

Injuries to Children in Open OCS Cases or Investigations

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Related Policies

Additional information can be found in the following policies:

- Abuse Allegation Received by SW
- Caregiver/Resource Parent's Reporting Responsibility
- Critical Incident Protocol
- ER-Investigations
- ER Open Case Investigation
- Mandated Reporters
- Medical Opinions - Forensic Examinations/Interviews and Medical Consultations).
- Neglect Protocol
- Physical Abuse Protocol

Forms

The following form is referenced in this policy:

- 10-40 Child/Youth Non-Serious Injury Log

Resources

The following resources are available when assessing injuries for physical abuse:

- Medical Tests Frequently Used in Evaluating for Physical Abuse Injury
- Medical Conditions That Can Be Mistaken for Physical Abuse

Child Victim Witness Protocol: The Child Victim Witness Protocol provides guidelines to working with the child victim/witness. It emphasizes treating children with dignity and respect and minimizing further trauma by limiting the number of times a child is interviewed, increasing the effectiveness of the investigative process and facilitating the child's access to needed services, such as medical treatment and trauma counseling.

[TEN-4-FACESp](#) is an acronym and clinical decision rule to help screen children 4 years and younger with marks or bruises, to identify when an injury is more likely to be caused by abuse than accidental injury.

Introduction

The purpose of this policy is to outline required actions when a child who is already in an open Office of Child Safety (OCS) case or referral is injured. This includes but is not limited to, children/youth participating in a Family Reunification, Family Maintenance (Voluntary or Court Ordered) case, any children/youth with dual jurisdiction status or a Permanent Plan.

This policy reviews county procedures on reporting, assessing, and documenting injuries of a child/youth in an open case or referral, how to determine whether an injury is non-serious or serious, and how SWs will assess if an injury, even minor, is likely to be caused by abuse rather than accidental injury as reported by the child and resource parent.

Definition of a Serious Injury

A serious injury is a result of an incident that causes or puts a child at risk of death, physical harm, or illness requiring medical or emergency mental health treatment.

Examples of serious injuries include self-injurious behavior such as head banging or cutting, brain damage, skull or bone fracture, subdural hemorrhage or hematoma, dislocations, sprains, internal injuries, poisoning, burns, scalds, or severe cuts, and the child requires medical treatment.

Definition of a Non-Serious Injury

Non-serious injuries are those injuries that do not require medical or emergency mental health treatment. Examples of non-serious injuries include cuts that do not require stitches, scratches, red marks, and bruises not indicated as suspicious for non-accidental trauma. Non-serious injuries can be treated with over-the-counter medications or may not require any treatment at all.

Injuries Suspicious for Non-accidental Trauma

When determining if a child/youth's injuries are suspicious for non-accidental trauma, the SW will reference the [TEN-4-FACESp](#) tool, in conjunction with the Physical Abuse Protocol, during consultation with their PSS and the Doctor of the Day to determine the next steps regarding the injuries. The Physical Abuse Protocol provides examples of suspicious or concerning injuries for children/youth of all ages.

The [TEN-4-FACESp](#) tool is a helpful resource for assessing whether a child's bruises were the result of abuse or accidental injury. Though initially designed for children 0-4, this tool can also help identify suspicious injuries in older children and youth.

Serious and Non-Serious Injury Reporting Responsibilities

All resource parents who welcome a dependent child/youth into their home will follow serious and non-serious injury reporting responsibilities. See Caregiver/Resource Parent's Reporting Responsibility for additional information.

NOTE: If a dependent child/youth is injured while in respite care, school, or daycare, the resource parent is responsible for reporting and logging the injury as outlined in the chart below.

Serious and Non-Serious Injury Reporting Responsibilities (cont.)

If	Then
The injury is serious	A resource parent will report the injury to the Resource Parent Ombudsman immediately or as soon as practically possible for youth of any age. The report must be made no later than 24 hours after the injury.
The injury is non-serious	<p>For dependent children ages 0-5, or developmentally presenting as 0-5, a resource parent will report any non-serious injuries as well as the actions taken to address the incident to the Resource Parent Ombudsman within 24 hours.</p> <p>For children 6-17 years old, the resource parent will complete the 10-40 Child/Youth Non-serious Injury Log monthly and report any non-serious injuries to the child's SW at their next contact. SW will ensure the parents receive the log monthly by either confirming the caregiver has provided it or by the SW providing it to the parent during monthly contact visits.</p>

Injuries First Reported by the Resource Parent

The table below describes the steps resource parents will take for reporting all serious injuries and non-serious injuries for children 0-5 years old to the Child and Family Well-Being Department (CFWB), OCS.

