This guide is developed to provide a checklist of items which may be used in Supervisor Case Consultation(s) per PPM 2310, 2440, 2500, 2740, and 2760. The purpose of consultation(s) between the CPS specialist, CPS investigator, if applicable, and the supervisor is to thoroughly evaluate all investigation and assessment activities. Supervisor consultations support comprehensive assessments by utilizing critical thinking to carefully consider each activity collectively and reach informed decisions.

Documentation of supervisor consultations shall be completed on the PPS 1010 Case Activity Log per PPM 0420 Documentation. The documentation of the safety consultation with the supervisor should include, but not be limited to:

1. A summary of the case information presented to the supervisor;
2. Summary of the discussion;
3. Decisions made, including the basis for those decisions (who will do what, by when, and how was the conclusion reached);
4. A plan for any follow-up actions, as needed.

TABLE OF CONTENTS:

History and Other Searches
Interviews
Investigative information gathered
Subsequent Reports Not Assigned for Further Assessment
Safety concerns
Safety plan
Plan of Safe Care
Risk concerns/Behavior Problems (FINA)
Case Action/Initial Service Plan

Case Finding Decisions:

PHYSICAL ABUSE
SEXUAL ABUSE
EMOTIONAL ABUSE
EDUCATIONAL NEGLECT
PHYSICAL NEGLECT
MEDICAL NEGLECT
LACK OF SUPERVISION
SUBSTANCE AFFECTED INFANT
ABANDONMENT
The following activities may be reviewed and considered to support a comprehensive evaluation of all investigation and assessment activities:

<table>
<thead>
<tr>
<th>Activity</th>
<th>History and Other Searches</th>
</tr>
</thead>
</table>
| Consider/Evaluate/Discuss | - Did we gather sufficient information during the investigation/assessment to determine whether the history is relevant or impacts the family’s current situation? Is further information needed?  
   - How is the family currently functioning in relation to the history (*past safety concerns or risks*)?  
   - What new strengths or resources does the family have to mitigate this risk?  
   - Is the new information gathered during the investigation relevant to the family’s current situation?  
   - Are there indications of potential risk or safety concerns for the child based on the history?  
   - Have we utilized systems available to search for the absent father/mother?  
   - Have we utilized systems available to search for any maternal or paternal relatives? |

Back to Table of Contents

<table>
<thead>
<tr>
<th>Activity</th>
<th>Interviews</th>
</tr>
</thead>
</table>
| Consider/Evaluate/Discuss | - Did we interview all required parties?  
   - If not, discuss the reason per PPM 2110/2310/2703 (*exception, allowable or non-allowable reason*).  
   - If unable to locate, have we exhausted reasonable resources to locate?  
   - If parent/caregiver refused to cooperate or refuses access to the child:  
     - Evaluate safety and risk concerns  
     - Discuss other possible engagement strategies  
     - Are there other possible locations for an interview of an alleged victim of abuse/neglect?  
     - Do the circumstances of the case justify contacting law enforcement  
     - Do the circumstance or the case justify contacting the County/District Attorney?  
   - Has the absent father/mother been located and interviewed? Have we exhausted all resources?  
   - Has a medical professional been consulted, specifically for reports assigned for MEN per 2110 A. 6.; or for other types of reports would a medical opinion assist with the investigation/assessment?  
   - Are there other persons who may have relevant information?  
   - Does the documentation of the interviews provide sufficient details for a person unfamiliar with the case to understand the investigation and assessment?  
   - Are there sufficient details to evaluate the plausibility of the explanations for the harm to the child?  
   - Do the stories make sense?; Does the explanation match the injury/harm to the child?  
   - Have we gathered enough evidence to clearly understand what happened?  
   - Do any of the persons interviewed have motives for being untruthful?  
   - Have we explored all other alternate hypotheses (*other ways the incident could have happened, other persons responsible, etc.*) |

Back to Table of Contents
### Investigative information gathered (observations, reports, etc.)

