



By Edna Lamberty and Daniel Pollack

## On Patrol: The Need for Better Collaboration Between Front-Line Police Officers and Child Protection Workers

**911 Operator:** Sector David, are you available to handle an aided case in your sector?

**Sector David:** Sector David, on the air. Go Central.

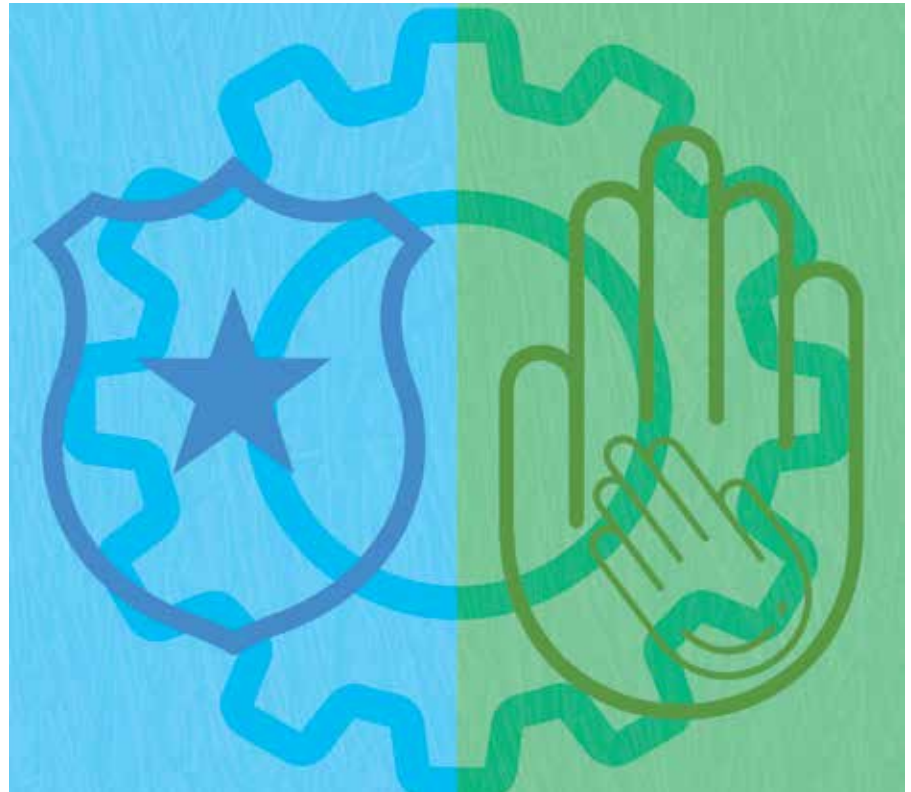
**911 Operator:** Sector David, I'm showing a 10-54 (ambulance case) in your sector. Mother states that her four-year-old son fell and feels dizzy. Mother states her son does not look well. Do you copy Sector David?

**Sector David:** 10-4 Central (acknowledge transmission). Show us responding.

The New York Police Department (NYPD) has a radio code<sup>1</sup> for child abuse cases (10-35), but this radio transmission is rarely used by Central because no parent ever calls a 911 operator to say that they have committed a crime against their own child. Evasively, they typically say the child is sick. Not until patrol officers respond to the scene and make an initial assessment will they determine that, in fact, this is really a code 10-35. *The NYPD Patrol Guide General Aided Cases, Procedure 216-01*, offers guidelines to assist police officers in defining aided cases:

"Any occurrence coming to the attention of a uniformed member of the service which requires that a person, other than a prisoner, receive medical aid or assistance because such person is:

- a. Sick or injured (except vehicle or bicycle collision).
- b. Dead (except vehicle or bicycle collision).
- c. Lost person.
- d. Mentally ill.



e. An abandoned, destitute, abused or neglected child.

f. Runaway child.

g. Adult requiring care due to arrest, hospitalization, death of parent/guardian/person responsible for care."<sup>2</sup>

Sometimes police officers can quickly determine if a child was physically abused; often they cannot. The initial contact will be with the person who called 911. The information taken for the complaint report will be given to the officers by that person—possibly the offender. If the officers suspect child abuse, unless there are visible

injuries or serious physical injuries, the officers cannot ask the child if their parent hurt them. All questions are directed to the adult. Only if injuries are apparent and probable cause exists, can an arrest be made.

There are instances when police officers, as mandated reporters, call the Statewide Central Registry to report suspected child abuse. In this case, a call must be made. This will be the first time that police officers collaborate with the Administration for Children's Services/Child Protective

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Services (ACS/CPS) while on patrol. Too often, unfortunately, collaboration ends there. Current guidelines do not exist to contact ACS/CPS to respond to the scene for child abuse cases.

Police interaction with a CPS social worker may also occur when an officer and a social worker are at the hospital. CPS will take over the case and remain there with the abused child so the officer can resume patrol—“No need to tie up a sector.” These rare instances are the few times when CPS social workers and police officers collaborate about a child abuse case when both are on the front line. Even then, this collaboration is minimal. There is no joint plan to keep the child or other children safe. There is no joint gathering of evidence at the scene. Whatever collaboration exists resembles formality and professional etiquette. It may be as superficial as an introduction in which the police officer provides her name, shield number, and precinct command unit in exchange for the social worker's name and contact information. Afterward, the

professionals go their separate ways. The necessary paperwork is completed. From the police officer's perspective, the case has been shifted to another agency. The “I'm not a social worker” mentality is pervasive. The officers follow patrol guide procedure. They do their job. Only if formally requested will the officers who worked Sector David and responded to the child abuse case make an appearance at criminal court and state their findings.

Should a child die, police officers and social workers may wind up blaming each other. Sometimes, they may adamantly highlight each other's lack of professionalism.

Departments of human services and their CPS units cannot protect children without collaboration from police and other allied agencies. Improved collaboration must be child-focused, include improved sharing of information and insights, better allocation of resources, and modifications in organizational culture. While readily acknowledging that each professional agency has its own mandate and procedural

guidelines, it is still disheartening to see to a paucity of genuine collaboration.

Collaboration should begin, not end, with a call to the State Registry or with emergency room formalities. And it should continue as long as the case is open. We need to make this happen. ■

**Reference Notes**

1. NYPD Radio Codes. (2017). <http://melsgarage.com/NYPD.htm>
2. NYPD Patrol Guide. (2017). [https://www1.nyc.gov/assets/ccrb/downloads/pdf/investigations\\_pdf/pg216-01-aided-cases.pdf](https://www1.nyc.gov/assets/ccrb/downloads/pdf/investigations_pdf/pg216-01-aided-cases.pdf)

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