

INCIDENT STATUS DETERMINATION PROCESS (ISDP)

1. CRC follows a two-part review procedure and makes four decisions

Part I: Incident Status Determination and Severity Level

Decision #1

INCIDENT STATUS DETERMINATION: The task in this step is to decide if the specific incident that brought the case to the CRC is substantiated or unsubstantiated. The incident status determination is decided by a majority of votes of the permanent voting members of the CRC. After the presentations by the CRC members and using the FAP definitions and decision criteria listed below for the type of abuse under deliberation, the team determines if an incident meets the criteria for abuse and identifies who committed the abuse. Information regarding history and pattern of abuse are limited solely to deliberations on emotional abuse and neglect given the cumulative nature of this type of abuse, or when the CRC is trying to identify a primary and secondary offender in an incident involving the use of non-accidental use of physical force by both parties. Any other factors such as work performance, family stressors, emotional/psychological issues, and involvement in treatment are not discussed during Decision #1 deliberations but are deferred until the discussion of risk during Decision #3. When all the criteria noted below for the specific type of abuse under consideration have been discussed, the CRC follows the voting procedures to determine if an incident is substantiated, unsubstantiated-unresolved, or unsubstantiated-did not occur.

SPOUSE/INTIMATE PARTNER ABUSE

Spouse/Intimate Partner Physical Abuse:

Physical force includes, but is not limited to, pushing, shoving, slapping, grabbing, poking, hair-pulling, scratching, pinching, restraining, shaking, throwing, biting, kicking, hitting with a fist, hitting with a stick, strap, or other object; scalding, burning, poisoning, stabbing applying force to throat, cutting off air supply, holding under water, using a weapon, use of restraints, use of one's body, size, or strength against the spouse.

- Was there non-accidental use of physical force? If yes, consider the exclusions.
- Exclusions:
 - Act occurred while spouse was in the act of using physical force, and
 - Sole function was to stop spouse's use of physical force, and
 - Act used minimally sufficient force to stop spouse's use of physical force
or
 - Act was to protect self from imminent harm based on sense of threat and history of prior abuse

Spouse/Intimate Partner Abuse Emotional Abuse: Although a single act may be sufficiently harmful to substantiate an incident, CRC's should primarily consider if a pattern of power and control through emotionally abusive acts exist to substantiate this type of abuse. A single isolated act of name-calling or cursing at a spouse is not sufficient to substantiate an incident of emotional abuse. Additionally, verbal arguments, in and of themselves, are not sufficient to substantiate an incident of emotional abuse. When considering this type of abuse, a careful review of the definition of emotional abuse in Appendix B of the CRC Handbook is important.

- Was there intentional use of the following:
 - Berating, disparaging, degrading, humiliating victim and/or,
 - Restricting the victim's ability to come and go freely and/or,
 - Obstructing the victim's access to assistance (law enforcement, legal, medical, etc) and/or,
 - Threatening future physical harm or sexual assault and/or,
 - Restricting victim's access to or use of economic resources and/or,
 - Restricting victim's access to use of military services and/or,
 - Isolating victim from family, friends, or social support resources and/or,
 - Stalking and/or,
 - Trying to make the victim think s/he is crazy

Spouse/Intimate Partner Neglect:

- Is the spouse incapable of self-care due to substantial limitations (physical, cultural, psychological)? If no, the criterion is not met for substantiation according to the definition in the Section 2 of this six-part folder.
- If yes, was there non-accidental intentional deprivation of necessities (food, water, shelter, necessary psychiatric/medical services, appropriate care, or appropriate access to care)?

Spouse/Intimate Partner Sexual Abuse:

- Was there use of physical force to compel the spouse to engage in a sex act against his/her will, whether or not the act was completed or,
- Were there physical or emotionally aggressive acts to coerce sex (threatening, postering, etc) or,
- Was there an attempted or completed act on a spouse who was unable to give consent?

CHILD ABUSE

Child Physical Abuse:

Physical force includes, but is not limited to, dropping, pushing, shoving, slapping, grabbing, poking, hair-pulling, scratching, pinching, restraining, shaking, throwing biting, kicking, hitting with fist, hitting with a stick, strap, or other object, scalding, burning, poisoning, stabbing, applying force to throat, cutting off air supply, holding under water, using a weapon.

