

Massachusetts Department of Children and Families

Child Protective Services Dashboard Glossary

Following are the key words or terms used throughout the Department of Children and Families' (DCF) Child Protective Services Dashboard. This includes a short description or definition of what each term means. Where applicable, the glossary also includes information about where the term can be found on the dashboard.

Term	Description
51A Report <i>(Intake type)</i>	<p>A 51A Report or 51A is a report filed with the Department of Children and Families alleging abuse and/or neglect of one or more children under the age of 18 in Massachusetts. This includes reports of sexual exploitation and/or human trafficking. The Department of Children and Families conducts a screening process to determine whether a report is appropriate for further action.</p> <p>A child abuse/neglect report is called a 51A Report because it is filed in accordance with section 51A of Chapter 119 of the Massachusetts General Laws.</p>
Abuse	<p>Abuse means the non-accidental commission of any act by a caretaker upon a child under age 18 which:</p> <ul style="list-style-type: none">▪ Causes or creates a substantial risk of physical or emotional injury, or▪ Constitutes a sexual offense under the laws of the Commonwealth, or▪ Includes any sexual contact between a caretaker and a child under the care of that individual. <p>Abuse is not dependent upon location. Abuse can occur while the child is at home or in an out-of-home setting.</p>
Adoption <i>(Case type)</i>	<p>Adoption is a process by which a court establishes a legal relationship of parent and child between individuals who are not so related. When a child is adopted, the child and the adoptive parents have the same mutual rights and obligations as exist between children and their birth parents. Adoption does not prevent maintaining valued, lifelong connections to birth parents, siblings, kin, and other important individuals in children's lives.</p> <p>If it is determined that the permanency plan for a child is Adoption, the child will become part of an Adoption case. The other family members will continue to be part of the clinical case.</p> <p>See the Clinical Case and Permanency through Adoption items in this glossary for additional information.</p>

Assigned sex
(Child/young adult
characteristic)

The sex (male or female) assigned to a child at birth, most often based on the child's external anatomy.

Case

A Case may include the different members of a family (e.g., children and parents/caregivers) or young adults who turn 18 in foster care and continue receiving services up until age 23. While a Case is open, DCF works with families and community service partners to keep children safe. When DCF determines that a parent can safely care for their children or the children are living with a safe caregiver in a permanent home, DCF closes the Case.

See the [Clinical Case](#) and [Adoption Case](#) items in this glossary for additional information.

**Caregiver/
Caretaker**

A Caregiver or a Caretaker is:

- A child's parent, stepparent, guardian, or any household member entrusted with the responsibility for a child's health or welfare
- Any other person entrusted with responsibility for a child's welfare, whether in the child's home, a relative's home, a school setting, a child care setting (including babysitting), a foster home, a group care facility, or any other comparable setting. Caregivers/caretakers include, but are not limited to:
 - School teachers
 - Child care providers
 - Babysitters
 - School bus drivers
 - Camp counselors

The terms Caregiver and Caretaker are used inclusively to encompass any person who at the time of the suspected child abuse/neglect is entrusted with a degree of responsibility for the child. This includes a Caregiver/Caretaker who is themselves a child, such as a babysitter under age 18.

**Child
Protective
Service (CPS)
Agency**

An official agency of a state that has the responsibility to receive and respond to allegations of suspected child abuse and neglect, determine the validity of the allegations, and provide services to protect and serve children and their families. The Massachusetts Department of Children and Families (DCF) is the Child Protective Services agency for the Commonwealth of Massachusetts.

**Children
Requiring
Assistance
(CRA)**

(Intake type)

A Children Requiring Assistance (CRA) court case is a Juvenile Court case where parents, guardians, or school officials ask the court to help supervise a child. CRAs involve youth that have committed status offenses such as repeatedly running away from home, disobeying school rules, or skipping school.

The Massachusetts Juvenile Court can refer a child to DCF if a child is committed by the court and found to be in need of foster care or other assistance. The judge can also give temporary custody of a child to DCF if there is concern that the child may run away or otherwise not appear in court for their case.

CRA was formerly known as Children in Need of Assistance (CHINS).