<table>
<thead>
<tr>
<th>Activity</th>
<th>Consider/ Evaluate/ Discuss</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Have we gathered all possible reports, data, information needed to provide sufficient facts?</td>
</tr>
<tr>
<td></td>
<td>• After reviewing all reports, data, information etc. collectively, are the facts of the case clear?</td>
</tr>
<tr>
<td></td>
<td>• Is other information needed?</td>
</tr>
<tr>
<td></td>
<td>• Are medical reports or consultation with medical professionals needed?</td>
</tr>
<tr>
<td></td>
<td>• Are there any possible alternate hypotheses?</td>
</tr>
<tr>
<td></td>
<td>• Discuss tentative conclusions about whether the abuse/neglect occurred.</td>
</tr>
</tbody>
</table>

### Subsequent Reports Not Assigned for Further Assessment

<table>
<thead>
<tr>
<th>Activity</th>
<th>Consider/ Evaluate/ Discuss</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Were all subsequent reports not assigned for further assessment by KPRC addressed in the open case? Is follow-up needed?</td>
</tr>
<tr>
<td></td>
<td>• Were subsequent reports not assigned for further assessment by KPRC on a family receiving Family Services, Family Preservation Services, or Foster Care services forwarded to the CFSP/CWCM provider and supervisor within 3 working days for the provider to address in the open case? Is follow-up needed?</td>
</tr>
</tbody>
</table>

### Safety concerns

<table>
<thead>
<tr>
<th>Activity</th>
<th>Safety concerns</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consider/ Evaluate/ Discuss</td>
<td>Refer to PPS 2030B to guide the consultation</td>
</tr>
<tr>
<td></td>
<td>• Have additional safety concerns been identified since the initial safety determination? (Refer to Imminent Danger and other safety factors listed on the PPS 2030B Safety Assessment Section I)</td>
</tr>
<tr>
<td></td>
<td>• Is the safety concern imminent? (Either currently present, or will occur in the next few days)</td>
</tr>
<tr>
<td></td>
<td>• Is the child vulnerable?</td>
</tr>
<tr>
<td></td>
<td>• What is the degree of harm (injury/child’s condition) to the child as a result of the caregiver’s action or inaction; or what is the threat (caregiver’s action or inaction which has the potential to cause serious harm) of harm to the child? Is immediate medical care needed, or discuss medical care which has already occurred. Do we have the records? What follow-up is needed?</td>
</tr>
<tr>
<td></td>
<td>• Is there a caregiver with protective capacity? (Refer to Appendix 2J to consider Caregiver Protective Capacity) If considering removal, have we considered the absent mother/father as a resource for placement to prevent removal? Have we considered any relatives as a resource for placement to prevent removal?</td>
</tr>
<tr>
<td></td>
<td>• What controlling safety interventions or protective actions have been taken, if applicable?</td>
</tr>
<tr>
<td></td>
<td>• Are other controlling interventions or protective actions needed?</td>
</tr>
<tr>
<td></td>
<td>• What are the family’s strengths and resources mitigating safety concerns? Has the absent father/mother been considered as a resource, if appropriate? Have we considered any relatives as a resource for placement to prevent removal?</td>
</tr>
<tr>
<td></td>
<td>• What are the contributing factors directly related to the safety concern? (i.e. use of substances caused the parent/caregiver to leave child unsupervised- parent was passed out while toddler got out of the house and was found wandering in the street. The use of substances may be the contributing factor, but if they use substances because they are depressed due to a recent loss, this may also be considered as a contributing factor).</td>
</tr>
<tr>
<td></td>
<td>• What services are needed, or have taken place.</td>
</tr>
<tr>
<td></td>
<td>• What is the safety decision?</td>
</tr>
<tr>
<td></td>
<td>• Discuss whether Claire and Lola’s law per PPM 0255 applies. Does the parent/caregiver possess a letter to verify cannabidiol treatment preparation? If this law applies, ensure the...</td>
</tr>
</tbody>
</table>
The department has not initiated proceedings to remove a child from the home of the child’s parent or guardian (request police protective custody or an order for protective custody) or initiated any child protection action (safety planning) or proceeding based solely upon the parent or guardian or the child’s possession or use of cannabidiol treatment preparation.

### Activity: Safety plan, if applicable

<table>
<thead>
<tr>
<th>Consider/ Evaluate/ Discuss</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Was a safety plan completed?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Review PPM 0255 Claire and Lola’s law to ensure requirements are met. Immediately terminate the safety plan if it is based solely on cannabidiol treatment preparation and the parent/caregiver has the letter to verify.</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Are the actions needed (tasks) documented, sufficient to address the safety concerns?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Is the safety plan temporary, short-term while more permanent safety provisions are put in place?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Is the next step included?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Have we involved the absent father/mother in the safety plan, if appropriate? Have we involved relatives/caregivers in the safety plan, if appropriate?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>PPM 2462 Family Safety Planning may be used to review and discuss the PPS 2003 Safety Plan.</strong></td>
<td></td>
</tr>
</tbody>
</table>

