/or characteristics of the child. An *In-Home Protection Plan* (IHPP) may last up to 60 days and an *Out-of-Home Protection Plan* (OHPP) may last up to 30 days.

If there is a Protection Plan in place at the conclusion of the Family Functioning Assessment, it must then be replaced by a Safety Plan, if further, unmanaged safety threats exist. The Family Functioning Assessment is utilized throughout the investigation to determine the safety of the children. There are multiple components to the Family Functioning Assessment, and this report only focuses on the beginning stages of the Family Functioning Assessment.

On page eight is a simplified flowchart to demonstrate the first few steps on how the Child and Family Services Division opens an investigation, assesses safety, and begins the Family Functioning Assessment.

Process to identify Immediate Danger:



OUTCOME

Immediate Danger was not found in 57 of the 60 cases analyzed by the Office of Child and Family Ombudsman. The three cases where Immediate Danger was identified were reviewed in a previous systemic report, <u>Meeting the Child Part One</u>. Part Two of the report examines the fieldwork completed while the 60 cases were being investigated for Immediate Danger. Fieldwork is dictated by the Child and Family Services Policy Manual. These components are outlined in the Introduction on page three.

Every investigation that the Child and Family Services Division completes must have an Immediate Danger Assessment completed. The requirements are:

- The Child Protection Specialist must interview the identified child in the report first and interview any other children in the home;
- The Child Protection Specialist and Supervisor must consult regarding the interview(s) within 24 hours;
- The Child Protection Specialist and Supervisor must approve the Immediate Danger Assessment form;
- The interviews and supervisor consultation must be documented in the Immediate Danger Assessment form, which is uploaded by the Supervisor to the Child and Family Services Division's online database, Montana Family Services Information System.

Of the 60 cases that were reviewed for Part One and Two of Meeting the Child, immediate danger was found in 5% of the 60 cases. The complete Immediate Danger Assessment protocol data analysis of 60 cases indicates the following:

- In 45 of the 60 cases, or 75%, the Immediate Danger Assessment procedure was completed;
- In 15 of the 60 cases, or 25%, the Immediate Danger Assessment procedure was not completed;
- In 7 of the 60 cases, or 12%, there was more than one error or omission in the Immediate Danger Assessment procedure.

The specific errors or omissions are illustrated in the chart on page 11. Each "X" indicates the type of error or omission identified by the column heading. These were determined by a review of the documentation in the online Child and Family Services case management databases at the time the cases were selected for Meeting the Child Part One.

Case Number:	Child Protection Specialist conducted face-to-face with identified child:	Child Protection Specialist and Supervisor Consultation:	Immediate Danger Assessment form signed and uploaded to Montana Family Services Information System:
1	×	×	×
2	×	×	×
3		×	×
4		×	×
5		×	×
6	×		×
7	×		×
8		×	
9		×	
10		×	
11		×	
12	×		
13	×		
14	×		
15	×		

Chart identifying Immediate Danger Assessment errors:

SUMMARY AND RECOMMENDATIONS:

This sample is the basis for the recommendations for Part Two of this report. Each of the three recommendations is tied to a specific trend in errors or omission of the *Child and Family Services Policy Manual*. Below are the trends seen throughout the 15 cases in which the Immediate Danger Assessment procedure was not completed:

9 cases, or 15% of the overall 60 cases, did not receive the procedurally correct supervisor consultation.

Recommendation #1: The Montana Department of Public Health and Human Services direct the Child and Family Services Division to provide a clear and consistent communication plan or

chain of command for Supervisor consultation for each Immediate Danger Assessment statewide.

Rationale #1: The Child and Family Services Division procedures designate Supervisors as responsible for receiving reports from the hotline and assigning each report to a Child Protection Specialist. The Child Protection Specialist identifies whether there is an Immediate Danger to a child(ren) in the home. The Child Protection Specialist must consult with the Supervisor prior to leaving the location of the child(ren). The Supervisor manages the work of the Child Protection Specialist and is primarily responsible for approving the Immediate Danger Assessment, safety planning, report findings, and guiding the decision-making process throughout the entire assessment.

> 8 cases, or 13% of the overall 60 cases, did not meet the identified child face-to-face.

Recommendation #2: The Montana Department of Public Health and Human Services direct the Child and Family Services Division to fully implement *Family Functioning Assessment Procedure* for each initial face-to-face contact with the identified child.