See the [Court Referral](#) item in this glossary for additional information about how families may become known to DCF through the court.

Clinical Case

(Case type)

A Clinical Case consists of all members of a family (e.g., parents/guardians, children, or young adults) that are open with DCF for assessment or for case management.

**Congregate
Care**

*(Placement type
category)*

Congregate Care (sometimes referred to as group care) is a term for out-of-home placement settings that include 24-hour supervision for children in a variety of highly structured settings such as group homes, residential child care communities, child care institutions, residential treatment facilities, or maternity homes. There are different types of Congregate Care settings that provide different services based on the children's needs.

**Congregate
Care –
Emergency
Residence**

(Placement type)

Includes out-of-home congregated care service models designed to accept emergency intakes at any time (24 hours a day 7 days a week) to support the immediate placement of youth with moderate to severe behavioral needs that reflect a lack of self-regulation.

**Congregate
Care –
Medically
Complex
Residence**

(Placement type)

Includes out-of-home congregated care service models for youth with complex medical needs that cannot be managed in a home setting because they require 24 hour a day direct skilled nursing or medical equipment. Youth will have a range of other challenges, which may include sensory impairments, intellectual disabilities, or physical impairments. One of the Congregate Care - Medically Complex Residence models serves youth who also have behavioral health challenges.

**Congregate
Care –
Residential
School**

(Placement type)

Includes out-of-home congregated care services models that are integrated with an on-site special education school. Youth receiving Residential School services need a self-contained, integrated treatment and educational program. This is due to the severity of behavioral risk to themselves or others which prevents them from safely attending school off-site.

Congregate Care - Treatment Residence (Placement Type)	Includes out-of-home congregate care service models for youth with moderate to severe behavioral needs that reflect a lack of self-regulation. There are specialized Treatment Residence service models which address a specific need, such children who have been sexually exploited (called the commercial sexual exploitation of children or CSEC), children with intellectual disabilities, and more.
Congregate Care Network – Youth and Young Adult (Placement type)	Includes out-of-home congregate care service models for older adolescents and young adults to increase their skill set towards independently navigating community living and increasing self-sufficiency. This includes pregnant and parenting youth/young adults.
Consumer (Case role type)	<p>Children and families who are involved in DCF clinical and adoption cases are known as case Consumers. There are two primary types of Consumers in DCF cases including:</p> <ul style="list-style-type: none"> ▪ Consumer Children – including children who are under the age of 18 as well as young adults between 18 to 22 years old who voluntarily choose to remain involved with DCF. ▪ Consumer Adults – including parents/guardians residing in or outside of the home of the child. This may include biological parents, adoptive parents, stepparents, legal guardians, or other adults acting in a parental role.
Court Referral (Intake type)	<p>Sometimes the courts refer children and families to DCF. Court Referrals can come from a Probate and Family Court case where a parent voluntarily surrenders a child or when a child has been abandoned by a parent or guardian.</p> <p>See Children Requiring Assistance item in this glossary for additional information on other ways families become known to DCF through the court.</p>
DFC (Placement type)	<p>DFC is an abbreviation for Departmental Foster Care and includes out-of-home placements in foster homes that are licensed and supported by the Department of Children and Families.</p> <p>See the Foster Care item in this glossary for additional information.</p>
DFC – Child Specific Foster Care (Placement type)	<p>Includes Departmental Foster Care (DFC) placements provided by a non-kinship licensed foster caregiver – such a child’s teacher or a friend’s parent – with whom the child/family has a strong bond and is significant in their life.</p> <p>Note, in accordance with DCF’s foster care policies, starting in February 2023 Departmental Foster Care placements with individuals with whom the child/family has a strong bond and is significant in their life will be known as DFC Kinship Foster Care.</p> <p>See the DFC Kinship Foster Care item for additional information.</p>

**DFC – Kinship
Foster Care**

(Placement type)

Includes Departmental Foster Care (DFC) care placements provided by licensed foster caregiver related to the child by either blood, marriage, or adoption. It also includes foster care provided by an adult to whom the child and/or parents ascribe the role of the family based on cultural and affectional ties or individual family values.