### Activity: Plan of Safe Care, if applicable

<table>
<thead>
<tr>
<th>Consider/ Evaluate/ Discuss</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>For Pregnant Woman Using Substances and FINA assigned as WPC to assess for a substance exposed infant, was a determination made per PPM 2050 regarding whether a Plan of Safe Care was required?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Upon implementation of FINA (date of announcement from Administration) Substance Affected Infant and Infant Positive for Substances require a determination per PPM 2050 regarding whether a Plan of Safe Care was Required.</strong></td>
<td></td>
</tr>
<tr>
<td><strong>If a Plan of Safe Care was not initially required, review additional case information to determine whether a Plan of Safe Care may be needed.</strong></td>
<td></td>
</tr>
<tr>
<td><strong>If the Plan of Safe Care criteria is met, does case documentation indicate whether the PPS 2008 was provided and explained to the family?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Was a Plan of Safe Care PPS 2007 completed with the family?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Discuss the outcome of services recommended and provided, to ensure requirements per PPM 2050 are met.</strong></td>
<td></td>
</tr>
</tbody>
</table>

### Activity: Risk concerns/Behavior Problems (FINA)

<table>
<thead>
<tr>
<th>Consider/ Evaluate/ Discuss</th>
<th>Refer to PPS 2030D to guide the consultation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>What risk concerns or behavior problems have been identified? (Review history, if applicable)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>What are the family’s strengths and resources present which are mitigating the risk concerns or the behavior problems?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>What services or supports may help the family?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Has the absent father/mother been considered as a resource, if appropriate?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Have relatives/caregivers been considered, if appropriate?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Is the family willing to participate in services?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>What engagement strategies have been used to help the family connect with services and</strong></td>
<td></td>
</tr>
</tbody>
</table>
### Activity

<table>
<thead>
<tr>
<th>Consider/Evaluate/Discuss</th>
<th>Case Action/Initial Service Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Refer to PPS 2030F and PPM 2740 to guide the consultation</strong></td>
<td>Consider all the decisions (safety/risk, case finding) and conclusion; family’s strengths mitigating risk and safety concern, and the family’s needs identified (contributing factors identified). See general guidelines below.</td>
</tr>
<tr>
<td>- What is the logical conclusion for the Case Action/Initial Service Plan, considering the guidelines below?</td>
<td>- What is the logical conclusion for the Case Action/Initial Service Plan, considering the guidelines below?</td>
</tr>
<tr>
<td>- What level of service is needed, if any? See PPM 2740 D. for Family Service criteria and 2723 Family Preservation Criteria.</td>
<td>- What level of service is needed, if any? See PPM 2740 D. for Family Service criteria and 2723 Family Preservation Criteria.</td>
</tr>
<tr>
<td>- If considering removal, have we considered the absent mother/father as a resource for placement to prevent removal? Have we considered relatives for placement to prevent removal? Have we ensured Claire and Lola’s law per PPM 0255 does not apply?</td>
<td>- If considering removal, have we considered the absent mother/father as a resource for placement to prevent removal? Have we considered relatives for placement to prevent removal? Have we ensured Claire and Lola’s law per PPM 0255 does not apply?</td>
</tr>
</tbody>
</table>

The following general guidelines may be used to consider all decisions comprehensively to help determine whether services may be needed, and the level of intervention needed.

*Services may be needed/considered when the following decisions, conclusions, and levels are present:*

- Safety Decision on the Safety Assessment PPS 2030B, is "conditionally safe".
- Risk Level on the Risk Assessment PPS 2030D, is "Moderate", "High", or "Intense", and Risk Conclusion is "Risk Controlled" or "Risk Present".
- Risk Conclusion on the Risk Assessment PPS 2030C, is "Risk Controlled" or "Risk Present".
- Case Finding PPS 2011, for Abuse/Neglect investigations. If there are multiple finding decisions associated with a report, the highest level of finding will be indicated as the case finding.
- Assessment Conclusion on the Non-abuse/Neglect Family In Need of Assessment (FINA), PPS 2030E is "Problem Behavior Controlled" or "Problem Behaviors Present".

The Family Preservation Screen PPS 2030F Section III may assist in determining if the family meets criteria for a referral for Family Preservation Services per PPM 2723.
The family’s strengths and needs, PPS 2030F Section IV. A. Do the family’s strengths mitigate any of the safety/risk concerns? What are the family’s needs identified.

Has the family specifically requested services to address an issue which is not solely based on a financial need?

Consider other assessment tools used such as genograms, eco-maps, UNCOPE, and timelines should be considered. (See PPM Section 3100 for Assessments)

Case Finding Decisions shall be made per PPM Section 2500. Utilize PPM 2502 to consider an Affirmed or Substantiated case finding decision.

