Reports of Parents Under the Influence of Drugs or Alcohol  

Substance Use Disorder is always an indicator of risk.

A parent who chronically uses substances cannot safely care for a child of pre-school age or younger, unless there is another adult present in the home who is reliable and vigilant; who does not use substances him or herself; who is willing, able, and available around the clock to provide care when the abusing parent is under the influence; who is physically capable and willing to control the unsafe behaviors of the substance using parent; and who is willing and able to keep outside persons from the home who could pose danger to the child or family.

If the child is under the age of ten, the risk of harm from a substance using parent remains very great. Even adolescents are vulnerable.

By definition, when the substance using parent is intoxicated, his or her judgment is impaired. He or she may go out and leave the child alone. Even if the parent stays home, he or she may not be able to cope with an emergency that might arise. If the substance is alcohol or a narcotic, such as heroin, the abuser may lapse into actual unconsciousness, leaving a young child completely vulnerable.

Both alcohol and cocaine may trigger angry and violent behavior in some persons - the "nasty drunk" syndrome. Alcohol use and cocaine use both correlate with physical abuse and domestic violence. Both alcohol and cocaine also appear to lower normal sexual inhibitions and correlate with child sexual abuse. Sexual abuse and/or physical abuse often become factors when a substance-using mother indiscriminately brings her substance-using sexual partners into contact with her children. Substances also have to be paid for - the cost of the addiction may eat up food money, rent/mortgage payments, and/or money needed to pay for heat and utilities, resulting in situations of extreme danger. Dependence may lead to prostitution and other forms of crime.
Calls received at SCR in which the drug/alcohol use of a parent/caregiver is of concern to the caller are screened thoroughly in order to determine the degree of immediate danger posed to the child.

The receipt of a report at SCR which alleges substance use by a parent or caregiver, in and of itself, does not necessarily constitute a matter to be referred to SPRU for emergency response. Other information must be gathered and assessed to make the determination whether to refer to SPRU or hold the case for day staff intervention. Consider:

- Is the parent's use of alcohol or drugs creating a situation of danger to the child at present creating a need for immediate intervention/investigation?

- Does the parent appear to be under the influence of drugs or alcohol right now? Describe (e.g., parent is exhibiting slurred speech, affected gait, foul-smelling breath, etc.). To what degree/impairment?

- What is the age and vulnerability of the child?

- Is a responsible adult in the home now to assume responsibility and provide care for the child?

- How is the parent's actions and behavior affected by the drug/alcohol?

- Is the drug/alcohol use chronic and regular, or an unusual or new practice by the parent(s)?

- How is the parent's drug/alcohol use affecting other aspects of the family's daily life?

If the caller reports that a "party" is in progress, in which drugs and/or alcohol are being taken by a group of adults, information to be gathered and assessed includes:

- Are children physically present at the party (or are they asleep, in another room, or otherwise apart from the adult activity)?

- What is the age and vulnerability of the child?

- Are the children being given drugs or alcohol, and/or are they a witness to the taking of drugs?

- How does the caller know about the party?

- How often/regular do "parties" occur in the home?
• Is the local police department the more appropriate agency to handle the immediate situation - the alleged illegal possession and use of drugs, and/or any neighborhood or other disturbance being caused by the adult gathering - with follow up by the respective LO and/or emergency intervention provided by SPRU on behalf of the child?

If the caller reports that the parent, adult household member -- or even an adolescent child -- is selling (i.e., "dealing") drugs from the home, instruct the caller to notify the police.

If the determination has been made that SPRU should respond to a report of a drug/alcohol "party," or a situation in which an adult may be out of control due to the influence of a substance, the police should accompany the SPRU Worker to the home for his or her personal protection (see CP&P-II-C-4-100, Criteria for Requesting Police Assistance).

If a reporter alleges that a parent/caregiver is giving a child illegal drugs or inappropriately administering prescription drugs to a child creating potential risk to the child's health and well-being, the case is immediately referred to SPRU for intervention.

The SPRU Worker contacts the local police for information about the family - prior arrests, etc. - when the presenting situation involves known or suspected substance use.

Note: Reports alleging that an infant has been born exposed to drugs or alcohol or that an infant has tested positive for drugs or alcohol shall be coded by SCR as "Neglect."