Note, in accordance with DCF's foster care policies, starting in February of 2023, DFC – Kinship Foster Care also includes foster care with a licensed caregiver, such as a child's teacher or friend's parent, with whom the child/family has a strong bond and is significant in their life.

**DFC –
Independent
Living**

(Placement type)

Includes out-of-home services for youth/young adults age 17.5 or older who are not able to be served in a family setting due to their clinical needs, but who are able to live on their own with support. This includes youth/young adults who can independently manage community access; have attained a sufficient level of independent living skills to enable them to live without on-site staffing; are able to utilize staff support to strengthen these independent skills; and exhibit a strong level of self-regulation. The youth/young adults in Independent Living settings may be enrolled in school/a GED program or may be working/involved in vocational training.

Independent Living services may be provided at different types of sites (e.g., dorm, apartment) that provide outreach and care coordination to youth/young adults and are available for face-to-face crisis intervention 24 hours a day, seven days a week.

**DFC – Pre-
Adoptive
Foster Care**

(Placement type)

Includes Departmental Foster Care (DFC) placements with a licensed foster caregiver that has been identified as the child's permanent family and has been approved to adopt the child. The child needs to live in the home for at least six months before the adoption can be finalized.

**DFC –
Unrelated
Foster Care**

(Placement type)

Includes Departmental Foster Home (DFC) placements with a licensed foster caregiver who partners with DCF to provide foster care for a child who is usually not previously known to the caregiver.

Note, in accordance with DCF policies, prior to February 2023, this was referred to as unrestricted foster care.

Emergency Response

(Response type)

also known as
Screen In –
Emergency
Response

If a child abuse/neglect report meets the criteria for suspected abuse and/or neglect it is “screened-in” and assigned for a child protective services response. The purpose of the response is to determine if there is “reasonable cause to believe” that a child has been abused and/or neglected.

“Screened-in” reports may require an immediate emergency response or a non-emergency response. Emergency Responses are required when there is a determination that the report involves a situation where the failure to take immediate action would pose a substantial risk of death, serious emotional or physical injury, or sexual abuse of a child.

The Emergency Response is to begin within two hours of the report and is to be completed within five business days.

See the [Response](#) and [Non-Emergency Response](#) items in this glossary for additional information.

Foster Care

(Placement type category)

Children are sometimes temporarily placed in Foster Care because their parents/guardians aren’t able to give them the care that they need. Foster Care placements provide stability and safety for children/youth that have been brought into the protective care of the Commonwealth of Massachusetts. These Foster Care placements may be with family/kin or with unrelated caregivers who have completed training and are approved as licensed foster caregivers.

Foster Care includes placement in Departmental Foster Care (DFC) homes licensed and supported by the Department of Children and Families. It also includes placement in comprehensive foster care (CFC) in homes provided by licensed contracted foster care agencies.

Foster Care – Comprehensive Foster Care – IFC (Contracted)

(Placement type)

Includes foster care placement provided in a licensed foster home that offers more intense therapeutic care and supports settings for children who require more complex care. Comprehensive Foster Care is provided by licensed contracted foster care agencies. Comprehensive Foster Care, which is sometimes referred to as intensive foster care or IFC, is generally provided for children and youth for whom the traditional foster care environment is not suitable or sufficiently supportive.

Fiscal Year (FY)

Also referred to as the State Fiscal Year (SFY), the Commonwealth of Massachusetts’ Fiscal Year begins on July 1st and ends on June 30th of the following calendar year.

Gender Identity

(Child/young adult characteristics)

Gender Identity is an individual’s internal view of their gender, one’s innermost sense of being male, female, both, or neither. Gender Expression is the manner in which a person expresses their gender through clothing, appearance, behavior, speech, etc.

In Placement

(Child/young adult characteristics)

The Department of Children and Families (DCF) works in partnership with families and communities to keep children safe from abuse and neglect. In most cases, DCF is able to provide supports and services to keep children safe at home. When necessary, the Department provides children with a foster home or another safe place to live outside of their home.