<table>
<thead>
<tr>
<th>Activity</th>
<th>PHYSICAL ABUSE CASE FINDING DECISION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consider/ Evaluate/ Discuss</td>
<td>Infliction of physical harm or the causation of a child’s deterioration, and may include, but shall not be limited to, maltreatment or exploiting a child to the extent the child’s health is endangered. K.S.A. 38-2202</td>
</tr>
<tr>
<td></td>
<td>Female genital mutilation as defined by K.S.A. 21-5431, see PPM 0160 may be considered physical abuse.</td>
</tr>
</tbody>
</table>

**Questions to determine if information is sufficient to consider an affirmed or substantiated finding**

- Is there physical harm or the causation of a child’s deterioration to the child? Refer to PPM 2502.
- Is the physical harm or deterioration sufficiently documented?
- Is the physical harm or deterioration plausible with explanation provided?
- Is the physical harm or deterioration consistent with explanation provided?
- Did the perpetrator(s) cause the physical harm or deterioration to the child?
- Is there anything that created doubt the physical harm or deterioration occurred as described?
- Did the perpetrator(s) cause imminent danger threatening serious harm to the child?
- Does the physical harm or deterioration meet the criteria of PPM 2502 indicating the perpetrator should not be permitted to reside, work, or regularly volunteer in a KDHE or DCF Licensing regulated child care facility?
- Does the perpetrator or care giver have behaviors (mental illness, drug and alcohol abuse, physical limitations) that contribute to the risk to the child?
- Is there sufficient information to verify these behaviors (mental illness, drug and alcohol abuse, physical limitations)?
- If Female Genital Mutilation, consider an unsubstantiated case finding when it is determined by a physician the procedure was medically necessary, and such procedure was performed by a physician.
- If allegation is regarding the parent/caregiver providing the child with marijuana, does the parent/caregiver possess a letter meeting all the requirements per PPM 0255 to verify cannabidiol treatment preparation? If yes, and no other abuse/neglect concerns or FINA concerns are present, request an override per PPM 1700.

**Does the Basis of Finding . . .**

- provide a detailed description and location of the physical harm or deterioration if any?
- describe the cause of the physical harm or deterioration?
- describe how the cause of the physical harm or deterioration was determined?
- describe how the identity of the alleged perpetrator was determined?
- describe how the action or inaction of the perpetrator(s) directly resulted in physical harm?
or deterioration or presented an imminent danger threatening serious harm?

... include all facts or elements considered to make the case finding decision?
... identify when the incident occurred, if known?
... identify where the incident occurred, if known?
... explain contradictory information?
... explain any information that created doubt the physical harm or deterioration occurred as described?
... provide adequate information for a person unfamiliar with the case to make the same case finding decisions?
... link the conditions/incident to the physical harm or deterioration experienced by the child?
... give the child’s age? current condition? any special needs?
... document the child’s reaction to the incident, if significant to the decision made?
... provide a detailed description of any additional physical evidence found?

Case Finding Decisions shall be made per PPM Section 2500. Utilize PPM 2502 to consider an Affirmed or Substantiated case finding decision.

<table>
<thead>
<tr>
<th>Activity</th>
<th>SEXUAL ABUSE CASE FINDING DECISION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consider/ Evaluate/ Discuss</td>
<td>Sexual Abuse</td>
</tr>
</tbody>
</table>

Any contact or interaction with a child in which the child is being used for the sexual stimulation of the perpetrator, the child, or another person. Sexual abuse shall include, but is not limited to, allowing, permitting, or encouraging a child to:

A. Be photographed, filmed, or depicted in obscene or pornographic material; or
B. be subjected to aggravated human trafficking, as defined in K.S.A. 2014 Supp. 21-5426(b), and amendments thereto, if committed in whole or in part for the purpose of the sexual gratification of the offender or another, or be subjected to an act which would constitute conduct proscribed by article 55 of chapter 21 of the Kansas Statutes Annotated or K.S.A. 2015 Supp. 21-6416 or 21-6422, and amendments thereto.
K.S.A. 38-2202

(See Appendix 2A for Kansas Statutes Annotated references).