Step	Who	Action
1	Resource Parent	<ul style="list-style-type: none"> Determine if the child/youth's injury is serious or non-serious. County Resource Parents: Report the injury timely to the Resource Parent Ombudsman: <ul style="list-style-type: none"> Phone: 877-792-5437, Press 2 Email: CWSRPOMBUDS.HHSA@sdcounty.ca.gov <p>NOTE: FFA Resource Parents will report injuries to IEU, CCL, and the SW within 24 hours. If the injury report is received from an FFA Resource Parent, skip to Step 3.</p> <p>NOTE: See Caregiver/Resource Parent's Reporting Responsibility for detailed reporting information.</p>

**Injuries First
Reported by the
Resource Parent
(cont.)**

Step	Who	Action
2	Resource Parent Ombudsman	<ul style="list-style-type: none"> • Notice the following parties via email on the same day that the injury is reported: <ul style="list-style-type: none"> ○ Child/youth assigned SW ○ The assigned SW PSS ○ Resource parent's assigned RFA worker ○ Assigned RFA worker's PSS • Determine if a Critical Incident Report (CIR) is needed and, if necessary, submit a CIR. See Critical Incident Protocol for more information. <p>NOTE: Review the TEN-4-FACESp tool and the Physical Abuse Protocol. Report to the hotline if suspicious for abuse/neglect and the resource parent has not reported it. See policy for Abuse Allegation Received by SW. Complete and submit the 04-184. See Injuries Suspicious for Non-accidental Trauma for information on suspicious injuries.</p>
3	Assigned Case Carrying SW	<ul style="list-style-type: none"> • Contact the resource parent and assess any reported injury in-person or through a photograph. • If the injury is a serious injury for a child of any age, or it is a non-serious injury for children ages 0-5 years or developmentally presenting 0-5 years, the SW will respond within 24 hours, or the next business day if the injury is reported after hours or on weekends. • If a non-serious injury for children ages 6-17 years the SW will remind the resource parent to record injuries on the 10-40 Child/Youth Non-serious Injury Log and review a copy of it at the end of the month. • SW will gather information regarding the injury, explanations provided by the resource parent and child, and what actions the resource parent took to address the injury. Document all information gathered during the assessment in CWS/CMS. • A same-day consult will take place with the PSS. See Determining Next Steps During Consultation

**Injuries First
Observed by the
Investigating,
Ongoing, or
supporting SW**

The table below describes next steps for SWs who observe an injury on a child/youth that has not been reported to the CFWB Department, OCS:

If...	Then...
Investigating an abuse/neglect referral with no allegations of physical abuse, but the child(ren) have marks or bruises AND there is no open case for the child/youth	<p>The investigating SW will:</p> <ul style="list-style-type: none"> • Gather information regarding the injury, explanations provided by the parent/guardian and child, and what actions the parent/guardian took to address the injury. • Determine if the child/youth's injury is serious or non-serious. • Determine if a CIR is necessary and submit if one is needed. See Critical Incident Protocol for more information. • Consult with the assigned PSS and follow guidelines as outlined in Determining Next Steps During Consultation. <p>NOTE: If it is assessed during the consultation that the injuries are a concern for physical abuse or neglect, the SW will create a new allegation and investigate within the same referral. See ER-Investigations and Physical Abuse Protocol for further information on the investigation of physical abuse allegations.</p>
Investigating an abuse/neglect referral with no allegations of physical abuse, but the child(ren) have marks or bruises AND the child/youth has an open case	<p>The investigating SW will:</p> <ul style="list-style-type: none"> • Investigate any allegations on an open case following the applicable procedures outlined in the ER Open Case Investigation policy. • Gather information regarding the injury, explanations provided by the resource parent and/or parents, and child, and what actions the caregiver took to address the injury. • Determine if the child/youth's injury is serious or non-serious. <ul style="list-style-type: none"> ○ If a serious injury and the resource parent has not already reported it to CFWB, refer to Caregiver/Resource Parent's Reporting Responsibility for details regarding required written notice and full reporting requirements. ○ Determine if a CIR is necessary and submit one if needed. See Critical Incident Protocol for more information.

**Injuries First
Observed by the
Investigating,
Ongoing, or
supporting SW
(cont.)**

If...	Then...
<p>Investigating an abuse/neglect referral with no allegations of physical abuse, but the child(ren) have marks or bruises AND the child/youth has an open case (cont.)</p>	<ul style="list-style-type: none"> • Complete a same-day consult with their PSS. See Determining Next Steps During Consultation. • Create a new allegation and investigate within the same referral if the injuries are concerning for physical abuse or neglect. See ER-Investigations and Physical Abuse Protocol for further information on investigating physical abuse allegations. • Notice the following parties of the injury via email, within one business day: <ul style="list-style-type: none"> ○ Assigned SW ○ Assigned SW PSS ○ Resource parent's assigned RFA worker ○ Assigned RFA worker's PSS ○ If the child/youth resides in a Foster Family Agency (FFA), notify their FFA worker of the injury.
<p>If the child/youth has an open case and is observed to have marks or bruises AND no investigation is open</p>	<p>The ongoing SW will:</p> <ul style="list-style-type: none"> • Gather information regarding the injury, explanations provided by the resource parent and/or parents, and child, and what actions the caregiver took to address the injury. • Determine if the child/youth's injury is serious or non-serious. If the injury is serious, consider the following: <ul style="list-style-type: none"> ○ If the resource parent has not already reported the injury to CFWB, refer to Caregiver/Resource Parent's Reporting Responsibility for details regarding required written notice and full reporting requirements. ○ Determine if a CIR is necessary and submit one if needed. See Critical Incident Protocol for more information. • Complete a same-day consult with their PSS. See Determining Next Steps During Consultation.