Placement is defined as a situation in which the child is not living at home, AND:

- Is in the care of DCF through a court order or an adoption surrender, OR
- Is in the care of DCF through a voluntary placement agreement

Institutional Abuse

(Intake type)

An Institutional Abuse report is a report of suspected child abuse/neglect (also known as a 51A) in an institutional setting. Institutional settings includes schools and other facilities, such as Massachusetts Department of Early Education and Care, Department of Developmental Service, Department of Mental Health, Department of Public Health, and Department of Youth Service facilities. Institutional settings include but are not limited to:

- Child care centers and family child care homes
- Day schools or residential facilities (public and private)
- Day or overnight camps
- Foster and pre-adoptive homes
- Hospitals and respite facilities
- Pediatric nursing homes
- School-age child care programs
- Temporary shelters

Institutional Abuse reports also include reports of suspected child abuse/neglect that occurred while a child was being transported to or from a facility as well as when a child was off the premises of the facility but still in its care.

An Intake is a child/abuse neglect report or other request for assistance that the Department of Children and Families receives or “Intakes”. This includes child abuse/neglect reports, which are also known as protective Intakes. It also includes voluntary requests for services, court referrals and more.

Intake

The Department’s Child-At-Risk Hotline and area office based intake units conduct a screening process to determine the appropriate next step for the different types of intakes received.

See the [51A Report](#), [Children Requiring Assistance](#), [Court Referral](#), [Institutional Abuse](#), [Safe Haven](#), and [Voluntary Application](#) items in this glossary for additional information.

Juvenile Court

The Juvenile Court in Massachusetts oversees civil and criminal matters statewide that involve children. This includes youthful offender, care and protection, and delinquency matters.

See the [Children Requiring Assistance](#) (CRA) item in this glossary for additional information.

**Length of Time
in Placement**

*(Child/young adult
characteristics)*

The Length of Time in Placement is the continuous amount of time that a child was in the Departments’ care and living in an out-of-home setting, such as a foster home or congregate care location. Breaks in placement for less than 30 days are typically considered part of one continuous placement and counted in the length of time in placement.

**Mandated
Reporter**

The Department of Children and Families relies on child serving professionals and the public to alert the Department of suspected child abuse and/or neglect. Mandated Reporters are people who are legally required to inform DCF if they suspect a child is being abused/neglected. Mandated Reporters are defined by [MGL c.119, §51A](#) and include law enforcement, health care professionals, educators, clergy, probation and parole officers, foster parents, social workers, firefighters, and more.

See [MGL c.119, §51A](#) for a detailed listing of all the Mandated Reporter roles.

**Missing/
Absent**

(Placement type)

Children are considered to be “Missing” from placement if their whereabouts are unknown. This may include children who have been abducted, children who have run away from a DCF placement, and children who have come under DCF’s jurisdiction on an emergency basis (under [MGL c.119, §51B](#)) and their whereabouts became unknown before the initial court hearing. Children are considered Missing if their whereabouts are unknown whether or not they make contact with the Department, a parent/guardian, or a placement provider.

Children are considered to be “Absent” from placement if their whereabouts are known, but they refuse to return to their approved DCF placement.

Neglect

Neglect means failure by a caretaker to take the actions necessary to provide a child with minimally adequate food, clothing, shelter, medical care, supervision, emotional stability, growth, or other essential care.

Neglect can occur either deliberately or through negligence or inability, provided that such inability is not due solely to inadequate economic resources or due solely due to the existence of a handicapping condition.

Neglect is not dependent upon location. Neglect can occur while the child is at home or in an out-of-home setting.

Non-Emergency Response

(Response type)

also known as
Screen In – Non-Emergency Response

If a child abuse/neglect report meets DCF criteria for suspected abuse and/or neglect it is “screened-in” and assigned for a child protective services response to determine if there is “reasonable cause to believe” that a child has been abused and/or neglected.

“Screened-in” reports may require an immediate emergency response or a Non-Emergency Response. Non-Emergency Responses are required when there is a determination that the report does NOT pose a substantial risk of death, serious emotional or physical injury, or sexual abuse of a child.