Contact solely between children shall meet the criteria only if the contact also involves force, intimidation, difference in maturity, or coercion. K.A.R. 30-46-10(i)

Questions to determine if information is sufficient to consider an affirmed or substantiated finding

- Did the act result in sexual stimulation to the child, perpetrator(s) or another person?
- Does the child’s disclosure provide enough detail to identify the perpetrator(s)?
- Does the child’s disclosure provide reliable information to withstand criticisms of being coached or fictitiously creating the incident?
- Is there any evidence that created doubt the incident occurred as described?
- Is there any medical and/or physical evidence of sexual abuse?
- Is there any evidence to collaborate the child’s disclosure?
- Is there a disclosure from the perpetrator?
- Is there evidence to discredit the perpetrator’s denial?
- An affirmed case finding decision may be considered for minor alleged perpetrators or perpetrators with intellectual developmental disabilities. The determination should consider the severity of the act.
  - Consider whether the alleged perpetrator had the capacity to understand his/her actions would result in a determination of sexual abuse.
  - Consider the trauma history of the minor alleged perpetrator.
- An affirmed case finding may be considered when there is a credible victim statement only.

Does the Basis of Finding . . .

... document the act resulting in sexual stimulation to the child, perpetrator(s) or another
Case Finding Decisions shall be made per PPM Section 2500. Utilize PPM 2502 to consider an Affirmed or Substantiated case finding decision.

<table>
<thead>
<tr>
<th>Activity</th>
<th>EMOTIONAL ABUSE CASE FINDING DECISION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consider/ Evaluate/ Discuss</td>
<td>Mental or Emotional Abuse</td>
</tr>
<tr>
<td></td>
<td>1. terrorizing a child, by creating a climate of fear or engaging in violent or threatening behavior toward the child or toward others in the child's presence that demonstrates a flagrant disregard for the child;</td>
</tr>
<tr>
<td></td>
<td>2. emotionally abandoning a child, by being psychologically unavailable to the child, demonstrating no attachment to the child, or failing to provide adequate nurturance of the child; and</td>
</tr>
<tr>
<td></td>
<td>3. corrupting a child, by teaching or rewarding the child for unlawful, antisocial, or sexually mature behavior. K.S.A. 38-2202 and K.A.R. 30-46-10</td>
</tr>
</tbody>
</table>

**Questions to determine if information is sufficient to consider an affirmed or substantiated finding**

- What is the harm to the child emotionally or the deterioration of the child emotionally?
- What is the evidence that the actions or inactions of the perpetrator(s) have caused emotional harm or deterioration to the child?
- Is the emotional harm or deterioration to the child adequately documented?
- Is there an additional source (therapist, schools, etc.) to verify the emotional damage or deterioration to the child?
- What actions or inaction of the perpetrator(s) caused harm or deterioration to the child?
- Does the perpetrator or care giver have behaviors (mental illness, drug and alcohol abuse, physical limitations) that contribute to the risk to the child?
- Is there sufficient information to verify these behaviors (mental illness, drug and alcohol abuse, physical limitations)?

**Does the Basis of Finding . . .**

- provide a detailed description of the emotional harm or deterioration to the child?
- describe the cause of emotional harm or deterioration to the child?
- describe how the cause of the emotional harm or deterioration to the child was determined?
- describe how the the perpetrator(s) caused emotional harm or deterioration to the child?
- include all facts or elements considered to make the case finding decision?
- identify when the incident occurred, if known?
Case Finding Decisions shall be made per PPM Section 2500. Utilize PPM 2502 to consider an Affirmed or Substantiated case finding decision.

<table>
<thead>
<tr>
<th>Activity</th>
<th>EDUCATIONAL NEGLIGENCE CASE FINDING DECISION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consider/Evaluate/Discuss</td>
<td>Acts or omissions by a parent, guardian, or person responsible for the care of a child resulting in harm to a child, or presenting a likelihood of harm, and the acts or omissions are not due solely to the lack of financial means of the child's parents or other custodian. (K.S.A. 38-2202) This term may include the following, failure of the parent or caregiver to provide education as required by law.</td>
</tr>
</tbody>
</table>

**Questions to determine if information is sufficient to consider an affirmed or substantiated finding**

- Was the child not attending school as required by law?
- Is the child not attending school associated with lack of financial means of the child's parent or other custodian? (Lack of transportation, etc.)
- Are the absences excessive and well documented?
- What efforts has the school made to work with the family? What was the family's response to the school's efforts?
- What actions have the parent/caregiver(s) taken to address the child not attending school?
- What are the barriers to school attendance?
- Are there any physical or mental health issues preventing the child from attending school?
- What is the impact/harm to the child due to not attending school? (A child is expected to not pass his/her current grade, he/she has been held back, or there is serious cognitive/developmental impairment or delay)
- If no current impact/harm, what harm was reasonably expected to occur? What was the likelihood of impact/harm?
- What is the evidence the actions or inactions of the perpetrator(s) caused the harm on the child? Or the likelihood of harm?
- Are there any other factors contributing to the child's school attendance such as substance abuse, death in the family, or divorce? Is there a history of not attending school, or other abuse/neglect?
- Is there sufficient information to verify these behaviors (mental illness, drug and alcohol abuse, physical limitations)?
- Any contradictory information or statements have sufficient information to clarify or verify the evidence?