Domestic Violence Referrals and Reports 5-10-2010

See DCF/CP&P domestic violence policy and procedures when domestic violence is alleged or co-occurs with child abuse and/or neglect, current domestic violence laws, and information on domestic violence services in:

• CP&P-VIII-B-1-100, Domestic Violence; and

• CP&P-VIII-B-1-200, Guiding Principles When Domestic Violence and Child Abuse Co-Occur

Children Alone 11-12-2002

Calls received at SCR which allege that children are alone now require careful screening of available information, to determine whether CP&P intervention is warranted to ensure the immediate safety of the child, or whether the child is fully capable of being alone. Information sought by the SCR Screener centers on the abilities of the oldest child present, to "keep the peace" in the home/among the children, and to
care for him or herself and the younger children in case of an emergency, such as a fire or power blackout.

In New Jersey the law does not prescribe a certain age at which a child may be left alone. Some callers to SCR express their individual opinions on the subject, which may or may not be accurate and insightful. Some children may be capable of being alone for short periods of time (to enable their parent to go to the local market, convenience store, etc.), but should not be alone for long periods of time. In some households the parent(s) works, and older children may be called on to watch their younger siblings. Some children are " latch key" children based on the realities and limitations of individual family life situations.

If SCR receives a report which alleges that a child is home alone at present, the Screener gathers information from the reporter to assess whether the child is at risk in the absence of immediate adult supervision, such as:

- How does the caller know that the child is alone now? Has he or she seen the child? (When was the last time he or she actually saw the child?)

- How long has the child been alone?

- How does the child feel about being alone? Is the child afraid or in distress at being alone?

- Can the caller visit/call/stay with the child now, to ensure his, her, or their safety until CP&P intervenes?

- What are the age, abilities, judgment, general health and developmental level of the child (or oldest child present in the home)? Is it reasonable to expect that a child fitting that description is capable of providing adequate care for him or herself and younger children for a limited period of time while a parent is out?

- Does the child know how and where to contact the parent, if necessary? Does the child know how to contact a neighbor, adult friend, a relative or the local police, if necessary/in the absence of the parent? Is there a home telephone in working order? A cellular phone or a hand-held device?

- How many children are in the home at present, without adult supervision? (If there are several young children in the home, the level of risk may be heightened.)

- When did the parent(s)/caregiver leave the home (i.e., how long has the child been alone?), and when is the parent(s) expected to return?

- Is there food available? Has the child eaten?
• It is now daylight or night time? How may this impact on the child?

• What are the physical conditions in the home? May the conditions present risk to the child in the absence of immediate parental/adult supervision?

• What is the child doing now? (E.g., is the child acting wildly and placing him or herself at risk of injury? Are children fighting? Or, is the child watching television, the children have been put to bed and are asleep, all is calm in the home?)

• How often is the child left alone at home? Why? Is there a pattern? Is there a logical reason (e.g., a parent works)? Are there other issues associated with this practice (e.g., is the act of "babysitting" on a regular basis keeping the oldest child from doing other, age appropriate activities?) Is child care a service needed by the family?

If the SCR Screener determines that there is reason to be concerned that the child is home alone now, based on an assessment of the information gathered from the reporter, then field intervention is warranted to ensure the safety of the child.

SPRU, SCR, and/or the reporter may call the local police to provide assistance, an agency physically located in the community which can respond to the home quicker than a SPRU Worker. If the police are called, SPRU coordinates follow-up, as necessary, based on what the police find upon response (e.g., is the child alone now? Is the child capable of being alone? Is the situation an emergency, warranting placement or other CP&P services to ensure the child's safety?)

In some communities the police will not respond to reports of children being left alone, and look to CP&P to perform that service. Other police departments are willing to assist CP&P by accompanying a Division Worker (SPRU after hours) to the home to respond to such reports, but are unwilling to precede CP&P to the client home.

Children Left Alone in Cars  1-21-94

Some parents leave young children (toddlers, infants and nursery school aged children in particular) alone in cars/vans/trucks for short periods of time while they attend to simple, quick errands. Such a practice may be neither abusive nor neglectful.

A young child who has been left alone in a car for a length of time, however, outside his parent's view, could be at risk in various ways:

  • of asphyxiation/heat/exhaustion (if the car windows are closed, particularly in hot weather);

  • of injury, if the child should put the car in gear and the car moves;
of becoming lost or hit by a car, if he or she should take it upon him or herself to leave the car in search of the parent; and/or

of being taken (kidnapped) or exploited by others while alone.

In addition, a child left alone in a car could become frightened, start to cry, or otherwise be emotionally upset/traumatized, particularly if the child was left while asleep and suddenly wakes up alone.