Screening for a Non-Emergency Response is to be completed within one business day but may be extended for one additional business day in limited circumstances. The Non-Emergency Response is to begin within two days of the report and is to be completed within fifteen business days.

See the [Response](#) and [Emergency Response](#) items in this glossary for additional information.

Other Location (non-referral)

(Placement type)

Other locations, which are also sometimes called non-referral locations, include settings where a child in DCF care is living that is not a DCF paid placement location. Examples of other locations include hospitals, Department of Youth Services/other state agency locations, and more.

See the [In Placement](#) item in this glossary for additional information.

Permanency Plan

DCF strives to protect children from abuse and neglect and support young adults who are transitioning to independent living. Permanency planning involves a mix of child-centered, family-empowering casework and legal strategies to ensure that children have caring, stable, lifetime families and that safety remains the paramount concern throughout the family’s involvement with DCF.

A Permanency Plan is established for each child involved with DCF. Permanency planning begins with the goal of safely maintaining a child at home – which is also known as permanency through stabilization. Other Permanency Plans are developed and revised over time based on the child/family’s needs and circumstances.

Permanency through Adoption <i>(Permanency Plan)</i>	<p>The purpose of Permanency through Adoption is to prepare a child to become a permanent member of a lifelong family other than the child's original birth family.</p> <p>The permanency plan of Adoption does not prevent maintaining valued, lifelong connections to birth parents, siblings, kin, and other important individuals in a child's life.</p>
Permanency through Care with Kin <i>(Permanency plan)</i>	<p>The purpose of Permanency through Care with Kin is to provide the child with a committed, nurturing, and lifelong relationship in a kinship family setting. DCF defines kin as people related by blood, marriage, or adoption as well as adults to whom the child/parents ascribe the role of family based on cultural and affectional ties.</p> <p>Permanency through Care with Kin can reinforce a child's racial, ethnic, linguistic, cultural, and religious heritage and promote the continuity of familial relationships.</p>
Permanency through Guardianship <i>(Permanency plan)</i>	<p>The purpose of Permanency through Guardianship is to obtain the highest level of permanency possible for a child when reunification with their parents or adoption is not possible. The Department sponsors an individual to receive custody of a child, pursuant to MGL c. 190B, § 5-206, who assumes authority and responsibility for the care of that child.</p> <p>The permanency plan of Guardianship does not prevent maintaining valued, lifelong connections to birth parents, siblings, kin, and other important individuals in a child's life.</p>
Permanency through Permanent Living Arrangement <i>(Permanency plan)</i>	<p>The purpose of Permanency through a Permanent Living Arrangement is to establish a lifelong permanent connection, life skills training, and a stable living environment that will support a youth/young adult's development into and throughout adulthood. This permanency plan is for youth or young adults aged 16 or older whose best interests for achieving permanency would not be served through reunification, adoption, guardianship, or care with kin.</p> <p>Through this permanency plan, youth continue to achieve the highest possible level of family connection, including physical, emotional, and legal permanency. Note, this was formerly known as Permanency Through Another Planned Living Arrangement (APPLA).</p>
Permanency through Reunification <i>(Permanency plan)</i>	<p>The purpose of Permanency through Reunification of the family is to reunite a child who is in out-of-home placement with their parents/guardians. Parents/guardians are expected to maintain regular and frequent contact with their child and be involved in their child's educational, physical/mental health, and social activities.</p>

**Permanency
through
Stabilization**
(Permanency plan)

The purpose of the Permanency through Stabilization is to strengthen, support, and maintain a family's ability to provide a safe and nurturing environment for the child and to prevent out-of-home placement of the child.

Permanency through Stabilization may be the plan for children who are living at home or who require placement services for 30 calendar days or less. It may also be the plan for children who require longer placements due to the child's own developmental, medical, or behavioral needs rather than concerns about abuse or neglect by the parents/guardians.

**Probate and
Family Court**

The Probate and Family Court Department in Massachusetts has jurisdiction over family-related and probate matters such as divorce, paternity, child support, custody, parenting time, adoption, termination of parental rights, and abuse prevention. The Probate and Family Court also handles wills, estates, trusts, guardianships, conservatorships, and changes of name.

