



Tennessee Department of Children’s Services

Work Aid- 1 - CPS Categories and Definitions of Abuse/Neglect

Central Intake will accept reports alleging abuse or neglect that meet established criteria and definitions of abuse and neglect. To determine the response priority of the report, Central Intake will categorize the report information into one of the following abuse/neglect categories:

| Abuse/Neglect Category                                | Definition  |
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| <p><b>A. Physical Abuse Category <sup>1</sup></b></p> | <p><b>1. <u>Physical abuse:</u> <sup>2</sup></b><br/> Non-accidental physical trauma or abuse inflicted by a parent or caretaker on a child. Physical abuse also includes but not limited to:</p> <ul style="list-style-type: none"> <li>a) A parent or caretaker's failure to protect a child from another person who perpetrated physical abuse on a child;</li> <li>b) When an injury goes beyond temporary redness, e.g., a bruise, broken bone, cut, burn;</li> <li>c) When injuries are received due to parental behavior, e.g., domestic violence; or</li> <li>d) When a child is allegedly struck on parts of the body in such a way that could result in internal injuries.</li> <li>e) Munchausen Syndrome by Proxy could be considered physical abuse or psychological abuse.</li> </ul> <p><b>2. <u>Drug exposed infant/child (Investigation):</u></b> (The <u>medical definition</u> of infant is age 0 to 1 year old. Child – is over the age of 1 year old.)<br/> This allegation pertains to an:</p> <ul style="list-style-type: none"> <li>a) Infant/child who has been exposed to a drug or chemical substance (e.g., alcohol, cannabis, hallucinogens, stimulants, sedatives, narcotics, meth, heroin, inhalants or any other illegal substances), as verified by a positive drug screen.</li> <li>b) Infant/child who has been exposed to a drug or chemical substance that could adversely affect his/her physical, mental, or emotional functioning. This includes but is not limited to the following situations:</li> </ul> |

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|   | <ul style="list-style-type: none"> <li>◆ Drugs or chemical substances are administered to or given to children;</li> <li>◆ Children exposed to or living within close physical proximity to where drugs or chemical substances are manufactured (the manufacturing of methamphetamine in a home where children are present, is always considered severe abuse).</li> </ul> <p>c) Parents/caretakers use of drugs or chemical substances that impairs the parent/caretakers ability to meet child-care responsibilities.</p> <p><b>3. <u>Drug exposed infant/child (Assessment Track):</u></b></p> <p>This allegation pertains to children who:</p> <ul style="list-style-type: none"> <li>a) Have parents/caretaker who have a positive drug screen or have admitted to the use of a drug or chemical substance.</li> <li>b) Do not live in an environment nor are exposed to the manufacturing of a drug or chemical substance.</li> <li>c) Parents/caretakers use of drugs or chemical substances does not impair the parent/caretaker's ability to meet child-care responsibilities.</li> </ul>  |
| <b>B. Neglect Category</b> <sup>3</sup> | <p><b><u>Neglect</u></b></p> <p>A parent or caretaker's omission in relation to a child's needs. Neglect is best considered contextually, especially based on the age and developmental stages of a child. Neglect includes:</p> <p><b>1. <u>Environmental neglect:</u></b></p> <p>A living situation either inside or outside the residence that is dangerous or unhealthy. The situation described can cause harm or significant risk of harm to the child(ren) in the home. The child's age and developmental status must be considered when evaluating the impact of the environmental condition of the child. The following are some examples of environmental situations as they relate to the child's age and developmental status:</p> <ul style="list-style-type: none"> <li>a) Leaking gas from stove or heating unit;</li> <li>b) Substances or objects accessible to the child that may endanger health/safety;</li> <li>c) Open/broken/missing windows;</li> <li>d) Structural hazards such as caving roof, holes in floor or walls, etc.;</li> <li>e) Exposed electrical wires;</li> <li>f) Children lack clothing so that they are dangerously exposed to the elements, for example, not having shoes or warm</li> </ul> |