Does the Basis of Finding . . .

- include all facts and elements considered to make the case finding decision.
- provide a detailed description of the harm to the child; academic concerns, learning
disability, failing grade, held back, etc.

. . . describe how the impact/harm to the child was determined.

. . . describe how the action or inaction of the perpetrator(s) directly resulted in the harm.

. . . provide evidence/details the child was not attending school as required by law and the parent/caregiver(s) were aware and did not address the issue.

. . . describe the caregiver’s reaction to the absences and attempts at intervention.

. . . include all facts or elements considered to make the case finding decision.

. . . provide adequate information for a person unfamiliar with the case to make the same case finding decisions,

. . . describe the child’s age, current condition, and any special needs.

. . . document the child’s reaction to the incident, if significant to the decision made.

Case Finding Decisions shall be made per PPM Section 2500. Utilize PPM 2502 to consider an Affirmed or Substantiated case finding decision.

<table>
<thead>
<tr>
<th>Activity</th>
<th>PHYSICAL NEGLECT CASE FINDING DECISION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consider/ Evaluate/ Discuss</td>
<td>Acts or omissions by a parent, guardian, or person responsible for the care of a child resulting in harm to a child, or presenting a likelihood of harm and the acts or omissions are not due solely to the lack of financial means of the child’s parents or other custodian. This term may include but shall not be limited to: Failure to provide the child with food, clothing, or shelter necessary to sustain the life or health of the child. K.S.A. 38-2202</td>
</tr>
</tbody>
</table>

Questions to determine if information is sufficient to consider an affirmed or substantiated finding

☐ What is the harm to the child?
☐ If no current harm, what harm was reasonably expected to occur? What was the likelihood of harm?
☐ What circumstances or conditions present harm or likelihood of harm to the child?
☐ What is the evidence that the actions or inactions of the perpetrator(s) caused the harm to the child? Or the likelihood of harm?
☐ Does the perpetrator or care giver have behaviors (mental illness, drug and alcohol abuse, physical limitations) that contribute to the risk to the child?
☐ Is there sufficient information to verify these behaviors (mental illness, drug and alcohol abuse, physical limitations)?
☐ Any contradictory information or statements have sufficient information to clarify or verify the evidence?

Does the Basis of Finding . . .

provide a detailed description of the harm to the child?

describe how the harm was caused?

describe how the harm to the child was determined?

describe how the action or inaction of the perpetrator(s) directly resulted in the harm?

adequately explain the harm that is reasonably expected to occur, if there isn’t current harm?

include all facts or elements considered to make the case finding decision?

identify when the incident occurred, if known?

identify where the incident occurred, if known?

provide adequate information for a person unfamiliar with the case to make the same case finding decisions?

link the conditions/incident to the harm or likelihood of harm experienced by the child?

give the child’s age? current condition? any special needs?

document the child’s reaction to the incident, if significant to the decision made?
Case Finding Decisions shall be made per PPM Section 2500. Utilize PPM 2502 to consider an Affirmed or Substantiated case finding decision.

<table>
<thead>
<tr>
<th>Activity</th>
<th>MEDICAL NEGLECT CASE FINDING DECISION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consider/Evaluate/Discuss</td>
<td>Acts or omissions by a parent, guardian, or person responsible for the care of a child resulting in harm to a child, or presenting a likelihood of harm, and the acts or omissions are not due solely to the lack of financial means of the child's parents or other custodian. This term may include the following, but shall not be limited to: failure to use resources available to treat a diagnosed medical condition if the treatment will make the child substantially more comfortable, reduce pain and suffering, correct or substantially diminish a crippling condition, lengthen the life span, or prevent the condition from worsening. K.S.A. 38-2202</td>
</tr>
</tbody>
</table>

Questions to determine if information is sufficient to consider an affirmed or substantiated finding