See the [Court Referral item](#) in this glossary for additional information.

Race/ethnicity
*(Child/young adult
characteristic)*

A classification for collecting and presenting data on Race and Ethnicity. DCF uses the federal reporting categories for Race including:

- American Indian/Alaskan Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

There are two federal reporting categories for Ethnicity: "Hispanic or Latino," and "Not Hispanic or Latino."

In the dashboard, Hispanic/Latinx includes children of any Race who identify as Hispanic or of Latin American origin. The other Race options in the dashboard, including Multi-racial, do not include any children/young adults who identify as Hispanic or of Latin American origin.

Note, the categories in this classification are social-political constructs and should not be interpreted as being scientific or anthropological in nature. Families may decline or choose not to provide their race and ethnicity information when asked.

Response

also known as
Child Protective
Services (CPS)
Response or
investigation

DCF reviews or "screens" all child/abuse neglect reports and decides whether a child protective services Response is needed. Responses are also called 51Bs because they are completed in accordance with [MGL c. 119, § 51 B](#). "Screened-in" reports may require an immediate emergency response or a non-emergency response.

Based on the facts gathered during the Response, the assessment of parental capacities, the results of the risk assessment tool, and clinical judgment, DCF will determine:

- A finding on each of the reported allegations as well as any conditions discovered during the Response. This includes a finding on any persons responsible.
- Whether DCF intervention is needed to safeguard child safety and well-being.

If there is "reasonable cause to believe" that a child has been abused or neglected the Response will either be supported or found to be a substantiated concern. DCF will open a new case, incorporate the finding into an already open case, refer the family for services, or determine that no additional services are required.

See the [Emergency Response](#) and [Non-Emergency Response](#) items in this glossary for additional information.

Safe Haven

(Intake type)

The [Safe Haven Act of Massachusetts](#) allows a parent to legally surrender newborn infants 7-days-old or younger at a hospital, police station, or manned fire station without facing criminal prosecution. See MGL c.119, §39½ (St. 2004, c.227; amended by St. 2007, c.86).

Screen-In

(Intake decision)

DCF reviews or "screens" all child/abuse neglect reports and decides whether a child protective services response is needed. If a child abuse/neglect report meets DCF criteria for suspected child abuse and/or neglect it is "Screened-In" and assigned for a child protective services response to determine if there is "reasonable cause to believe" that a child has been abused and/or neglected.

"Screened-In" reports may require an immediate emergency response or a non-emergency response.

See the [Emergency Response](#) and [Non-Emergency Response](#) items in this glossary for additional information.

DCF reviews or "screens" all child/abuse neglect reports and decides whether a child protective services response is needed. Reports that do not meet DCF's criteria for suspected child abuse and/or neglect are Screened-Out. Screen Outs may include a determination that:

- The report does not involve a child, or the allegations are not within the Department's mandate concerning child abuse and neglect
- There was no indication that a child has been or may have been abused or neglected or may be at risk of being abused and/or neglected by a caregiver
- The alleged perpetrator has been identified and was not a caregiver or the child's caregiver is safely protecting the child from the alleged perpetrator, unless the allegations involve sexual exploitation or human trafficking. If a report includes allegations of sexual exploitation or human trafficking the report may be screened in regardless of whether the person alleged to be responsible was a caregiver.
- The specific injury or specific situation being reported is so old that it has no bearing on the current risk to the reported child or other children
- There are no other protective concerns, and the only issue is maternal use of an appropriately prescribed medication resulting in a Substance Exposed Newborn where:
 - the only substance affecting the newborn was appropriately prescribed medication, and
 - the mother was using the medication as prescribed which can be verified by a qualified medical or other provider.

Screen-Out
(Intake decision)

See the [Screen-Out DA Referral](#) item in this glossary for additional information.

DCF reviews or "screens" all child abuse/neglect reports and decides whether a child protective services response is needed. Reports that do not meet DCF's criteria for suspected child abuse and/or neglect are Screened-Out.