Injuries First Observed by the Investigating, Ongoing, or supporting SW (cont.)

If...	Then...
If the child/youth has an open case and is observed to have marks or bruises AND no investigation is open	<ul style="list-style-type: none"> Determine in consultation with PSS if the injury prompts physical abuse or neglect concerns. See ER-Investigations, Neglect Protocol, and Physical Abuse Protocol for further information on investigating physical abuse and neglect allegations. Notice the following parties of the injury via email, within one business day. <ul style="list-style-type: none"> Resource parent's assigned RFA worker Assigned RFA worker's PSS If the child/youth is residing in a Foster Family Agency (FFA), notify their FFA worker of the injury.

NOTE: When a resource parent fails to report an injury, the assigned RFA worker will review the reporting responsibilities for children/youth in foster care with the resource parent and document in CWS/CMS the education provided to the caregiver.

Determining Next Steps During Consultation

The table below, which is a compilation of the [TEN-4-FACESp](#) tool, will be used by the assigned SW and PSS during their consult to determine next steps. During consultation, refer to [TEN-4-FACESp](#) to determine if a child or youth's injuries are suspicious. The SW will document in CWS/CMS the consultation that occurred with PSS regarding the child's injuries.

NOTE: For injuries outside of the descriptions in [TEN-4-FACESp](#) age range and injury types, review Types of Physical Abuse section in the Physical Abuse Protocol for examples of suspicious or concerning injuries for children/youth of all ages.

If	Then
<ul style="list-style-type: none"> The child is a non-mobile infant, with any bruise/injury Child under four years of age, or who is developmentally or physically delayed, with bruises or injuries to the Torso, Ears or Neck (TEN), the Frenulum, Angle of the Jaw, Cheeks (fleshy part), Eyelids, or Sub conjunctivae (FACES), 	SWs must get a same-day medical opinion; if not an exam (see Medical Opinions - Forensic Examinations/Interviews and Medical Consultations).

Determining Next Steps During Consultation (cont.)

If	Then
<ul style="list-style-type: none"> • Children of any age with burns, breaks, head trauma, bite marks without a known origin, or suspicious injuries • Any siblings and other children who reside in the home of a child whose death is suspicious or of a non-accidental cause • Any siblings of a child with documented serious non-accidental injuries • OR other high-risk factors related to medical and/or physical issues are present. 	<p>SWs must get a same-day medical opinion; if not an exam (see Medical Opinions - Forensic Examinations/Interviews and Medical Consultations).</p>
<ul style="list-style-type: none"> • None of the above apply • AND the SW has concerns that the mechanism of the injury is inconsistent with the Resource Parent's explanation 	<p>The SW will call the Child Protection Team (CPT) "Doctor of the Day" (see Medical Opinions file) to determine whether the child needs to be taken to the Emergency Room (ER) or if an appointment can be scheduled the next day at Rady Children's Hospital Chadwick Center or Palomar Pomerado Health – Forensic Services (consult with PSS and Protective Services Program Manager (PSPM) before waiting for a next-day appointment).</p> <p>If the Doctor of the Day is concerned about non-accidental injury after the consult, the SW will make a report to the Hotline if one was not already made. If there is already an open investigation, the SW will add allegations of abuse or neglect and continue the investigation and safety assessment.</p>
<p>Child abuse is suspected based on resources included in Injuries Suspicious for Non-accidental Trauma section OR results of the Doctor of the Day consultation identifies concerns for non-accidental injury</p>	<p>Assess for any safety threats when injury is reported or observed in person, consult with PSS if SW determines a safety threat may be present to determine the next steps before leaving the home.</p> <p>AND</p> <p>Make a report to the Hotline (See Abuse Allegation Received by SW and the Mandated Reporters policies for reporting procedure when there are suspicions of abuse and/or neglect).</p>

Determining Next Steps During Consultation (cont.)

If	Then
<ul style="list-style-type: none">• None of the above apply• AND the resource parent's explanation is reasonable• AND no child abuse is suspected	Document the information in CWS/CMS including but not limited to: <ul style="list-style-type: none">• Resource parent's explanation• Child's explanation• Resource parent's actions to address the injury• Description of the injury• Picture of the injury, if used as part of the assessment

Alignment with SET

Preserving the primary family and relationships is our priority ([SET Value 1](#)). When this is not possible, CFWB strives to ensure children will maintain and establish safe and nurturing relationships ([SET Value 3](#)) and ([SET Value 2](#)).