- What is the diagnosed medical condition of the child?
- Would the diagnosed medical condition left untreated result in: additional pain or suffering to the child?
- If treated would result in: correct or substantially diminish a crippling condition? lengthen the child’s life? or prevent the condition from worsening?
- What is the treatment required for the diagnosed medical conditions?
- What is the evidence the perpetrator(s) knew the medical treatment was required or available for the child’s condition
- What is the evidence the perpetrator(s) knew the likely results or consequences of the child not getting medical treatment?
- What circumstances or conditions prevented the perpetrator(s) from providing the medical treatment?
- Is there a statement or evidence from a medical professional that lack of treatment produced pain or suffering, worsened a crippling condition, shortened the child’s life span or caused a condition to worsen?
- Does the perpetrator or care giver have behaviors (mental illness, drug and alcohol abuse, physical limitations) that contribute to the risk to the child?
- Is there sufficient information to verify these behaviors (mental illness, drug and alcohol abuse, physical limitations)?
- Any contradictory information or statements have sufficient information to clarify or verify the evidence?

Does the Basis of Finding . . .

- provide a detailed description of the diagnosed medical condition?
- describe the result of the child not received the medical treatment?
- document the perpetrator(s) were aware of the child’s medical condition, the treatment needed, and the results of not getting the treatment?
- provide the statement or evidence from a medical professional?
- include all facts or elements considered to make the case finding decision?
- provide adequate information for a person unfamiliar with the case to make the same case finding decisions?
- give the child’s age? current condition? any special needs?
- document the child’s reaction to the incident, if significant to the decision made?
Case Finding Decisions shall be made per PPM Section 2500. Utilize PPM 2502 to consider an Affirmed or Substantiated case finding decision.

### LACK OF SUPERVISION CASE FINDING DECISION

<table>
<thead>
<tr>
<th>Activity</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consider/Evaluate/Discuss</td>
<td>Acts or omissions by a parent, guardian, or person responsible for the care of a child resulting in harm to a child, or presenting a likelihood of harm, and the acts or omissions are not due solely to the lack of financial means of the child's parents or other custodian. This term may include the following, but shall not be limited to: failure to provide adequate supervision of a child or to remove a child from a situation that requires judgment or actions beyond the child's level of maturity, physical condition, or mental abilities and that result in bodily injury or a likelihood of harm to the child. K.S.A. 38-2202</td>
</tr>
</tbody>
</table>

**Questions to determine if information is sufficient to consider an affirmed or substantiated finding**

- Was the child left unsupervised in circumstances which caused the child harm?
- If no current harm, what harm was reasonably expected to occur? What was the likelihood of harm?
- What is the evidence the perpetrator(s) left the child alone?
- Could the harm to the child have been prevented or reduced if the perpetrator(s) had been present?
- Did the child have adequate self care skills for the situation?
- Was the child left in a situation requiring judgments or actions beyond the child's level of maturity, physical condition or mental abilities?
- What circumstances or conditions present harm or likelihood of harm to the child?
- What is the evidence that the actions or inactions of the perpetrator(s) caused the harm on the child? Or the likelihood of harm?
- Does the perpetrator or care giver have behaviors (mental illness, drug and alcohol abuse, physical limitations) that contribute to the risk to the child?
- Is there sufficient information to verify these behaviors (mental illness, drug and alcohol abuse, physical limitations)?
- Any contradictory information or statements have sufficient information to clarify or verify the evidence?

**Does the Basis of Finding . . .**

- . . . provide a detailed description of the harm to the child?
- . . . describe how the harm to the child was determined?
- . . . describe how the action or inaction of the perpetrator(s) directly resulted in the harm?
- . . . provide evidence the perpetrator(s) left child without supervision?
- . . . provide the details regarding the length of time or the frequency child is left alone?
- . . . provide information the child lacked the self-care skills or judgment for the situation?
- . . . adequately explain the harm that is reasonably expected to occur, if there isn’t current harm?
- . . . include all facts or elements considered to make the case finding decision?
- . . . provide adequate information for a person unfamiliar with the case to make the same case finding decisions?
- . . . when did the incident occur?
- . . . where did the incident occur?
- . . . link the conditions/incident to the harm or likelihood of harm experienced by the child?
- . . . give the child’s age? current condition? any special needs?
- . . . document the child’s reaction to the incident, if significant to the decision made?

[Back to Table of Contents]
Case Finding Decisions shall be made per PPM Section 2500. Utilize PPM 2502 to consider an Affirmed or Substantiated case finding decision.