Screen-Out DA Referral
(Intake decision)

If the Screened-Out report involved/may have involved a crime, DCF may notify local law enforcement and the district attorney who has the authority to file criminal charges. Reports that contain/may contain some crimes are considered mandatory referrals and must be referred to the district attorney, regardless of whether the child abuse/neglect report was screened in or out. Other reports may be referred to the district attorney on a discretionary basis.

See the [Screen-Out](#) item in this glossary for additional information.

Sexual Abuse

Any non-accidental act by a caregiver upon a child that constitutes a sexual offense under the laws of the Commonwealth or any sexual contact between a caregiver and a child for whom the caregiver is responsible.

**Sexual
Orientation**

*(Child/young adult
characteristic)*

Sexual Orientation describes patterns of sexual, romantic, and emotional attraction, and one's sense of identity based on those attractions.

**Substantiated
Concern**

(Response decision)

At the conclusion of a child protective services response, a “determination” is made. A Substantiated Concern determination or finding means that there is “reasonable cause to believe” that the child was neglected or that the actions or inactions of the parents/caregivers create the potential for abuse or neglect, but there is no immediate danger to child safety or well-being.

For responses with Substantiated Concern findings, DCF intervention is needed to safeguard child safety and well-being. DCF will open a new case or incorporate the Substantiated Concern finding into an already open case. In limited circumstances, DCF may make a finding of Substantiated Concern and determine that Department intervention is not needed.

See the [Response](#) item in this glossary for additional information.

Supported

(Response decision)

At the conclusion of a child protective services response, a “determination” is made. A Support determination or finding means that there is “reasonable cause to believe” that the child was abused and/or neglected; the actions or inactions of the parents/caregivers place the child in danger or pose substantial risk to the child's safety or well-being; or the person was responsible for the child being a victim of sexual exploitation or human trafficking.

For Responses with Supported findings, DCF intervention is needed to safeguard child safety and well-being. DCF will open a new case or incorporate the finding into an already open case.

Note: In very limited circumstances, DCF may make a finding of Support and determine that Department intervention is not necessary. This can happen, for example, if the alleged perpetrator was not a family member (e.g., babysitter or bus driver) and the parents/caregivers have taken the necessary actions to keep the child safe.

See the [Response](#) item in this glossary for additional information.

The term Unspecified is used throughout the Child Protective Services dashboard to indicate that the information is not available to show in the dashboard. This can occur because:

Unspecified

- Timing – Something may appear as Unspecified if it is too early in the process for the information to be available. For example, a child’s age may not be known by the person who reported the child abuse/neglect. Thus, a child’s age may show as Unspecified on the Intakes dashboard.
- Optional Information – Something may show as Unspecified if it is not required to be entered into DCF’s case management system. For example, as part of its commitment to providing safe, affirming, and discrimination free services, DCF requires staff to enter gender identity and sexual orientation information for children/young adults age 3 and older. This information is self-reported, and people can choose not to answer. The gender identity and sexual orientation of a child under 3 may show as Unspecified as staff are not required to enter that information.

Unsupported

(Response decision)

At the conclusion of a child protective services response, a “determination” is made. An Unsupported determination or finding means that there is not “reasonable cause to believe” that a child was abused and/or neglected and that the child’s safety or well-being is not being compromised. A response may also be Unsupported if the person believed to be responsible for the abuse or neglect was determined not to be a caregiver, unless the abuse or neglect involves sexual exploitation or human trafficking. Responses involving sexual exploitation or human trafficking may be supported whether or not the alleged perpetrator is a caregiver.

For Unsupported findings, Department intervention is not needed to safeguard child safety and well-being. Although DCF does not open a new case, the family may apply for voluntary services from the Department and/or the Department may refer the family for services in the community if needed. If there is already an open case, DCF will use the information gathered in the response to determine if there is a change in risk level to the child and if any changes are needed.

Voluntary Application

(Intake type)

Families and young adults may voluntarily apply to receive services and support from the Department of Children and Families. For example, if after completing a child protective service response DCF finds no evidence of abuse or neglect, families can request that DCF opens a voluntary case for them so they can still access services.

Young Adult

Young Adults who turn 18 in DCF care may continuing receiving services and supports from the Department of Children and Families until age 23.