When SCR receives a call which indicates that a young child is alone in a car at present, basic information must be obtained to assess risk, including:

• approximate age of child (indicative of the child's abilities to fend for him or herself, or present further risk to him or herself by his or her own actions);

• how long the child has been alone in the car, to the caller's knowledge;

• parent's whereabouts/proximity to the car/child, if known;

• where is the car located, and what risks may be associated with that location (e.g., child has been left in a car in a mall parking lot vs. on an inner-city street vs. in the driveway of the family home);

• temperature/weather factors at present;

• whether the engine is running;

• whether the child is awake or asleep;

• whether the car doors are locked;

• whether the car windows are open or closed; and

• whether the child has any handicapping and/or limiting condition(s) that would raise the probability of risk.

SCR records the vehicle license plate number and state, and the make of the car, so that the owner's identity and home address can be obtained from the Human Services Police or the local police department.

If the child is alone in a car parked in a mall parking lot, the SCR Screener takes the report and advises the caller to immediately call mall security or the local police. If the caller is willing, ask him or her to please watch the child, to ensure the child's immediate safety until help arrives. The SCR Screener calls the police or mall security, if necessary.
SCR assigns the case to SPRU for intervention, investigation, and coordinated efforts with the police, as warranted.

If a call is received at SCR, indicating that a child had been left alone in a car in the past (i.e., not at present), SCR documents the necessary information. The report is handled as a "neglect, 24-hour response."

**Children Left at Day Care Centers Beyond Closing**  1-21-94

See CP&P-II-D-2-1100, Children Left at Day Care Centers Beyond Closing - The SPRU Worker's Role.

"Candle Cases" - No Electricity/Power in a Home  1-21-94

Whenever SCR receives a report alleging that a family has no electricity, the Screener assesses the reported information to determine whether/how the problem is affecting the care and safety of the child.

At times such calls indicate that a family is using candles as a source of light in response to a shut off of electricity to the dwelling, and/or using kerosene heaters or ovens to heat a dwelling. Inappropriate use of candles, heaters, and/or ovens may put a family -- or an entire neighborhood, particularly a city block -- at risk of fire. Due to this risk factor, such calls are assigned to SPRU for immediate field intervention, or to coordinate/arrange intervention by an appropriate local agency, as illustrated below.

When it is learned that a family is using candles for illumination, or kerosene heaters or open ovens for heat, a law enforcement agency (e.g., the local police or fire department), a local board of health, or a child welfare agency (e.g., the county welfare board or CP&P) must be dispatched to the home to sensitize the parents/caregivers to the risk of setting a fire. The point is that a responsible agency must intervene; which agency responds is not important.

As many agencies and town services are not in operation after hours, and police departments may be reluctant to intervene in such situations affecting private dwellings, CP&P (i.e., SPRU) may be called on to provide this preventative service.

If it can be determined that a family is not at current risk, a field response may be held for day staff.

Municipal fire departments are authorized to intervene when candles are used by residents of apartment buildings or other multi-family dwellings, other than private homes or multi-family private homes, in accordance with N.J.S.A. 5:18-2.1. SPRU/SCR contacts municipal fire departments to enforce this code, when appropriate.

**Runaways (Children in Placement)**  1-21-94
Resource parents and out-of-home placement facility staff are required to report missing children to the Division; SCR during non-business hours. Runaway situations are not routinely assigned to SPRU. Runaways may be assigned to SPRU, however, if the Local Office leaves Special Instructions for case handling (see CP&P-II-A-5-300), or in unusual circumstances. If a resource parent or facility staff member indicates that the child will not be accepted back into the facility/program/home once he or she is found, or that a medical examination or other procedure would be required for re-admittance, the matter may be appropriate for SPRU intervention once the child is found/returns.

SCR asks the caller, who reported the child as missing, the reason the child left the residence/program, if known. Seek full details in an effort to determine whether there are problems in the placement, or if the child may have run away due to abuse or neglect, a situation which may necessitate SPRU intervention to protect the child, once found, and/or notification to IAIU. The caller may help the police identify likely locations where the child may be found.

Upon receiving information that a child in a CP&P placement is missing, a runaway, or "AWOL," the SCR Screener advises the caller:

- To alert the local police that the child is missing, and to provide the police with a description of the child, give details such as when he or she was last seen, where he or she may have gone, clothing worn by the child, etc.;
- That CP&P is available to assist the police, upon reasonable request, with efforts to find the child, but that the police are the lead agency in locating missing persons;
- To contact CP&P if the child returns (i.e., SCR before the start of the next work day, the LO during business hours); and
- That SCR will record the incident in NJ SPIRIT, which will be forwarded to the attention of the assigned Worker and Supervisor the next work day.
- If the child is later located by another individual or agency, SCR or SPRU advises the resource parent/facility staff that the child has been found and is safe, whether or not the child is to return to the resource home/program that day.