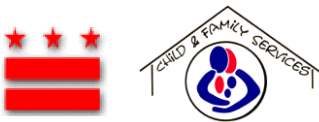


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	CHILD AND FAMILY SERVICES AGENCY Approved by: <u>Rogue Gerald</u> Agency Director Date: <u>December 15, 2010</u>	REVISION HISTORY: December 13, 2010
	LATEST REVISION: April 4, 2011	
	EFFECTIVE DATE: December 15, 2010	

I. AUTHORITY	The Director of the Child and Family Services Agency (CFSA) adopts this policy to be consistent with the Agency's mission and applicable federal and District of Columbia laws, rules and regulations, including but not limited to DC Code § 4-1371.05, DC Code § 4-1303.03 (a)(11), the LaShawn Modified Final Order (November 18, 1993), the <i>LaShawn A. v. Gray Implementation and Exit Plan</i> , and the Health Information Technology for Economic and Clinical Health ("HITECH") Act, 42 USC § 17932 (2011 ed.).
II. APPLICABILITY	All Agency staff, contracted agency staff and contracted personnel.
III. RATIONALE	<p>It is the mission of the Child and Family Services Agency (CFSA) to promote the safety, permanence and well-being of children and families in the District of Columbia. Events and/or incidents that threaten or compromise the well being of a child or youth are deemed "critical events", and require the immediate response and action of CFSA and its private agencies responsible for the safety and well-being of children and youth.</p> <p>CFSA has identified a process for the immediate handling of critical events, the purpose of which is to:</p> <ol style="list-style-type: none"> 1. Identify a high risk incident that has immediate impact on the life, health, and safety of children 2. Describe how CFSA and private agency staff and placement providers report and communicate a critical event 3. Document and track the action taken in a critical event 4. Provide guidance to CFSA staff, private agency staff and placement providers on reviewing and making necessary adjustments to current procedures, and recommending next steps as a result of each critical event 5. Inform practice
IV. POLICY	It is the policy of the Child and Family Services Agency (CFSA) to provide immediate response to all critical events, to document and track all actions taken, and to use the information gleaned from each critical event to improve practice.

V. CONTENTS	A. Definition of a Critical Event B. Notification of a Critical Event C. Critical Events Occurring in Out-of-Home Placement D. Critical Event Meeting E. Documentation of Recommendations and Action Taken in Critical Events
VI. ATTACHMENTS	A. Critical Event Reporting Form
VII. PROCEDURES	<p>Procedure A: Definition of a Critical Event</p> <p>The incidents/events considered critical events include any of the following:</p> <ol style="list-style-type: none"> 1. The death of a child (birth to age 21 years) currently known or who has been known to the Agency within four (4) years prior to the child's death. <i>(See the Child Fatality Review Policy for the critical event process for child fatalities.)</i> 2. A near-fatality or serious bodily injury resulting from child abuse and/or neglect or caused by any means while a child is under CFSA care and custody. <i>[For an incident/event occurring where children or youth are receiving in-home services, the incident/event would be considered for an investigation. See the Investigations policy and practice guide.]</i> <ol style="list-style-type: none"> a. A "near-fatality" shall be defined as any act, as defined by a medical or other qualified professional (police, fire, mental health professional, private agency child welfare professional, etc.), that threatens the life of a child. b. A "serious bodily injury" is any significant impairment of a person's physical or mental condition as determined by qualified medical personnel, that includes sexual assault (by an adult or child) of a child, broken bones or any trauma, injury or condition of sufficient severity that, if left untreated, would cause permanent physical disfigurement, permanent physical disability, or death of a child.
	<p>Procedure B: Notification of a Critical Event</p> <p>An incident or event that results in a near-fatality or serious bodily injury of a child or youth may be accepted by the CFSA Hotline for a Child Protective Services (CPS) investigation as a critical event (see Hotline Policy and Hotline Practice Guide). CFSA staff responsible for the Hotline functions shall adhere to the following:</p> <ol style="list-style-type: none"> 1. When a call comes in to the Hotline, the Hotline worker shall take the call and in consultation with the supervisor, make a determination of the nature of the call (an Information and Referral (I&R) or CPS investigation. 2. If the call requires a CPS response, the Hotline worker shall: <ol style="list-style-type: none"> a. Determine the priority level and response time required (immediate response, within two (2) hours; or a response time within 24 hours) b. Categorize the call as traditional, special, or institutional abuse