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|                        | <p>clothes for winter;</p> <p>g) Excessive garbage or rotted or spoiled food, which threatens health;</p> <p>h) Evidence of human or animal waste in the living quarters; and</p> <p>i) Insect or rodent infestation</p> <p><b>2. <u>Nutritional neglect:</u></b> <sup>4</sup></p> <p>A parent or caretaker's failure to provide adequate nutrition to a child. Nutritional neglect occurs when children repeatedly experience hunger for hours or a large part of the day, and no food is available. These behaviors may include:</p> <p>a) Begging from neighbors for food,</p> <p>b) Eating out of garbage cans, or</p> <p>c) Constantly stating a need for food.</p> <p><b>3. <u>Medical neglect:</u></b> <sup>5</sup></p> <p>A situation in which a child does not receive adequate health care, resulting in actual or potential harm. Medical maltreatment does not pertain to elective health care or treatment.</p> <p>a) It applies to procedures or treatment that a physician or other health, medical professional deems medically necessary.</p> <p>b) Medical neglect may rise to the level of severe child abuse if the absence of medical care endangers the life of the child or is likely to result in severe impairment.</p> <p><b>4. <u>Educational neglect:</u></b> <sup>6</sup></p> <p>Repeated failure of the caretaker to meet the child's educational needs. This allegation applies to:</p> <p>a) Children legally mandated to be in an educational program through 18 years of age. When applying this allegation to children 12 and over, it should only be considered after the inability of the school to engage the caretaker to improve the child's school attendance.</p> <p>b) Caretaker's failure to enroll a child in school or failure to register a home-schooled child with the Board of Education.</p> <p><b>5. <u>Lack of supervision:</u></b></p> <p>Failure to provide adequate supervision, by a parent or other caretaker, who is able to do so. A lack of supervision allegation or determination means that:</p> <p>a) The child has been placed in a situation that requires actions beyond the child's level of maturity, physical ability,</p> |

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|   | <p>and/or mental ability; or</p> <p>b) Caregiver inadequately supervises a child. The caregiver is with the child but is unable or unwilling to supervise (e.g., the caregiver is under the influence of alcohol or drugs, is depressed, sleeps during the day, or has inadequate parenting knowledge or skills).</p> <p><b>6. <u>Abandonment:</u></b></p> <p>Deliberate absence of the parent or other caretaker for an extended period with no plan or an inadequate plan or provision for the child's care. It may include:</p> <p>a) Abandonment of the child in the child's own home, in day care or in substitute care;</p> <p>b) Abandonment of the child in a car, on the highway or in a public place;</p> <p>c) Child left in the care of a suitable caregiver but without proper planning or consent. The caregiver leaves the child but does not return when scheduled or has a history of leaving the child without providing essentials for care (e.g., diapers, formula).</p> <p>c) Newborn infants who are aged 72-hours or <u>younger</u> and voluntarily delivered by the infant's mother to any professional medical facility as defined by <i>TCA 68-11-255, Procedure for Surrendering Custody of Unwanted Infant Without Criminal Liability</i>, (per <i>TCA 36-1-142</i>) does not apply to the definition of abandonment. Procedures shall be followed as outlined in <a href="#"><u>Work Aid 5- Protocol for Anonymous Voluntary Abandonment of Unharmd Newborn Infant.</u></a></p> <p><b><u>Exception:</u></b> Parents/caretakers with unruly children who exhibit unmanageable behavior and require intervention services will be referred to Family Crisis Intervention Program (FCIP) services.</p> |
| <p><b>C. Sexual Abuse Category <sup>7</sup></b></p> | <p><b><u>Child Sexual abuse:</u></b></p> <p>Occurs when:</p> <ol style="list-style-type: none"> <li>1. The target is a child. Children are presumed unable to give informed consent to sexual relationships with adults.</li> <li>2. Sexually motivated behavior includes intentional acts that produce sexual arousal or gratification. These include: <ul style="list-style-type: none"> <li>◆ Explicit sexual acts;</li> <li>◆ Sexual penetration, (vaginal, oral, anal, digital, and/or with an object);</li> </ul> </li> </ol>  |