<table>
<thead>
<tr>
<th>Activity</th>
<th>NEGLECT OF A SUBSTANCE AFFECTED INFANT CASE FINDING DECISION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consider/</td>
<td>Neglect of a Substance Affected Infant: Failure of a parent, guardian, or person responsible for the care of a substance affected infant to use resources available to meet the health and substance use disorder treatment needs of such infant. Neglect has the meaning specified in K.S.A. 38-2202 (see definitions for physical neglect, medical neglect and lack of supervision). A substance affected infant is defined as the birth of an infant (birth to 1 year of age) who is identified as being affected by or having withdrawal symptoms resulting from prenatal exposure to a legal or illegal substance (K.A.R. 30-46-10).</td>
</tr>
<tr>
<td>Evaluate/</td>
<td></td>
</tr>
<tr>
<td>Discuss</td>
<td></td>
</tr>
</tbody>
</table>

**Questions to determine if information is sufficient to consider an affirmed or substantiated finding**

- Has a medical professional determined the infant was born affected by substances?
- Has a medical professional predicted long-term physical harm, or developmental/cognitive delays of an infant (birth to 1 year of age), due to prenatal substance abuse?
- What actions have the parent/caregiver(s) taken to address the health and substance use disorder treatment needs of the infant? mother's prenatal substance abuse? What was the parent(s)/caregiver(s) reaction?
- What is the impact/harm to the infant due to the failure of a parent, guardian, or person responsible for the care of a substance affected infant to use resources available to meet the health and substance use disorder treatment needs of such infant?
- If no current harm, what harm was reasonably expected to occur? What was the likelihood of harm?
- What is the evidence that the actions or inactions of the perpetrator(s) caused the harm on the child? Or the likelihood of harm?
- Is substance use a contributing factor in the parents’ ability to meet the needs of the infant? What substances have caused the harm? When was the mother’s last use? What was the frequency, duration and quantity of use? Were other caregivers using? (frequency, duration and quantity)
- Did the mother make efforts to stop use when she found out she was pregnant?
- What is the history of substance abuse; and what treatment has the parent/caregiver(s) participated in? Has the treatment been successful? What are the barriers to successful treatment?
- Were the parent/caregiver(s) prepared for the birth of the infant? Was there prenatal care?
- Was the lack of preparation, prenatal care, and treatment due to the lack of financial means?
- Any contradictory information or statements have sufficient information to clarify or verify the evidence?

**Does the Basis of Finding:**

. . . provide a detailed description of the harm to the child.
. . . describe how the harm to the child was determined by a medical professional.
. . . describe how the action or inaction of the perpetrator(s) directly resulted in the harm.
. . . provide evidence/details the harm to the infant is due to the prenatal substance use.
. . . include all facts or elements considered to make the case finding decision.
. . . provide adequate information for a person unfamiliar with the case to make the same case finding decisions?
. . . give the child’s age? current condition? any special needs.
Case Finding Decisions shall be made per PPM Section 2500. Utilize PPM 2502 to consider an Affirmed or Substantiated case finding decision.

<table>
<thead>
<tr>
<th>Activity</th>
<th>ABANDONMENT CASE FINDING DECISION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consider/ Evaluate/ Discuss</td>
<td>Abandonment: Forsake, desert or cease providing care for the child without making appropriate provisions for substitute care. K.S.A. 38-2202</td>
</tr>
</tbody>
</table>

Questions to determine if information is sufficient to consider an affirmed or substantiated finding

- Have the perpetrator(s) given up, forsaken or deserted the child?
- Have the perpetrator(s) stated they would not return to the child?
- What is the length of time since the last contact with the perpetrator(s)?
- Have the perpetrator(s) been gone long enough to indicate they do not intend to return?
- Have the perpetrator(s) been located?
- Has there been a reasonable effort to locate the parents?
- Did the perpetrator(s) fail to make arrangements for alternate care of the child?
- Were the substitute care givers unwilling or unable to assume responsibility for the child?

Does the Basis of Finding . . .

- provide evidence the perpetrator(s) have given up, forsaken or deserted the child?
- document the perpetrator(s) statement not to resume the relationship?
- provide sufficient evidence the perpetrator(s) does not intend to resume the relationship?
- document the perpetrator(s) failed to make arrangement for alternative care of the child?
- verify the substitute care givers were unwilling or unable to assume responsibility for the child?
- identify when the incident occurred, if known?
- identify where the incident occurred, if known?
- include all facts or elements considered to make the case finding decision?
- provide adequate information for a person unfamiliar with the case to make the same case finding decisions?
- link the conditions/incident to the harm or likelihood of harm experienced by the child?
- give the child’s age? current condition? any special needs?
- document the child’s reaction to the incident, if significant to the decision made?

Back to Table of Contents