Rationale #2: The Child and Family Services Division's *Family Functioning Assessment Procedure* determines whether the Child and Family Services Division should intervene with a family to address the identified safety concerns based on the investigation. Consistent use of the *Family Functioning Assessment Procedure* by Child Protection Specialists in the field will ensure that any child(ren) alleged to be abused and neglected are effectively assessed regarding their safety.

7 cases, or 12% of the overall 60 cases, did not have the Immediate Danger Assessment form signed and uploaded to the online database.

Recommendation #3: The Montana Department of Public Health and Human Services direct the Child and Family Services Division to require documentation of the Supervisory consultation prior to the upload of the Immediate Danger Assessment into the Montana Family Safety Information System.

Rationale #3: The Child and Family Services Division *Family Functioning Assessment Procedure* outlines the timeframe for completion of the Immediate Danger Assessment and requires that the form is uploaded within 24 hours. The form does include a signature line for a Supervisor, however several of the Immediate Danger Assessments were not signed nor uploaded within the required timeframe. A supervisory signature and prompt upload for each Immediate Danger Assessment will provide documentation of the consultation.

There is one case within the table that was closed by Child and Family Services as "unable to locate" when the investigation concluded. Additional information was surveyed from Child Protection Specialist staff in the first Office of Child and Family Ombudsman systemic report, <u>The First Knock at the Door</u>.

CONCLUSION

Overall, the Child and Family Services Division is following procedure accordingly with 75% of the random cases handled correctly. However, the 15 cases that were not conducted according to policy and procedure demonstrate that errors can beget errors. Small assistance from a simple flowchart and guidance from an available supervisor can help to provide guidance during initial contact and interviews with children and families.

APPENDIX

Figure A1: The Montana Child and Family Services Division's geographic regions.



Figure A2: The Notification to Parent Form.

Greg Gianforte, Gov Charles T. Brereton, Di
TO PARENT
ou may have a support person present during any emergency protective services.
DATE:
pecialist PHONE #:
PHONE #:
2.
4.
bandonment, the Child and Family Services Division (C we-named child(ren) is (are) at risk of child abuse or neg SD removed your child(ren) from your home and placed child(ren) are:

Purpose of Hearings:

The District Court Judge is required to hold a Show Cause Hearing and if requested an Emergency Protective Services Hearing if your child(ren) is (are) removed from your home for longer than 5working days. At these hearings, the Child Protection Specialist and you can provide statements the Judge. The Child Protection Specialist will explain the reasons that your child(ren) was (were) removed from your home and placed in emergency foster care. You will have the opportunity to tell the Judge why you believe CFSD should not have removed your child(ren). The Judge must consider all the information that you and the Child Protection Specialist present, as well as the statements you make during the hearing.

At the end of the Hearing, the Judge will make two decisions:

- 1) Whether the Child and Family Services Division should have removed your child(ren) from your home; and
- 2) Whether your child(ren) should remain in temporary foster care.

If the Judge decides that your child(ren) should remain in foster care, the CFSD Child Protection Specialist will work with you to develop a treatment plan. The treatment plan will outline the steps you will need to take for your children to be returned to you.

- > You have a right to receive a copy of the affidavit regarding the reasons for removal.
- You may request that the child(ren) be placed with a relative, including fictive kin.

The Department of Public Health and Human Services (DPHHS) does not discriminate on the basis of race, color, religion, creed, political ideas, sex, age, marital status, physical or mental disability, or national origin. If you believe you have been subjected to discrimination, contact the DPHHS Human Resources Division at (406) 444-3136 or the Montana Human Rights Bureau at 1-(800)-542-0807, or relay service at 711.

Figure A3: The first page of the Immediate Danger Assessment form.

CFS-SAMS-501 10/18/2022

MONTANA SAFETY ASSESSMENT AND MANAGEMENT SYSTEM

Immediate Danger Assessment:

□ Original □ New Incident

REPORT NAME:	DATE OF REPORT:	DATE OF ASSESSMENT:
REPORT NUMBER:	CHILD PROTECTION SPECIALIST NAME:	
CHILD PROTECTION SPECIALIST SUP		
CHILD PROTECTION SPECIALIST SUPI	ERVISOR NAME:	

Immediate danger is the identification of safety threats that are Immediate, Significant, Clearly Observable and actively occurring or in process of occurring and will likely result in actual or substantial risk of physical or psychological harm to a child.