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|  | <ul style="list-style-type: none"> <li>◆ Sexual touching -intentional contact with genitals, buttocks or breasts. This also includes when adolescents or adults instruct children to engage in such behaviors with each other;</li> <li>◆ Indecent exposure and voyeurism; and</li> <li>◆ Intentionally exposing child to sexually explicit material.</li> </ul> <p>3. <u>Sexual exploitation</u>:</p> <p>Sexual behaviors or situations in which the motivation may or may not be sexual, but there is a clear sexual component such as:</p> <ul style="list-style-type: none"> <li>a) Taking pictures or videos of children engaging in sexual activities or in sexually explicit poses;</li> <li>b) Making children available to others for sexual purposes;</li> <li>c) The sexual gratification or benefit of an adult;</li> <li>d) Use of a child for prostitution; and</li> <li>d) Willful failure of the child's caretaker to stop child sexual abuse by another person.</li> </ul> |
| <p><b>D. Psychological Harm Category</b></p> | <p><u>Psychological harm</u>:</p> <p>A repeated pattern of caregiver behavior or extreme incident(s) that convey to children that they are worthless, flawed, unloved, unwanted, endangered, or only of value in meeting another's needs and may include both abusive acts against a child and failure to act; neglectful behavior when age appropriate action is required for a child's healthy development, e.g., when a child is shown no affection. It can occur as part of an extreme one-time incident, (e.g., a parent frustrated about continual bed-wetting forces a six (6) year old to wear diapers in the neighborhood), but is usually chronic. Some types of psychological harm might include:</p> <ul style="list-style-type: none"> <li>1. An injury to a child by a caregiver that impairs his/her intellectual, emotional or psychological development.</li> </ul>  |

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|  | <p>2. Verbal and non-verbal caregiver acts that reject and degrade a child such as belittling, degrading, shaming and ridiculing.</p> <p>3. Terrorizing; including caregiver behavior that threatens or is likely to physically hurt, kill, abandon or place the child or child's siblings, toys or objects in recognizable dangerous positions or situations to terrorize the child.</p> <p>4. Isolating that includes caregiver behaviors that consistently deny the child opportunities to meet needs for interacting or communicating with peers or adults inside or outside the home. Confining the child or placing unreasonable limitations on the child's freedom of movement within his or her environment.</p> <p><b>Note:</b> A report of concern regarding psychological harm does not have to come from a professional. A supporting mental health evaluation is required to indicate this allegation.</p> |
| <b>E. Child Fatality/Near Fatality</b> | <p>1. Any unexplained death of a child when the cause of death is unknown or pending an autopsy report.</p> <p>2. Any child death caused by abuse resulting from direct action of the child's caretaker <b>or</b> the consequence of the child's caretaker's failure to stop another person's direct action that resulted in the death of a child. Child fatalities are always treated as <u>severe child abuse</u>.</p> <p>3. Any child death that is the result of the caretaker's failure to meet childcare responsibilities. Neglect death is always treated as <u>severe child abuse</u>.</p>  |

<sup>1</sup> In its most severe form, physical abuse is likely to cause great bodily harm or death.

<sup>2</sup> Physical abuse should not be confused with developmentally appropriate, discipline-related marks and bruises on the buttocks or legs of children six (6) years of age and older when there are no developmental or physical delays, past history of abuse or recent (within the past year) screened-out reports.

<sup>3</sup> In its most severe form, serious illness or significant injury has occurred due to living conditions and these conditions still exist (for example; lead poisoning, rat bites). See Section *F* for more details.

<sup>4</sup> In its more severe form, nutritional neglect is the failure to feed a child that result in poor growth which may include the child's weight, height and head circumference falling significantly below the growth rates of average children, malnutrition and non-organic failure to thrive.

<sup>5</sup> In its most severe form, medical neglect occurs when the absence of medical care endangers the life of the child or is likely to result in severe impairment.

<sup>6</sup> This allegation is not appropriate for reports of children who willfully refuse to attend school.

<sup>7</sup> All allegations of sexual abuse are considered to be allegations of severe abuse.