- Was there non-accidental use of physical force on the part of a child's caregiver? If yes, consider the exclusions.
- Exclusions:
 - Act occurred while the child/adolescent was in the act of using physical force and,
 - Sole function was to stop the child/adolescent's use of physical force and,
 - Act was minimally sufficient to stop child/adolescent's use of physical force or,
 - Act was committed during developmentally appropriate physical play (horseplay, rough housing, wrestling, contact sport) or,
 - Act committed to protect the child from imminent harm (grabbing a child's arm to prevent them from running into the street)

Child Emotional Abuse:

- Berating, disparaging, degrading, humiliating, or isolating the victim and/or,
- Threatening abandonment or harm and/or,
- Destroying personal property and/or,
- Harming or threatening harm to pets or loved ones and/or,
- Coercively confining a child's movement as a means of punishment (tying to an object, binding a child's arms or legs, locking in a closet, etc) and/or
- Coercing the child to inflict harm on him/herself (ordering a child to kneel for long periods of time, etc)
- Threatening with a weapon

Child Sexual Abuse:

- Was there non-contact sexual exploitation of a child for the sexual gratification of the offender (tricking, enticing, threatening, and pressuring a child to participate in acts that do not include direct physical contact between the child and offender or,
- Did the alleged abuse meet the criteria for rape – Use of physical force, emotional manipulation, or a child's youth or naivete to engage in penis-vulva or penis-anus penetration (of child, perpetrator, or both), however slight.

- Did the alleged abuse meet the criteria for sexual assault – Physical contact of a sexual nature between child and perpetrator not involving penis-vulva or penis-anus penetration, including, but not limited to:
 - Oral-genital or oral-anal contact or
 - Non-penile penetration of vulva or rectum (for example, with hands, fingers, or objects) or
 - Attempted penetration of the vulva or rectum or
 - Groping, rubbing, fondling, stroking, or similar behavior—directly or through clothing

Child Neglect:

- Was there a deprivation of necessities or omission of care/supervision such that a child’s welfare was harmed or threatened?” Consider the following:
 - Lack of supervision and/or,
 - Exposure to physical hazards and/or,
 - Educational neglect and/or,
 - Medical neglect and/or,
 - Deprivation of necessities and/or,
 - Abandonment

Proceed to Decision #2 ONLY if incident is substantiated

Skip to Part II if incident is unsubstantiated/unresolved

Decision #2

SEVERITY LEVEL (1-5): The purpose of this step is to guide safety planning and command response and is decided by a majority of votes of the permanent voting members of the CRC. The Severity Matrix is used as a guide only. The level of severity is specific to the incident substantiated and under deliberation in Part I. If there is more than one incident being considered, each incident is assessed individually. Given the focus on the current incident, history and pattern of abuse are not considered in determining severity level **except in incidents involving emotional abuse and neglect due to the cumulative nature of this type of abuse**. In addition to the act itself, consider impact on the victim:

- Injury or potential for injury
- Significant psychological distress
- Level of fear of future abuse
- Stress related somatic symptoms that interfere with normal functioning

If the victim has prepared an impact statement, the above elements should be included relative to the incident under deliberation.

Part II-Risk Assessment and Treatment Planning

Decision #3

RISK ASSESSMENT (Low to High): The purpose of this decision step is to guide recommendations for safety planning and treatment/intervention in Decision #4 and is decided by consensus of all CRC members. The assessment of risk (low, moderate, high) is a clinical opinion on the possibility for ongoing or escalating abuse. When a case is substantiated, the case manager presents findings from the formal risk assessment and provides the rationale for recommendations for intervention, command monitoring, or safety planning. If the incident is unsubstantiated unresolved, the case manager presents a summary of risk factors to guide secondary prevention recommendations if appropriate. Additionally, other CRC members present information relative to risk (i.e., history of abuse, pattern of abuse, work performance, stressors, social support, progress in treatment, etc).

Decision #4

TREATMENT/COMMAND MONITORING/SAFETY PLANNING:

Using a consensus-based process, options for treatment/intervention, command monitoring, and safety planning are discussed by the CRC and a plan is developed. Multiple treatment options are prioritized and timelines are established for monitoring progress and ensuring service delivery is as seamless as possible.