Client Safety: What Does “Line of Sight” Mean?

When caring for vulnerable clients, adult supervision is a must. Indeed, some situations demand that clients be kept directly in a “line of sight,” and regulations and training manuals frequently use this phrase. For instance, New Jersey’s Department of Children and Families, Division of Children Protection and Permanency, describes a program called Intensive Residential Treatment Services as “a highly structured non-hospital based treatment setting that brings comprehensive and specialized diagnostic and treatment services to youth and their families. The youth approved for these programs require exceptional care on a 24/7 basis in a safe environment with continuous line of sight supervision, medication management, and a concentrated individualized treatment protocol.”

In the criminal context, courts have found that a police officer’s “use of deadly force to be reasonable when a suspect moves out of the officer’s line of sight such that the officer could reasonably believe the suspect was reaching for a weapon.”

In the context of caring for vulnerable clients, what exactly does line of sight mean? Does line of sight mean a staff person must be looking at the client all the time, or does it mean a client is simply able to be seen by a staff person? The difference is not just semantic. The first requires that the client always be in the vision of a staff person. The second connotes that a staff person has an unobstructed view of the client, the client can be observed even in just the staff person’s peripheral vision, but the staff person is not necessarily constantly looking directly at the client. Thus, activities may be conducted in rooms with unobstructed glass windows or with the door to the room remaining completely open. In an outdoor setting, activities are conducted within the general vision of a staff member.

Rather than pronouncing one definition correct and the other incorrect, it is more accurate to conclude that there is a range of definitions, including the idea that a staff person must always have a general—passive—line of sight, but must also have direct—active—visual contact with a client at designated frequencies.

When I was an attorney for the Ohio Department of Youth Services, the department that operates Ohio’s juvenile prisons, we developed a clear policy for suicidal youth: When a child was a known, recently active, suicide risk, he was placed in a cell adjacent to a correction officer’s post, and, for a specified period of time, a corrections officer always watched that child.

See Client Safety on page 42
likely improve those factors for the people we serve. Most of these counties are still in the early stages of their efforts to define and employ such frameworks.

Appendix 1: Relevant Reads

- Adolescent AIDS Program: http://adolescentaids.org
  - The Deal (teen lifestyle ‘zinewith real talk about love, life and HIV/AIDS): http://adolescentaids.org/youth/deal.html
- Annie E. Casey Foundation: www.aecf.org
  - What Young People Need to Thrive: http://www.aecf.org/resources/what-young-people-need-to-thrive/
- BridgespanGroup: www.bridgespan.org
- Child Trends: www.childtrends.org

- California Foster Youth Pregnancy Prevention Institute: www.cfyppi.org
  - Convenor of key references related to pregnancy prevention among youth in foster care in CA

- Center for the Study of Social Policy: www.cssp.org
  - Expectant & Parenting Youth in Foster Care: http://www.cssp.org/reform/child-welfare/expectant-parenting-youth-in-foster-care

- Child Trends: www.childtrends.org

- Children’s Data Network: www.datanetwork.org
  - Research briefs related to pregnancy and parenting among youth in foster care in CA

- Jim Casey Youth Opportunities Initiative: www.jimcaseyyouth.org
  - Compilation of adolescent brain development & implications for youth in care

- National Center for Youth Law: www.teenhealthlaw.org
  - Legal clarification regarding youth rights: http://www.teenhealthlaw.org/minorconsent/

- Orange County Women’s Health Project/Teen Reproductive Health Task Force: www.owcwomenhealth.org
  - Teen Reproductive Health Policy Brief: https://drive.google.com/file/d/0BzP6_yQyZbh6WkF0TG02UUXxXROU/view?pli=1

- Policies
  - Los Angeles County, CA: http://policy.dcs.lacounty.gov/content/Youth_Development_Repord.htm
  - Santa Clara County, CA: http://escholarship.org/uc/item/48p3r3h1#page-1

- The National Campaign to Prevent Teen & Unplanned Pregnancy: www.thenationalcampaign.org
  - Child welfare resources for CWS staff, out-of-home caregivers, parents, judges, youth

- Call to Action: 10 Ways to Address Teen Pregnancy Prevention Among Youth in Foster Care: www.thenationalcampaign.org/resource/call-action


- Bedsider: www.bedsider.org and in Spanish at www.bedsider.org/es

- StayTeen: www.stayteen.org

Reference Notes


CLIENT SAFETY continued from page 29

Absent this known, very high-risk situation, the definition of line of sight was not as literal.

Legally, what constitutes reasonable supervision of vulnerable clients in terms of line of sight will depend upon the unique needs of each client and the articulated standards the caregiver is obliged or has opted to follow. Thus, when a caregiver has information about the characteristics and safety needs of a particular client, he or she has a duty to supervise that client accordingly. A failure to do so may result in a client’s injury or death and may constitute negligent supervision and open the caregiver to liability.

Reasonable care relates to an obligation to take suitable precautions and avoid risk. Indiana Model Jury Instruction 1109 is instructive: “The common law standard of reasonable care means being careful and using good judgment and common sense.” A subcategory of negligence, negligent supervision occurs when a caretaker fails to exercise reasonable care in monitoring a client. Like any other negligence claim, negligent supervision requires the showing of a duty, a breach of that duty, proximate cause, and actual injury. Indianapolis, Indiana attorney David B. Wilson explains: “A negligent supervision claim must focus on the client’s unique characteristics in light of the potential hazards. Even a caregiver maintaining a continuous line of sight may be liable for allowing a toddler to play next to a busy highway or a neighbor’s unfenced pool.”

Reference Notes


Daniel Pollack is a professor at the School of Social Work, Yeshiva University, in New York City. He can reached at dpollack@yu.edu, (212) 960-0836.