Describe how Immediate Danger <u>is NOT identified</u> at the initial contact, or subsequent contacts, with the child and/or parents. Provide information about the family conditions that are providing for basic needs and actively controlling for safety.

the second se

Page 1 of 2

Supervisory Consultation after first contact with the child(ren):

Supervisory consultation must be completed within 24 hours of the first face-to-face contact with all children in the family.

CPSS Name and Date of consultation (if completed by phone):

Date_____

□ Information deemed sufficient; no Immediate Danger(s) identified.

Supervisory notes regarding consultation: (optional)

Supervisory Approval of the *written* Immediate Danger Assessment:

Child Protection Specialist Supervisor _

Signature

Date

Page 2 of 2

GLOSSARY	
41-3-102, MCA	Montana Code Annotated: Title 41. Chapter 3. Part 1.
41-3-1215, MCA	Montana Code Annotated: Title 41. Chapter 3. Part
	12. Section 15
41-3-201, MCA	Montana Code Annotated: Title 41. Chapter 3. Part 2.
	Section 1.
AI	Additional Information: Additional Information to a
	case or report.
CFSD	Child and Family Services Division: The division
	within the Department of Public Health and Human
	Services responsible and accountable for all child
	abuse and neglect investigations in Montana where
	the alleged perpetrator is a parent or other person
	responsible for a child's welfare under Montana law
	and for managing all open child welfare cases in Montana. Child and Family Services Division does
	not investigate all reports on tribal lands.
Child and Family Services Policy	Child and Family Services Policy Manual.
Manual	······································
CI	Centralized Intake: Where all calls to the Montana
	Child Abuse and Neglect Hotline are received.
	1(866)820-5437.
CIS	Centralized Intake Specialist: A person who answers
	the calls to the Montana Child Abuse and Neglect
	Hotline and assigns the level of the child protection
	report.
Child Protection Specialist	Child Protection Specialist: The caseworker for a
	child or family involved in the Child Protection
Child Protection Specialists	System. Child Protection Specialist Supervisor: The
Clind Protection Specialists	supervisor of a Child Protection Specialist
DPHHS	Montana Department of Public Health and Human
	Services.
Emergency Protective Services Hearing	A formal proceeding before a court of law where a
	petition for Emergency Protective Services is
	presented.
EPS	Emergency Protective Services: Services provided to
	a child and family when the Child Protection
	Specialist determines, based upon a thorough
	investigation, that the child cannot safely remain in
	the home without the provision of the service (out-of-
	home placement).
FEM	Family Engagement Meetings: A creative tool used
	by Child Protection Specialists to empower families
	in formulating a plan of treatment to provide a safe
	protective environment for their children where issues

	of abuse/neglect have come to the attention of the
	Child and Family Services Division. The goals and
	purpose for holding a FEM meeting should change
	and be adapted to meet the needs of each family.
FFA	Family Functioning Assessment: A form that Child
	Protection Specialist use to determine safety and risk
	factors for a child(ren) during an investigation and as
	part of an ongoing child welfare case.
FND	Founded: After the investigation, the Child Protection
	Specialist has determined that there is probable cause
	to believe that an act of child abuse or neglect
	occurred.
ICWA	Indian Child Welfare Act: A federal law that
ICWA	recognizes that Indian tribes have sovereign rights and
	legal powers with respect to Indian children and, as
	government, have a vital legal role to play in
	determining whether Indian children should be
	separated from their families and culture.
IDA	Immediate Danger Assessment: A form used by a
	Child Protection Specialist that assesses the
	immediate danger of a child who is the subject of a
	report to Centralized Intake .
IHPP	In-Home Protection Plan: A type of Protection Plan
	that may last up to 60 days but can be extended if
	needed.
IHSP	In-Home Safety Plan: A plan that refers to safety
	management so that safety services, actions and
	response assure a child can be kept safe. The plan is
	during the Trial Home Visit and is reviewed monthly.
Immediate Danger Threats	Immediate Danger or Immediate Danger Threats
_	refers to safety threats that are actively occurring or in
	process of occurring and will likely result in actual or
	substantial risk of physical or psychological harm to a
	child and requiring protective action. They must be
	immediate, significant, and clearly observable.
Intake Assessment Form	A form that a Centralized Intake Specialist uses when
	speaking to a caller to the Child Abuse and Neglect
	Hotline to assess the level of risk and any pertinent
	information.
МСА	Montana Code Annotated: The compilation of the
	Montana State Constitution and all other state laws.
MFSIS	Montana Family Safety Information System: A
	statewide database with access to reports and cases
	made to Child Protection Services.
Notification to Parent	A document that notifies a parent as soon as a child is
rouncation to 1 arent	removed and includes the reason for removal,
	removed and merades the reason for removal,

OCFO OHPP OHSP	 information on and purpose of a show cause hearing, and an offer for a support person. Office of the Child and Family Ombudsman. Out-of-Home Protection Plan: A type of Protection Plan that may last up to 30 days but can be extended if needed. Out-of-Home Safety Plan: A plan that refers to safety management that primarily depends on separation of a child from their home. This plan is reviewed monthly and stays in place until the child is placed back in the
P1	home of the parent(s). Priority One: Any report assessed by Centralized Intake which indicates a child may be in immediate danger of serious harm and must be investigated and assessed immediately. Immediately means upon
Ρ2	receipt of the report, not to exceed 24 hours. Priority Two: Any report assessed by Centralized Intake which indicates that a child may not be in immediate danger or is temporarily safe but indicates that the presence of an impending state of danger may exist and/or circumstances of the report, such as evidence, will require a timelier response and the investigation and assessment must be initiated within 72 hours.
Р3	Priority Three: Any report assessed by Centralized Intake which indicates there is a less urgent nature about a child's safety and the initiation of a thorough investigation cannot exceed 10 days.
P4	Priority Four: Any report assessed by Centralized Intake which meets the MCA definition of child maltreatment but fails to meet any immediate or impending danger threats as identified in the Montana
РНА	Safety Assessment and Management System model. Physical abuse: An intentional act, an intentional omission, or gross negligence resulting in substantial skin bruising, internal bleeding, substantial injury to skin, subdural hematoma, burns, bone fractures, extreme pain, permanent or temporary disfigurement, impairment of any bodily organ or function, or death.
PHN	Physical neglect: A failure to provide basic necessities, including but not limited to appropriate and adequate nutrition, protective shelter from the elements, and appropriate clothing relating to weather conditions, or failure to provide cleanliness and general supervision, or both, or exposing or allowing

	the child to be exposed to an unreasonable physical or
	psychological risk to the child.
Protection Plan	An immediate - same day, short term, and sufficient
	protective action from identified safety threats in
	order to allow completion of the initial assessment.
PSA	Psychological abuse or neglect: Severe maltreatment
	through acts or omissions that are injurious to a
	child's emotional, intellectual, or psychological
	capacity to function, including the commission of acts
	of violence against another person residing in the
	child's home.
RA	Child and Family Services Division Regional
	Administrator.
Safety Plan	A written arrangement between caregivers and Child
	Protection Specialists that establishes how impending
	danger threats will be managed.
Safety Threshold	A reference to the point at which a negative condition
	goes beyond being concerning and becomes
SAI	dangerous to a child's safety.
SAI	Sexual Abuse by person responsible for the welfare of
	a child: Commission of sexual assault, sexual intercourse without consent, aggravated sexual
	intercourse without consent, aggravated sexual intercourse without consent, indecent exposure,
	sexual abuse, ritual abuse of a minor, or incest. 41-3-
	102(20), (21), (30)(a), MCA.
SAMS	The Montana Safety Assessment and Management
SAMS	System.
Show Cause Hearing	The hearing legally required to be held within 20
Show Cause Hearing	days, excluding weekends and holidays, of the filing
	of an initial child abuse and neglect petition.
SUB	Substantiation or Substantiated: Following an
	investigation, the investigating worker has determined
	by a preponderance of the evidence that the reported
	act of child abuse, neglect, or exploitation occurred,
	and that the perpetrator of the abuse, neglect, or
	exploitation may pose a danger to children.
TIA	Temporary Investigative Authority: Judicial authority
	to conduct an intensive investigation into suspected
	child abuse and neglect under which the court grants
	specified relief.
TLC	Temporary Legal Custody: The legal status created by
	an order of the court that gives a person or agency the
	right and responsibility for the care, custody and
	control of a child on a temporary basis.

TPR	Termination of Parental Rights: The legal rights of legal parents are terminated by a court of competent jurisdiction.
UNS	Unsubstantiated: Following the investigation, the Child Protection Specialist was unable to determine by a preponderance of the evidence that the reported abuse, neglect, sexual abuse, or sexual exploitation occurred.
USOA	United States Ombudsman Association.
YINC	Youth in Need of Care: A youth who has been adjudicated or determined, after a hearing, to be abused, neglected, or abandoned by the act or omission of a person responsible for the child's welfare in a residential setting.