

CFS REFERRAL GUIDE FOR HOSPITAL

Legal Duty to Report - In Manitoba Health professionals whom receive information about a child that cause them **reason to believe** a child is in need of protection are mandated to report the concerns to child welfare.

Please see indicators and screening questions on backside for screening assistance.

Immediate Referral:

A child is believed to be at immediate risk for harm, including a child presenting with or is at risk of physical injury, sexual abuse, or death.

You have formed an opinion that the child has suffered or is at risk of suffering significant harm.

You are in doubt about the current child's safety and the parent's ability to protection the child.

Refer without delay – contact 24 hour CFS intake and your local law enforcement

Report / Referral:

Concern of potential harm, or future harm to child, if intervention or supports not in place.

You reasonably believe a child is at risk and/or you have significant concerns that a child and their family need a referral to CFS to prevent future incidents of harm.

The expectant parent is a minor.

The caregiver is requesting supports and service from CFS.

Make a report as soon as possible.

Consult / Communicate:

When unsure if a report is warranted and/or if the observations and information requires a report to child welfare, health staff have the ability to contact CFS to consult.

Family demographics will be requested as part of the CFS screening process.

CFS will determine if the report requires follow-up and/or provide information on community resources to provide supports.

If you think a child is being harmed or neglected, contact CFS at -1-866-345-9241. This includes Province-wide intake and emergency after hours.

In Winnipeg contact 204-944-4200

A REFERRAL TO CFS DOES NOT ALWAYS RESULT IN APPREHENSION

Indicators of a the Need for a Referral to CFS

NOTE

Urgency referral response will vary based on specific case facts thus the referral color code is to be used as a guide

- Caregiver is transient, has no fixed address or residency
- Mother presenting under the influence, intoxicated at time of admission or delivery
- Visibility of substance use in the home or primary caregiver presenting as under the influence
- Other children in attendance/in home presenting with concerns (concerns in the child's physical appearance: injuries, hygiene, self-harm marks, and significant changes to appearance over time
- When a parent/caregiver or involved adult is considered a threat to self or others, or is demonstrating otherwise out-of-control behaviour

- Mother is not responding to infant needs appropriately
- Suspicious or concerning injuries on either caregiver
- Substance addicted born infant (including methadone clinic for further assessment)
- Chaotic and/or unkempt home environment
- When a parent/caregiver is demonstrating a need for mental health assessment or treatment, or there is confirmed evidence such as a medical diagnosis, recent hospitalization for mental health issues, self-report, or request for service with no current treatment plan
- Unsafe home environment for infant/children including an unsafe sleep environment
- Caregivers have inappropriate supplies and preparation for the infant
- Caregiver is presenting as detached to child, disengaged and/or lack of responsiveness

- Observations of cognitive capacity challenges and lack of understanding infant/child developmental needs
- Presentation of caregiver as overwhelmed with limited support and coping

Screening Questions

- Ask about the caregiver's preparation for infant: i.e. supplies and supports
- Ask about substance use before, during and after pregnancy
- Questions around relationship history and history of domestic violence or police involvement
- Previous parenting experience and whether there are additional children in their care
- Any previous involvement with child and family services
- Question around pre and post natal medical care
- Questions to assess caregivers thoughts of harming self or child
- Questions to assess caregivers coping and support network

At All Times Remember To

Record your observations

Follow appropriate protocols

Consult notes and records

Consult with appropriate colleagues *

Consult with other support agencies*

If available involve your social work department as soon as possible

* If deemed necessary