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	<ul style="list-style-type: none"> c. Complete an Automated Client Eligibility Determination System (ACEDS) search (based on system availability) and FACES history check to determine if there is an open case or the need to open an investigation d. Document and enter all information into FACES e. Determine if the incident/event fits into the category of “critical event” (<i>see Procedure A for the definition of a critical event</i>) f. Determine if the incident/event has been verified as a “critical event” by a qualified professional. <ul style="list-style-type: none"> 3. If the call to the Hotline is to report the death of a child currently known or who has been known to the Agency within four (4) years prior to the child’s death, the Hotline shall notify Agency staff according to the Child Fatality Review Policy. <i>Note: These procedures shall be strictly adhered to during both regular business hours as well as after-hours.</i> 4. If the call to the Hotline is to report a critical event (non-fatality), the Hotline worker shall immediately notify (verbally and by e-mail) the child or youth’s assigned social worker (the “ongoing” social worker) and supervisor (CFSA or private agency), if applicable. 5. The Hotline worker shall complete the Critical Event Reporting Form (<i>see attachment</i>) and submit it to the Hotline supervisor. 6. The Hotline supervisor shall notify the following individuals by forwarding the Critical Event Reporting Form by e-mail: <ul style="list-style-type: none"> a. Director b. Chief of Staff c. Intergovernmental Affairs Specialist d. Public Information Officer e. Child Protective Services Administrator f. Special Abuse Unit g. All Deputy Directors h. Program Administrators and Program Managers in the Office of Community Services, the Office of Agency Programs, and the Office of Clinical Practice i. Administrator and Program Manager in the Quality Improvement Division j. General Counsel k. Child Fatality Supervisor l. Private agency Director, if applicable. 7. The assigned social worker shall notify, if appropriate and if applicable, the guardian ad litem, the Family Court and the biological parent(s).
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	<p>Procedure C: Critical Event Occurring in Out-of-Home Placement</p> <p>It is the goal of CFSA and private agencies that children and youth remain safe while in out-of-home placements (i.e. foster homes, congregate and residential placements). Foster parents/caregivers are required to contact the assigned social worker whenever the safety and/or well-being of the child or youth is in jeopardy. For critical events that happen in the presence of and/or in the home/facility of the foster parent/caregiver, the procedures outlined below shall be followed.</p> <ol style="list-style-type: none"> 1. For critical events involving the death of a child, the foster parent/caregiver shall immediately contact the CFSA Hotline. The Hotline worker shall follow the procedures outlined in the Child Fatality Review Policy. 2. If a near-fatality incident/event occurs to a child or youth in out-of-home placement, the foster parent/caregiver shall immediately call 911 and follow their instructions. <ol style="list-style-type: none"> a. The foster parent/caregiver shall, at first opportunity (no later than 30 minutes), notify the CFSA Hotline. b. After the foster parent/caregiver has given information to the Hotline on the near-fatality incident/event, the foster parent/caregiver may contact the assigned social worker. c. The Hotline worker shall follow the procedures outlined above in Procedure B. 3. If an incident/event occurs to a child or youth in out-of-home placement that is not defined as a near-fatality, the foster parent/caregiver shall immediately (within one (1) hour) notify the assigned social worker. <ol style="list-style-type: none"> a. The assigned social worker shall immediately notify the CFSA Hotline. b. The Hotline worker shall follow the procedures outlined above in Procedure B. <p><i>Note: For fatalities, near fatalities, or serious bodily injuries that are a result of abuse or neglect by a foster parent or caregiver, see Investigations policy and corresponding practice guide.</i></p>
	<p>Procedure D: Critical Event Meeting</p> <ol style="list-style-type: none"> 1. For critical events involving the death of a child, a critical event meeting shall occur within 24 hours of the Child Fatality Review Supervisor being notified of the child's death. This meeting shall serve as a forum to gather and coordinate information regarding the case, provide direction on immediate case activities, inform the investigation process (if applicable), and to provide a mechanism for support to the family and the assigned social worker when applicable. (See the Child Fatality Review Policy for procedures describing the critical event meeting for child fatalities)

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	<ol style="list-style-type: none"> 2. A critical event meeting for a child fatality will generally not be held if: <ol style="list-style-type: none"> a. the fatality involves a former CFSA client who is legally an adult (age 21) at the time of death; b. when CFSA learns of the death weeks or months after the fatality; or c. when the fatality involves a family not known to CFSA and CPS does not suspect abuse or neglect. 3. If the critical event involves the near fatality or serious bodily injury of a child or youth in the care of CFSA, a critical event meeting shall be convened by the Deputy Director for Agency Programs or designee. 4. If the critical event involves the near fatality or serious bodily injury of a child or youth in the physical care of a private agency, the convener shall be the Deputy Director for Community Services or designee. 5. The critical event meeting shall be convened within 24 hours of notification to the Hotline to discuss the facts of the case related to child safety and well-being, the actions that have been taken related to the critical event, and any actions required going forward. 6. The respective Deputy Director or designee shall notify meeting participants by e-mail. Meeting participants may include: <ol style="list-style-type: none"> a. Director b. Child Protective Services Administrator c. Special Abuse Unit, if applicable d. All Deputy Directors e. Program Administrators and Program Managers in the Office of Agency Programs (if the event involves a child or youth in the care of CFSA); or Program Administrators and Program Managers in the Office of Community Services (if the event involves a child or youth in the physical care of a private agency); and Program Administrators and Program Managers in the Office of Clinical Practice f. Administrator and Program Manager in the Quality Improvement Division g. General Counsel h. Assigned social worker and supervisor, if the event involves a child or youth in the care of CFSA i. Private agency Program Director or designee, and assigned social worker, if event involves a child or youth in the physical care of a private agency. 7. The Critical Event meeting may be held in-person or by teleconference with required parties.
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Procedure E: Documentation of Recommendations and Action Taken in Critical Events

1. Within two (2) days of the Critical Event meeting held due to the death of a child or youth, the Child Fatality Review Specialist shall prepare a summary report of the meeting, including any recommended next steps and forward to relevant parties for implementation purposes. (See [Child Fatality Review Policy](#).)
2. For non-fatality critical event meetings, staff in the Quality Improvement Division shall document the actions and recommendations of the Critical Event meeting and shall forward a meeting summary to all meeting participants, including the Deputy Directors of the affected areas, within two (2) business days.
3. The assigned social worker shall document on the Critical Event Reporting Form all actions taken related to the critical event within 24 hours of the occurrence and also in FACES.net.
4. The assigned social worker shall update the form as developments occur regarding the critical event and shall forward the updated form to all meeting participants within 30 days of the Critical Event meeting. The assigned social worker shall also provide updates in FACES.net.
5. The assigned supervisor shall assure the updates are completed and forwarded according to this policy.
6. The assigned social worker, supervisor, and program manager shall be responsible for implementing the recommended next steps. They shall keep the program administrator apprised of all updates and implementation steps.
7. The program administrator shall assure that the recommendations are implemented.
8. The staff in the Quality Improvement Division shall prepare an annual report for the Director and senior leadership that provides a review of the Agency's critical event process, including the number of critical events reported, the nature and types of critical events, and the types of recommended implementation steps.

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**GOVERNMENT OF THE DISTRICT OF COLUMBIA
Child and Family Services Agency**



Critical Event Reporting Form

DISCLOSURE WARNING - The information inside in this form may contain electronic protected health information ("ephi") which is confidential and protected from unauthorized disclosure by federal confidentiality laws. If transmitting this form electronically, please ensure that data is secure both in transmission and upon delivery to the intended recipient. Transmission of this document via open networks and unsecure networks is strictly prohibited.

I. Demographic and Hotline Information *(to be completed by Hotline Staff)*

Child(ren)'s Name(s)	Race	DOB	Gender
Nature/Type of Critical Event			
Name of Agency (if applicable)			

Date of Hotline Call:	Time of Hotline Call:	Hotline Worker:
Date of Critical Event:	Time of Critical Event:	
Address Where Incident Occurred:		
Individual Making Report:	Relationship to Child:	
Current Report Referral ID #:		
Date of Police Notification:		
Child is/was hospitalized because of this incident? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (Child Fatality)		

Does this CE Report warrant a CPS investigation? <input type="checkbox"/> Yes <input type="checkbox"/> No
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II. CFSA Case Status

<input type="checkbox"/> Family has no prior involvement with CFSA		
<input type="checkbox"/> Active Case ID: _____ Referral #: _____ Facility Placement: _____ Social Worker: _____ Supervisor: _____ Administration: _____	<input type="checkbox"/> Closed Case Case ID: _____ Date Closed: _____ Social Worker: _____ Supervisor: _____ Administration: _____	<input type="checkbox"/> Past Referrals Referral # and Disposition and Status: 1. _____ - 2. _____ - 3. _____ - 4. _____ - 5. _____ - 6. _____ -

III. Nature and Type of the Critical Event (check all that apply)

- ☐ **Death**
- ☐ **Near-Fatality or Serious Bodily Injury**
- ☐ **Abuse** (resulting in a near-fatality or serious bodily as determined and reported by a medical or other qualified professional. Please identify the nature of the abuse below.)
- ☐ Sexual Assault ☐ Broken bones ☐ Scalding burn in a child under Six (6)
- ☐ Trauma or injury ☐ Other
- ☐ **Neglect** (resulting in a near-fatality as determined and reported by a medical or other qualified professional)

III. Location of Critical Event

- ☐ Foster Care Home
- ☐ Institution
- ☐ Home of Biological Parent
- ☐ In the community
- ☐ Other

IV. Narrative Description of the Critical Event (Please describe in the space provided):

V. Alleged Maltreater Information

Name: _____ DOB: _____ Address: _____

VI. Biological/Adoptive Family Information

Mother's Name: _____ DOB: _____ Address: _____

Father's Name: _____ DOB: _____ Address: _____

VII. Foster Parent/Other Caretaker Information

Name: _____ DOB: _____ Address: _____

Name: _____ DOB: _____ Address: _____

Other Caretaker's Name: _____ DOB: _____ Address: _____

ACTIONS TAKEN/UPDATES

Child(ren)'s Name(s)	
Nature/Type of Critical Event	
Name of Agency (if applicable)	

Actions Taken *(documented by assigned social worker within 24 hours of critical incident occurrence)*

Update(s)

(documented by assigned social worker and forwarded to meeting participants within 30 days of Critical Event meeting; updates to include changes in treatment planning, court action, health, placement, etc.)

Date of Update: