I. BACKGROUND

Statewide Safety Assessment System in California

In 2004 the State convened the California Safety Assessment Workgroup, in response to the Federal Child and Family Services Review. As part of the State’s Program Improvement Plan, a comprehensive [Statewide Safety Assessment System Matrix](http://ehsdstars/Star%20Documents1/Children%20and%20Family%20Services%20Program/Safety%20Decision%20Making%20%28SDM%29/Resource%20-%20Quick%20Guides/SDMRES01-16.pdf), and corresponding [glossary](http://ehsdstars/Star%20Documents1/Children%20and%20Family%20Services%20Program/Safety%20Decision%20Making%20%28SDM%29/Resource%20-%20Quick%20Guides/SDMRES02-16.pdf) of terms, establishing uniform standards to assess safety, risk and family protective capacity was developed. The system identifies seven specific decision points when an assessment is required. They are as follows:

1) Determine Response, 2) Initial Safety Determination, 3) Placement, 4) Referral Disposition, 5) Case Planning, 6) Reunification and 7) Case Closure. Each of these decision points requires “Standard Areas for Review” that must be considered when conducting the assessment to help inform the decision process.

In 1996, California Department of Social Services (CDSS) examined several available risk tools and decision models and decided to make the SDM model available to volunteer counties. The SDM model is a general approach to decision making, but it is not a “shrink-wrapped” model that can be dropped into any jurisdiction. It had to be tailored to California.

Staff from seven California counties participated in workgroups in 1998 to help design the specific California versions of the SDM tools. They also helped design the study that led to California’s risk assessment. By 1999, California’s SDM model was ready, and seven counties implemented it that year. Additional counties joined the project during this time. The risk assessment was revalidated in 2003, leading to slight revisions. This is important to do every few years to recheck for validity. As a result of a statewide reform effort, California adopted a “statewide approach to safety” in 2005. This approach required that all counties adopt a set of decision points, and elements to consider at those decision points. While the SDM model met most of the requirements already, workgroups met to incorporate a few additional points, such as a screening tool and path decision tools.

From 2005, Contra Costa County implemented an alternative Safety Assessment process, called the Comprehensive Assessment Tool (CAT). CAT was developed by Contra Costa County along with Glenn, San Mateo, and Stanislaus counties. In 2015, Contra Costa County determined that the SDM model would be more effective for the agency and as of December 1, 2015 the county has transitioned to Structured Decision Making.

Structured Decision Making® (SDM)

The National Council on Crime and Delinquency (NCCD), Children’s Research Center’s (CRC) parent organization, was established in 1907 (just eight years after juvenile courts were formed) and began applying research to policy and practice in the fields of criminal justice, juvenile justice, and child welfare to improve outcomes.

CRC was formed in 1993 with a focus on improving outcomes for children, youth, and families by working in partnership with child-serving agencies to improve direct practice and organizational operations through models that integrate evidence-based assessments, family-centered engagement strategies, and implementation science.

The SDM system was first implemented in the state of Alaska in 1985, followed by Michigan in 1990 and then California in 1996. Work on the Alaska model provided research support for the concept of an actuarial risk assessment tool in child protection practice. When the SDM tools were developed, implemented, and evaluated in Michigan, the model was fully developed across key decision points and research was conducted on child and family outcomes. California was next to develop and integrate the SDM tools into practice, and California’s risk assessment is often used as the foundation for development of risk assessment tools in other jurisdictions.

In 2011, CRC began to encourage integration of research-based assessments with strategies for engagement and partnership with families. By 2016, it is expected that all 58 counties in California will be using these practice strategies in coordination with the SDM assessment tools.

Structured Decision Making® (SDM) model is a suite of assessment instruments that promote safety and well-being for those most at risk—from children in the foster care system to vulnerable adults. The SDM model combines research with practice strategies, offering social workers a framework for consistent decision making and agencies a way to target in-demand resources toward those who can benefit most. It assists counties in achieving the following goals:

SDM System Goals

1. Reduce the rate of subsequent abuse/neglect referrals and substantiations.
2. Reduce the severity of subsequent abuse/neglect complaints and allegations.
3. Reduce the rate of foster care placement.
4. Reduce the length of stay for children in foster care.

SDM Process Goals

1. Improve assessments of family situations to better ascertain the protection needs of children.
2. Increase consistency and accuracy in case assessment and case management among child abuse/neglect staff within a county and among counties.
3. Increase the efficiency of child protection operations by making the best use of available resources.
4. Provide management with needed data for program administration, planning, evaluation and budgeting.

Staff training on the SDM System/Model started in November 2015. Relevant existing policy will be modified to incorporate use of these tools as part of routine child welfare practice.

More information regarding the National Council on Crime & Delinquency (NCCD) and SDM can be found at <http://www.nccdglobal.org/assessment/structured-decision-making-sdm-model>

II. **REFERENCES**

State Child Welfare Services System Improvements (FY 2004-05) Report – Deliverables

Recommended [Statewide Safety Assessment System Matrix](http://ehsdstars/Star%20Documents1/Children%20and%20Family%20Services%20Program/Safety%20Decision%20Making%20%28SDM%29/Resource%20-%20Quick%20Guides/SDMRES01-16.pdf) and [glossary](http://ehsdstars/Star%20Documents1/Children%20and%20Family%20Services%20Program/Safety%20Decision%20Making%20%28SDM%29/Resource%20-%20Quick%20Guides/SDMRES02-16.pdf) of terms, April 4, 2005

NCCD, Children’s Research Center, California Structured Decision Making System, Policy and

Procedures Manual, SDM 3.0

[CDSS MPP Division](http://www.dss.cahwnet.gov/ord/PG309.htm) 31-002, 31-105, 31-125, 31-200, 31-502, 31-530

CDSS All County Letter [09-31](http://www.dss.cahwnet.gov/lettersnotices/entres/getinfo/acl/2009/09-31.pdf)

III. **POLICY**

Effective December 1, 2015, all Social Workers shall incorporate the relevant Structured Decision Making (SDM) Tools and Safety Plan in their practice and complete at the appropriate decision making/case planning point following the Children’s Research Center (CRC) and Contra Costa County, Children & Family Services’ SDM policies and procedures as outlined in this manual section.

1. Social Workers and Social Work Supervisor IIs are required to be familiar with the SDM Tools, and their corresponding definitions, in order to conduct the corresponding social work activities (i.e. referral information gathering, interviewing parents and children, conducting safety assessments, etc.). SDM Definitions and general protocols are located within the on-line [CRC SDM Policy & Procedure Manual](http://ehsdstars/Star%20Documents1/Children%20and%20Family%20Services%20Program/Safety%20Decision%20Making%20%28SDM%29/Resource%20-%20Quick%20Guides/SDMRES01-15.pdf) and within the tools themselves in WebSDM.
2. Each tool has different timelines for completion, and the tools in WebSDM cannot be back dated, so timely completion is required.
3. Supervisor approval is required of all tools within short timelines to keep the process moving forward and ensure child safety. When absent, Social Work Supervisor II’s should identify another SWS II who can review the tools in a timely manner. Social Workers can redirect their completed WebSDM Tools to the designated SWS II.
4. All, current and historic, completed tools shall be kept in [WebSDM](https://ca.sdmdata.org/Account/Login). Tools pertaining to foster placement investigations shall follow existing filing procedures, in accordance with confidentiality requirements.

Practice Note: The [WebSDM](https://ca.sdmdata.org/Account/Login) application contains all SDM Tools, Tool definitions, CRC Policy & Procedure Manual, link to contact the WebSDM Helpdesk, website tour, tutorials, and FAQs.

1. All, current and historic, completed Safety Plans shall be keyed into the CCC CWS/CMS Safety Plan Template.
2. SDM data may be incorporated into court reports without identifying actual tools. SDM Tools shall NOT be attached to, or submitted with, court report documents.

**IV. PROCEDURE**

1. **COMPLETION OF SDM TOOLS AND SAFETY PLAN**

There are specific tools which address each key decision points along the life of a child welfare case. Completion of these specific tools by the Social Worker and/or Social Work Supervisor II (SWS II) is required and explained as follows:

* 1. **SDM Hotline Tool**. The purpose of the Hotline Tool is to assess all referrals

that are created in CWS/CMS to determine whether a referral meets the statutory threshold for an in-person response or Evaluate Out; and how quickly to respond, first face-to-face contact within 24 hours or 10 days. The Social Worker receiving the referral, **Screening or After Hours Social Worker**, must complete the Hotline Tool, in WebSDM/offline (as applicable), immediately upon receipt of the call and determine the Response Decision: immediately for 24-hour response priority; within 24 hours for 10-day responses; and within three (3) working days for Evaluate Outs.

Screener must review CWS history per current protocol.

Supervisor approval of the Hotline Tool is required, including prior to closure.

**Practice Note: Safety versus risk assessment:** It is important to keep in mind the difference between safety and risk when completing the SDM Tools. Safety assessment differs from risk assessment in that safety assesses the child’s present danger of immediate/serious harm and the interventions currently needed to protect the child. In contrast, risk assessment looks at the likelihood of any future maltreatment.

* 1. **SDM Safety Assessment and SDM Substitute Care Provider (SCP) Safety**

**Assessment** (SDM Tool used specifically for out-of-home abuse investigations)**.** The purpose of the Safety Assessment is to assess whether or not the child can remain safely at home for all referrals assigned for in-person response. The **Emergency Response/After Hours Social Worker responding to the referral**, must complete the:

* 1. Safety Assessment: 1) before leaving a child in the home, or returning a

child to the home during the investigation, following the initial face-to-face contact with all child victims; or

2) for a child who has already been protectively placed by law enforcement or other means, and for whom no safety assessment has been completed, on any open referral; or

3) cases in which changing circumstances require safety assessment due to (also includes **Court, IFS, Continuing or Permanency and Transitions/Adoptions Social Workers)**:

* + - 1. Change in family circumstances
			2. Change in information known about the family
			3. Change in the ability of safety interventions to mitigate safety threats

The Safety Assessment must be completed, in WebSDM, within two (2) working days of the first contact.

**Practice Note:** If a Safety Plan was initiated, there must be an updated Safety Assessment documenting that the safety threats have been resolved. If safety threats remain unresolved, a case should be opened (see Safety Plan section).

* 1. SCP Safety Assessment (SDM Tool used specifically for out-of-home

abuse investigations): on all investigations of alleged abuse/neglect by

the SCP, including the following:

* + - 1. Licensed foster homes
			2. NREFM/Approved relative homes
			3. FFA
			4. Small family homes
			5. Adoptive parents if the adoption has not yet been finalized
			6. Legal guardians, when a dependency case is still open

**Excludes** group homes, institutions, residential treatment facilities, Probate Code §1513 (a) assessments (requests for assessment of proposed nonrelative legal guardianship), and AB908 Minor Parent Services assessments.

The SCP Safety Assessment must be done as part of the investigation, prior to leaving the child in the home and documented within two (2) working days of the first face-to-face contact with the alleged child victim.

The SCP Safety Assessment guides the decision to remove a foster child from the SCP’s home, based on whether threats to safety are present in the household and whether interventions are available and appropriate to maintain placement.

The Emergency Response/After Hours Social Worker responding to the referral must review screening assessment and other relevant documents (criminal history, police/medical reports, etc.) if available. Supervisor approval required after the Referral Disposition is completed.

Supervisor approval of the Safety Assessment/SCP Safety Assessment is required.

**SAFETY PLANNING**

Upon completion of a **SDM Safety Assessment Tool**, if safety threats have been identified, a child may remain in the home if a **Safety Plan** is developed with the family and adequately addresses all of the assessed/identified safety threats. (See SDM Safety Assessment Tool, Section 3: In-Home Protective Interventions).

The **Emergency Response/After Hours, Court, IFS, Continuing or Permanency and Transitions/Adoptions Social Worker** will complete the **Safety Plan, Contra Costa County Children & Family Services** (See Attachment IV) before leaving a child in the home where safety threats have been identified. The Social Worker will get Supervisor approval via the telephone or in person before leaving the child in the home.

Safety Plans shall be created with the S.M.A.R.T. goals in mind (**S**pecific, **M**easurable, **A**ttainable, **R**ealistic, and **T**imely). Detailed information for each planned safety intervention and an explanation how safety threats will be mitigated must be included in the Safety Plan: What needs to happen to keep the child safe? What will the family do to keep the child safe? What will other people do to keep the child safe? The Safety Plan will include written statements of actions or behaviors, to be taken by a responsible party, that will keep the child safe in the current conditions. The Safety Plan will also include the role of each participant, information that describes how the Safety Plan will be monitored, and the timeframe in which each intervention will remain in place.

Social Workers should utilize the most appropriate method of engagement, which may include a strengths-based and respectful approach without losing the focus on safety. Families must agree to and sign the Safety Plan in order for the plan to be effective and ensure child safety. The family should be left with a copy of the plan.

The Supervisor must approve and sign the Safety Plan. The Safety Plan shall be keyed into the CCC CWS/CMS Safety Plan Template.

If the safety threats have not resolved by the end of the investigation, the Safety Plan will be provided to the ongoing Social Worker and all remaining interventions will be incorporated into the initial/updated Case Plan.

* 1. **SDM Family Risk Assessment**. The purpose of the Family Risk Assessment is

to identify families with low, moderate, high, or very high probabilities of future abuse or neglect. The tool does not predict recurrence but simply assesses whether a family is more or less likely to have another incident without child welfare intervention. The Family Risk Assessment is required for all referrals, including substantiated, inconclusive, unfounded and Probate Code §1513 (b) (formerly “c”) assessments (requests for assessment of allegation of parental abuse for proposed legal guardianship placements), and new assigned referrals on open cases. The Family Risk Assessment will NOT be completed on PC 1513 (a) assessments, social worker assists and courtesy requests/referrals where the case is open, or belongs to, another County or State.

The Family Risk Assessment must be completed, in WebSDM, after the Safety Assessment has been completed and the **Emergency Response Social Worker/After Hours Social Worker, as applicable** has reached a conclusion regarding the allegation AND prior to the decision to promote a case or close without continuing services. This is no later than 30 days from the first face-to-face contact.

For children in out-of-home care with a “return home” goal - if a second parent living in a separate household will receive child welfare services, the **Emergency Response Social Worker/After Hours Social Worker, as applicable** will complete, offline and entered into WebSDM once the referral is promoted to a case, a baseline Family Risk Assessment within 30 days of identifying that parent.

**Practice Note:** For referrals promoted to case - The ER/AH Social Worker will remain as Secondary in CWS/CMS in order for the ER/AH SW to enter the second Risk Assessment into WebSDM. For referrals not promoted to case (i.e. closed) – the ER/AH SW will import the second Risk Assessment into CWS/CMS.

The Family Risk Assessment is completed based on conditions that exist at the time the incident is reported and investigated as well as the prior history of the family.

* Only one household can be assessed on the Family Risk Assessment Tool.
* Always assess the household in which the child abuse/neglect incident is alleged. If a child is a member of two households and there are allegations on both households, complete a separate Family Risk Assessment on both households.
* Complete a second Family Risk Assessment for non-custodial parents who will receive reunification services.

Supervisor approval of the Family Risk Assessment is required.

* 1. **SDM Family Strengths and Needs Assessment (FSNA)/Child Strengths and**

**Needs Assessment (CSNA).** The purpose of the FSNA/CSNA is to evaluate the presenting strengths and barriers that caregivers encounter when trying to provide safety, permanency, and well-being for their children. The FSNA/CSNA ensures that all social workers consider each family’s/child’s strengths and needs objectively, supports collaborative assessment for development of case plans, and with periodic reassessments permits the family/child, social workers, and their supervisors to assess changes in family/child functioning over time during the case plan service period.

The FSNA/CSNA is completed on every referral promoted to a case and must be completed by **Court, IFS, Continuing and Permanency and Transitions (CRPU and ILSP)/Adoptions Social Workers** responsible for developing the initial and updated Case Plans with the family/child. The FSNA/CSNA will be completed, in WebSDM, prior to the initial Case Plan/within 30 calendar days from the first face-to-face contact, and prior to each updated Case Plan (i.e. Disposition, 6-month Status Review, reunification, 366.26, PP review, and NMD review).

**Practice Note:** The CSNA portion of the FSNA Tool can be completed alone, in WebSDM, when parent(s)/legal guardian(s) are no longer part of the case plan (e.g. By-pass or No Services cases, PP, NMD, Adoptions, etc.).

**CASE PLANNING**

This FSNA/CSNA is used with parent(s)/legal guardian(s) and children/youth/NMD to collaboratively identify critical family needs that should be addressed in the Case Plan. The FSNA/CSNA identifies the **priority** needs of caregivers and all needs of children that must be addressed in the Case Plan. Goals, objectives, and interventions in a Case Plan should relate to one or more of the priority needs. It also identifies a family’s priority areas of strength, which should be incorporated into the Case Plan to the greatest extent possible, as a means to address identified needs.

Social Workers should familiarize themselves with the eleven (11) *Caregiver Domains* and the twelve (12) *Child/Youth/Young Adult Domains* of the FSNA/CSNA and the corresponding definitions. Social Workers will notice that the domains are areas that they began to look at in the assessments prior to the FSNA/CSNA, with the difference that the responses to these items lead to specific case planning goals and objectives.

Once a Social Worker is familiar with the domains that must be assessed to complete the FSNA/CSNA, the Social Worker should conduct his/her family assessment as he/she normally would—using good social work practice to collect information from the child, caregiver, and/or collateral sources.

The Case Plan is to be written with behaviorally specific goals and objectives that consider and incorporate the parent(s)/legal guardian(s)/caregiver(s)’s priority strengths in addressing the parent(s)/legal guardian(s) /caregiver(s)’s priority needs. The Case Plan is also to include service referrals that address the child/youth/NMD’s needs and take into consideration the child/youth/NMD’s strengths. It is the parent(s)/legal guardian(s) /caregiver(s)’s responsibility to ensure that the child/youth/NMD’s needs are met through appropriate service provision. If a child/youth/NMD is in protective placement, and the parent(s)/legal guardian(s) /caregiver(s) is unable to meet the child/youth/NMD’s needs, the Bureau must meet the child/youth/NMD’s needs. Case Plan objectives should be behaviorally specific and measurable. If there is a Safety Plan in place, any continuing safety intervention requirements should now be incorporated into the Case Plan.

Supervisor approval of the FSNA/CSNA is required.

* 1. **SDM Reunification Reassessment.** The purpose of the Reunification

Reassessment is to help assess if the child can be returned home to the removal household\* or to another household with a legal right to placement (non-removal household), if reunification efforts should continue, or if reunification services should be terminated and an alternative permanency goal should be implemented. The **Court (as applicable), Continuing or Permanency and Transitions/Adoptions Social Worker** must complete the Reunification Reassessment for all ongoing cases with at least one child in out-of-home care with the goal of return home. The Reunification Reassessment must be completed, in WebSDM, prior to each Disposition (as applicable), Status Review Hearing and/or per Division 31 requirements of at least once every six months AND no more than 65 calendar days prior to completing the updated Case Plan.

* Removal household is that household from which the child was removed, or, if due to joint custody that designation is unclear, then the household where the most serious maltreatment occurred. Non-removal households are those households other than the removal household with legal rights to the child (father’s home, mother’s home).

Supervisor approval of the Reunification Reassessment is required.

* 1. **SDM Family Risk Reassessment for In-Home Cases.** The purpose of the

Family Risk Reassessment is to help assess if risk has been reduced sufficiently to allow a case to be closed, or whether the risk level remains high/very high and services should continue. The Family Risk Reassessment combines items from the original Risk Assessment with additional items that evaluate a family’s progress toward case plan goals. The **IFS, Continuing or Permanency and Transitions/Adoptions Social Worker** must complete the Family Risk Reassessment for all open cases in which all children remain in the home, or cases in which all children have been returned home and family maintenance services will be provided. The Family Risk Reassessment must be completed, in WebSDM, prior to each Division 31 required review of at least once every six months AND either 1) for voluntary cases (IFS), no more than 30 calendar days prior to completing the updated Case Plan or recommending Closure; or 2) for Court involved cases, no more than 65 calendar days prior to completing the updated Case Plan or recommending Closure.

Change of Circumstance Related to Safety

For open cases in which changing circumstances prompt the completion of a new/updated **Safety Assessment**, the safety assessment process is completed immediately. The **Court, IFS, Continuing or Permanency and Transitions/Adoptions Social Worker** must complete the **SDM Safety Assessment**, in WebSDM,within two (2) working days of the new/updated **Safety Assessment**.

Supervisor approval of the Family Risk Reassessment for In-Home Cases is required.

SDM Tools shall be completed in WebSDM following the completion timelines (**SDM Tools cannot be backdated**).

**B. Staff Responsibilities:**

 In conjunction with existing policies and procedures, Social Workers and SWS IIs shall comply with the following SDM procedures:

1. **Screening Unit Responsibilities:**

 The Screening Social Worker will:

* + - * 1. Gather information from the Reporting Party utilizing the CCC Referral

 Information Document (RID).

i. If an immediate response is required where time is of the essence (i.e. officer waiting) staff may need to collect only the essential information in order to give priority to the response requirements. Such a circumstance will require an override due to an officer requesting an immediate response from an Emergency Response Social Worker.

* + - * 1. Review the information gathered from the Reporting Party, the CCC RID,

as well as CWS history and other pertinent information, to complete the SDM Hotline Tool.

i. If an immediate response is required (such as an officer requesting a Social Worker response immediately), and there is not enough information available from the Reporting Party, the Screening Social Worker will collect as much essential information as possible using the CCC Referral Information Document.  This document will then be forwarded to the Emergency Response SWS II or After Hours SWS II.  The Social Worker responding to this situation will then be responsible for gathering the information necessary to complete the CCC Referral Information Document, and forward this document back to the Screening Social Worker.

ii. Upon receipt of the returned and completed CCC Referral Information Document, enter the additional info into CWS/CMS.

* 1. Complete the SDM Hotline Tool immediately upon receipt of the call and determine the Response Decision: immediately for 24-hour response priority; within 24 hours for 10-day responses; and within three (3) working days for Evaluate Outs.
1. Discuss discretionary overrides with the Screening SWS II to ensure sufficient information gathered from the Reporting Party regarding behaviors, concrete parental/caregiver action or inaction, the need for any follow up questions/information gathering, etc.
2. Discuss safety considerations related to the discretionary override with the Screening SWS II.
	1. For referrals received from the After Hours Program, enter the After Hours Social Worker’s offline SDM Hotline, Safety and Risk Assessment Tools (as applicable) into WebSDM.
	2. Obtain Supervisor approval as appropriate. All SDM Hotline Tools, completed by Screening and After Hours Social Workers, will be submitted to the Screening SWS II for approval. SDM Safety and Risk Assessment Tools (as applicable), completed by After Hours Social Workers, will be submitted to the After Hours Program SWS II.
	3. Follow existing procedure to process the referral.

 The Screening SWS II will:

* + 1. Review the Hotline Tools, in WebSDM, prior to approving and documenting their approval of the referral in CWS/CMS.
1. Discuss discretionary overrides with the Screening Social Worker to ensure sufficient information gathered from the Reporting Party regarding behaviors, concrete parental/caregiver action or inaction, the need for any follow up questions/information gathering, etc.
2. Discuss safety considerations related to the discretionary override with the Screening Social Worker.
	* 1. Document approval of the tool/agreement with response recommendation in the comments box by using the "Action" drop down menu in CWS/CMS and selecting "Determine Response". Ensure that a rationale is provided for overrides.
		2. If necessary return the referral packet to the Social Worker for any modifications and review again after changes have been made. Repeat responsibilities a. and b. above. The SWS II may also choose "requires modification" in the approval drop down menu for "Determine Response" and alert the Social Worker of changes needed.
	1. Ensure Screening Social Workers are entering the After Hours Social Worker’s offline SDM Hotline, Safety and Risk Assessment Tools (as applicable) into WebSDM.
	2. Review and approve all Hotline Tools, completed by Screening and After Hours Social Workers, submitted each day before 4:00 pm, by the end of the business day. All Hotline Tools submitted after 4:00 pm will be given priority for approval the next business day. All Hotline Tools completed on Saturdays, Sundays and Holidays will be reviewed and approved by the end of the next business day.

2. **Emergency Response Unit Responsibilities:**

 The Emergency Response Social Worker will:

1. Review the Emergency Response Document and Screener Narrative.

Gather and review other relevant documents (i.e. criminal history, police/medical reports, etc.), and make collateral contacts as appropriate.

1. Discuss discretionary overrides, and related safety considerations, to downgrade the response priority or evaluate out with the ER SWS II and District Division Manager.
2. Document in CWS/CMS the discretionary override justification and approval.
3. Initiate investigation per current protocol. Make concerted efforts to see

and interview all family members within the required response time.

1. Review SDM Safety Assessment and Risk Assessment Tool questions

and definitions prior to interviews to ensure familiarity with areas of review.

1. Conduct a safety assessment, per existing investigation procedures and

reflecting upon the components of the SDM Safety Assessment Tool, during the investigation/in-person face-to-face contact, as its purpose is to determine if the child can be left safely in the home.

Practice Note: If danger appears to be present, consider the child in danger, consult SWS II and proceed with safety planning. Contact will need to be made with the parent(s)/legal guardian(s) to know if they are able and willing to participate in effective safety planning. If the information gathered does not meet the threshold for a danger item, complete the safety assessment based on the information known. The Social Worker and SWS II should make a plan to gather additional information and complete a review/update safety assessment as appropriate.

1. Complete the SDM Safety Assessment Tool within 48 hours of the first

face-to-face contact with the victim child.

Practice Note: It is not necessary to have interviewed all parties related to the referral at this point; complete the tool with the information gathered/known at this point. The Social Worker and SWS II should make a plan to interview all parties and complete a review/update SDM Safety Assessment Tool as appropriate.

1. If a Safety Plan is appropriate (i.e. identified safety threat(s) mitigated by agreed upon Safety Plan), consult SWS II, develop, complete and sign the Safety Plan with the family prior to leaving the child in the home.
2. If the signed Safety Plan is insufficient in mitigating the safety threats, then:
3. Consult with the SWS II to make the necessary revision(s).
4. Meet with the family to review and discuss needed revision(s) and re-sign the revised Safety Plan upon agreement.
5. Provide family with a copy of the Safety Plan.
6. For all substantiated, inconclusive, and unfounded referrals, the Social

Worker must complete the SDM Risk Assessment after the safety assessment has been completed and the Social Worker has reached a conclusion regarding the allegation AND prior to the decision to promote to a case or close the referral without services. This is no later than 30 days from the first face-to-face contact.

1. If a second parent living in a separate household is identified, and there are allegations in both households, complete a baseline SDM Risk Assessment within 30 days of identifying that parent. This SDM Risk Assessment must be completed offline and entered into WebSDM once the referral is promoted to a case.

**Practice Note:** For referrals promoted to case - The ER/AH Social Worker will remain as Secondary in CWS/CMS in order for the ER/AH SW to enter the second Risk Assessment into WebSDM. For referrals not promoted to case (i.e. closed) – the ER/AH SW will import the second Risk Assessment into CWS/CMS.

1. If a second parent living in a separate household is identified, and there are allegations in both households, complete a baseline SDM Risk Assessment prior to referral closure for that identified parent. This SDM Risk Assessment must be completed offline and documented in the referral record prior to referral closure.

Practice Note: The SDM Risk Assessment identifies the level of risk of future maltreatment and the risk level guides the decision to close a referral or promote a referral. Thus, the Social Worker should discuss the risk assessment with the Supervisor before promoting or closing the referral.

1. Obtain supervisor approval.

 The Emergency Response SWS II will:

1. Ensure the Emergency Response Social Worker is reviewing the Emergency Response Document and Screener Narrative and gathering and reviewing other relevant documents (i.e. criminal history, police/medical reports, etc.) as appropriate.
2. Discuss discretionary overrides, and related safety considerations, to downgrade the response priority or evaluate out with the ER Social Worker and District Division Manager.
3. Document in CWS/CMS the discretionary override justification and approval.
4. Be available to provide consultation to the Social Worker who is completing the Safety Plan with the family.
5. Review the Safety Plan completed by the family and the Social Worker immediately by phone before the Social Worker leaves the child in the home to evaluate whether safety threats are being mitigated by the agreed upon Safety Plan.
6. If a Safety Plan is required because a safety threat was identified, the SWS II must review the documentation and verify that a Safety Plan was completed by the Social Worker within 24 - 48 hours.
7. Sign the Safety Plan documenting approval.
8. If the signed Safety Plan is insufficient in mitigating the safety threats then:
9. Consult with the Social Worker to make the necessary revision(s).
10. Ensure the Social Worker meets with the family to review and

discuss needed revision(s) and re-sign the revised Safety Plan upon agreement.

g. Review and discuss the completed safety assessment with the Social Worker prior to the Social Worker deciding to promote or close the referral.

h. Review the Safety Assessment and Risk Assessment Tools in WebSDM with the Social Worker during consultation about the referral to determine the consistency and accuracy of the completed SDM Safety and Risk Assessments.

i. Enter any comments in Section 4: Comments when applicable. If the safety decision is different from the SDM recommended decision then the SWS II must document their approval in this box.

j. Enter any comments in Section 3: Scoring and Overrides when applicable. Ensure that evidence and rationale for overrides are provided by the Social Worker and document approval of the override.

k. Approve the completed SDM Safety Assessment, in WebSDM, within 24 hours of submission for approval.

l. Approve the completed SDM Risk Assessment, in WebSDM, within 48 business hours of submission for approval.

3. **After Hours Staff Responsibilities:**

The After Hours Social Worker will:

a. Review SDM Hotline, Safety and Risk Assessment Tool questions and definitions prior to interviews to ensure familiarity with areas of review.

b. Utilize the SDM Hotline Tool, and the CCC Referral Information Document (RID), to guide interview questions and information gathering from the Reporting Party.

**PRACTICE** NOTE: If an immediate response is required where time is of the essence (i.e. officer waiting) staff may need to collect only the essential information in order to give priority to the response requirements. Such a circumstance will require an override due to an officer requesting an immediate response from an Emergency Response Social Worker.

c. Complete the offline SDM Hotline Tool for each Referral taken.

1. Discuss discretionary overrides with the After Hours SWS II to ensure sufficient information gathered from the Reporting Party regarding behaviors, concrete parental/caregiver action or inaction, the need for any follow up questions/information gathering, etc.
2. Discuss safety considerations related to the discretionary override with the After Hours SWS II.

 The following examples include, but are not limited to, types of after-hours calls the SDM Hotline Tool would NOT be completed:

1. Screening has completed the SDM Hotline Tool for an immediate in-person response (i.e. officer waiting).
2. Social Worker contact (child requiring placement, AWOL, runaway, etc.).
3. Social Worker consults.
4. Social Worker courtesy assists.

d. Complete the initial SDM Safety Assessment Tool after face-to-face contact/investigation, when applicable (e.g. when a child(ren) has been seen and a decision to remove a child(ren) from the home or leave a child(ren) in the home has been made. See Safety Assessment section).

1. If a Safety Plan is appropriate (i.e. identified safety threat(s) mitigated by agreed upon Safety Plan), consult Social Work Supervisor II, develop, complete and sign the Safety Plan with the family prior to leaving the child in the home.

Practice Note: The After Hours Social Worker must ensure they have hard copies of Safety Plans.

1. If the signed Safety Plan becomes insufficient in mitigating the safety threats then:
2. Consult with the Social Work Supervisor II to make the necessary revision(s).
3. Meet with the family to review and discuss needed revision(s) and re-sign the revised Safety Plan upon agreement.

g. Provide family with copy of Safety Plan.

h. As applicable, for all substantiated, inconclusive, and unfounded referrals, the After Hours Social Worker must complete the SDM Risk Assessment after the safety assessment has been completed and the Social Worker has reached a conclusion regarding the allegation AND prior to the decision to promote to a case or close the referral without services. This is no later than 30 days from the first face-to-face contact.

1. If a second parent living in a separate household is identified, and there are allegations in both households, complete a baseline SDM Risk Assessment within 30 days of identifying that parent. This SDM Risk Assessment must be completed offline and entered into WebSDM once the referral is promoted to a case.
2. If a second parent living in a separate household is identified, and there are allegations in both households, complete a baseline SDM Risk Assessment prior to referral closure for that identified parent. This SDM Risk Assessment must be completed offline and documented in the referral record prior to referral closure.

Practice Note: The SDM Risk Assessment identifies the level of risk of future maltreatment and the risk level guides the decision to close a referral or promote a referral. Thus, the Social Worker should discuss the risk assessment with the Supervisor before promoting or closing the referral.

i. Provide electronic copies of the completed offline tools to the Screening Unit.

The After Hours SWS II will:

* 1. Be available to provide consultation to the After Hours Social Worker who is completing the offline SDM Hotline, Safety Assessment and Risk Assessment (as applicable) Tools.
1. Discuss Hotline Tool discretionary overrides with the After Hours Social Worker to ensure sufficient information gathered from the Reporting Party regarding behaviors, concrete parental/caregiver action or inaction, the need for any follow up questions/information gathering, etc.
2. Discuss safety considerations related to the Hotline Tool discretionary override with the Screening Social Worker.
	1. Review the Safety Assessment and Risk Assessment (as applicable) Tools with the Social Worker during consultation about the referral to determine the consistency and accuracy of the completed SDM Safety and Risk Assessments.
	2. Enter any comments in Section 4: Comments when applicable. If the safety decision is different from the SDM recommended decision then the SWS II must document their approval in this box.
	3. Enter any comments in Section 3: Scoring and Overrides when applicable. Ensure that evidence and rationale for overrides are provided by the Social Worker and document approval of the override.
	4. The After Hours Program SWS II will approve the completed SDM Safety Assessment, in WebSDM, within 24 hours of submission for approval.
	5. The After Hours Program SWS II will approve the completed SDM Risk Assessment (as applicable), in WebSDM, within 48 business hours of submission for approval.
	6. Be available to provide consultation to the Social Worker who is completing the Safety Plan with the family.
	7. Review the Safety Plan completed by the family and the Social Worker immediately by phone before the Social Worker leaves the child in the home to evaluate whether safety threats are being mitigated by the agreed upon Safety Plan.
	8. If a Safety Plan is required because a safety threat was identified, the SWS II must review the documentation and verify that a Safety Plan was completed by the Social Worker within 24 - 48 hours.
	9. Sign the Safety Plan documenting approval.
	10. If the signed Safety Plan is insufficient in mitigating the safety threats then:
3. Consult with the Social Worker to make the necessary revision(s).
4. Ensure the Social Worker meets with the family to review and

discuss needed revision(s) and re-sign the revised Safety Plan upon agreement.

1. **Out-of-Home Abuse Investigator/Emergency Response Unit Responsibilities:**

 The Out-of-Home Abuse Investigator/Emergency Response Social Worker will:

1. Initiate investigation per current protocol. Make concerted efforts to see

and interview all family members within the required response time.

1. Review SDM SCP Safety Assessment Tool questions and definitions prior

to interviews to ensure familiarity with areas of review.

1. Conduct a safety assessment, per existing investigation procedures and

reflecting upon the components of the SDM SCP Safety Assessment Tool, during the investigation/in-person face-to-face contact, as its purpose is to determine if the child can be left safely in the home.

Practice Note: If danger appears to be present, consider the child in danger, consult SWS II and proceed with safety planning. Contact will need to be made with the SCPs to know if they are able and willing to participate in effective safety planning. If the information gathered does not meet the threshold for a danger item, complete the safety assessment based on the information known. The Social Worker and SWS II should make a plan to gather additional information and complete a review/update safety assessment as appropriate.

1. Complete the SDM SCP Safety Assessment Tool as part of the

investigation, prior to leaving the child in the home and documented within two (2) working days of the first face-to-face contact with the alleged child victim.

1. If a Safety Plan is developed, leave a copy with the family.

1. Send a copy of the Safety Plan to the Licensing Unit.
2. For AB908 Minor Parent Services assessments, initiate investigation per current protocol.
3. Complete the SDM Safety Assessment Tool within 48 hours of the first

face-to-face contact with the victim child.

Practice Note: It is not necessary to have interviewed all parties related to the referral at this point; complete the tool with the information gathered/known at this point. The Social Worker and SWS II should make a plan to interview all parties and complete a review/update SDM Safety Assessment Tool as appropriate.

1. If a Safety Plan is appropriate (i.e. identified safety threat(s) mitigated by agreed upon Safety Plan), consult SWS II, develop, complete and sign the Safety Plan with the family prior to leaving the child in the home.
2. If the signed Safety Plan is insufficient in mitigating the safety threats, then:
3. Consult with the SWS II to make the necessary revision(s).
4. Meet with the family to review and discuss needed revision(s) and re-sign the revised Safety Plan upon agreement.
5. Provide family with a copy of the Safety Plan.

 The Out-of-Home Abuse Investigator/Emergency Response SWS II will:

* + 1. Review the SDM SCP Safety Assessment Tool in WebSDM with the Social Worker during consultation about the referral to determine the consistency and accuracy of the completed SDM SCP Safety Assessment.
		2. If a Safety Plan is required because a safety threat was identified, the SWS II must verify that a Safety Plan was completed by the Social Worker within 24 hours.
		3. Enter any comments in Section 3: Comments when applicable. If safety decision is different from SDM recommended decision then the SWS II must document their approval in this box.
		4. Approve the completed SDM SCP Safety Assessment within 24 hours of submission for approval.
		5. Ensure that a copy of the Safety Plan is sent to the Licensing Unit.

5. **Intensive Family Services (IFS, formerly VFM/VFR) Unit Responsibilities:**

The IFS Social Worker will:

* 1. Review the eleven (11) *Caregiver Domains* and the twelve (12)

*Child/Youth/Young Adult Domains* prior to meeting with the family or youth.

* 1. Conduct interviews and FSNA assessment.
	2. Complete the SDM Family Strengths and Needs Assessment (FSNA) Tool, in collaboration with the family, prior to creating and updating the Case Plan.
	3. Complete the SDM Family Risk Reassessment for In-Home Cases Tool prior to each review AND no more than 30 calendar days prior to completing the updated Case Plan or recommending closure.
	4. For cases in which changing circumstances prompt the completion of a

new/updated safety assessment, complete the SDM Safety Assessment Tool, in WebSDM, and Safety Plan, in CWS/CMS, within two working days of the safety assessment. Consult SWS II, develop, complete and sign the Safety Plan with the family prior to leaving the child in the home.

* 1. If the signed Safety Plan is insufficient in mitigating the safety threats,

then:

1. Consult with the SWS II to make the necessary revision(s).
2. Meet with the family to review and discuss needed revision(s) and re-sign the revised Safety Plan upon agreement.

	1. Provide family with a copy of the Safety Plan.
	2. Complete the SDM Safety Assessment Tool prior to recommending

closure.

* 1. Obtain Supervisor approval as appropriate.

 The IFS SWS II will:

* + 1. Review the SDM FSNA Tool, in WebSDM, with the Social Worker during consultation and review of the Case Plan to determine the consistency and accuracy of the completed SDM FSNA and Case Plan. Compare assessment to previous assessments and ensure the priority needs are being addressed in the Case Plan and lesser priority needs are not. Ensure no safety issues or serious needs have been overlooked or omitted.
		2. Enter any comments in Section 5: Comments when applicable.
		3. Approve the completed SDM FSNA within 48 hours of submission for approval.
		4. Ensure that evidence and rational is provided for any overrides when case recommendation is staffed. Document consultation with the Social Worker and approval of the override.
		5. Discuss Family Risk Reassessments for In-Home Cases with Social Worker before a case decision has been made. Utilize Dispo Review protocols, when applicable, to get the Bureau’s approval for case closures. Review and approve the Family Risk Reassessments within 48 business hours of submission for approval.
		6. Be available to provide consultation with the Social Worker who is completing the Safety Plan with the family.
		7. Review the Safety Plan completed by the family and the Social Worker, immediately by phone, before the Social Worker leaves the child in the home to evaluate whether safety threats are being mitigated by the agreed upon Safety Plan.
		8. If a Safety Plan is required because a safety threat was identified, the SWS II must review the documentation and verify that a Safety Plan was completed by the Social Worker within 24 - 48 hours.
		9. Sign the Safety Plan documenting approval.
		10. If the signed Safety Plan is insufficient in mitigating the safety threats then:
1. Consult with the Social Worker to make the necessary revision(s).
2. Ensure the Social Worker meets with the family to review and discuss needed revision(s) and re-sign the revised Safety Plan upon agreement.

	* 1. Review the Safety Assessment Tool, in WebSDM, with the Social Worker during consultation about the case to determine the consistency and accuracy of the completed SDM Safety Assessments.
		2. Enter any comments in Section 4: Comments when applicable. If the safety decision is different from the SDM recommended decision then the SWS II must document their approval in this box.
		3. Approve the completed SDM Safety Assessment within 24 hours of submission for approval.

6. **Court Social Worker Responsibilities:**

The Court Social Worker will:

* 1. Review the eleven (11) *Caregiver Domains* and the twelve (12)

*Child/Youth/Young Adult Domains* prior to meeting with the family, youth or NMD.

* 1. Conduct interviews and FSNA/CSNA assessments.
	2. Complete the SDM Family Strengths and Needs Assessment (FSNA) Tool

as follows:

i. Within thirty calendar days of the in-person investigation (i.e. first

face-to-face contact) or initial removal, or by the date of the Disposition Hearing, whichever comes first.

 ii. At Case Plan update (i.e. Disposition).

1. Prior to updating the Case Plan, the FSNA must be completed in

collaboration with the family.

1. For cases in which changing circumstances prompt the completion of a

new/updated safety assessment, complete the SDM Safety Assessment Tool, in WebSDM, and Safety Plan, in CWS/CMS, within two (2) working days of the safety assessment. Consult SWS II, develop, complete and sign the Safety Plan with the family prior to leaving the child in the home.

1. If the signed Safety Plan is insufficient in mitigating the safety threats,

then:

1. Consult with the SWS II to make the necessary revision(s).
2. Meet with the family to review and discuss needed revision(s) and re-sign the revised Safety Plan upon agreement.
3. Provide family with a copy of the Safety Plan.
4. If recommending return home **prior** to developing the initial Case Plan,

conduct an updated safety assessment and complete the SDM Safety Assessment Tool, in WebSDM, and Safety Plan (if applicable), in CWS/CMS, within two (2) working days of the safety assessment AND prior to completing the initial Case Plan.

1. If recommending return home, consult SWS II to determine the

appropriateness of completing the SDM Reunification Reassessment

prior to recommending return home AND prior to completing the updated Case Plan.

Practice Note: An updated safety assessment must be completed and the Social Worker and SWS II should consider the amount of time between the child’s detention/placement out-of-home and Disposition Hearing and the parent(s) progress/compliance with the Case Plan when determining if a SDM Reunification Reassessment will be completed.

1. If transferring to IFS **prior** to developing the initial Case Plan, conduct an

updated safety assessment and complete the SDM Safety Assessment Tool, in WebSDM, and Safety Plan (if applicable), in CWS/CMS, within two (2) working days of the safety assessment AND prior to completing the initial Case Plan.

1. If transferring to IFS, complete the SDM Safety Assessment, Safety Plan

(if applicable) and Family Risk Reassessment for In-Home Cases.

1. If recommending closure, complete the SDM Safety and Risk

Reassessment Tools prior to recommending closure.

1. Obtain supervisor approval as appropriate.

 The Court SWS II will:

* + 1. Review the SDM FSNA Tool, in WebSDM, with the Social Worker during consultation and review of the Case Plan to determine the consistency and accuracy of the completed SDM FSNA and Case Plan. Compare assessments to previous assessment and ensure the priority needs are being addressed in the Case Plan and lesser priority needs are not. Ensure no safety issues have been overlooked or omitted.
		2. Enter any comments in Section 5: Comments when applicable.
		3. Approve the completed SDM FSNA within 48 hours of submission for approval.
		4. Ensure that evidence and rational is provided for any overrides when court report recommendation is staffed. Document consultation with the Social Worker and approval of the override.
		5. Be available to provide consultation to the Social Worker who is completing the Safety Plan with the family.
		6. Review the Safety Plan completed by the family and the Social Worker, immediately by phone, before the Social Worker leaves the child in the home to evaluate whether safety threats are being mitigated by the agreed upon Safety Plan.
		7. If a Safety Plan is required because a safety threat was identified, the SWS II must review the documentation and verify that a Safety Plan was completed by the Social Worker within 24 - 48 hours.
		8. Sign the Safety Plan documenting approval.
		9. If the signed Safety Plan is insufficient in mitigating the safety threats then:
1. Consult with the Social Worker to make the necessary revision(s).
2. Ensure the Social Worker meets with the family to review and discuss needed revision(s) and re-sign the revised Safety Plan upon agreement.

	* 1. Discuss Reunification Reassessments with Social Worker before a case decision has been made. Utilize Dispo Review protocols when applicable to get the Bureau’s approval for transferring to IFS or case closure. Review and approve the Reunification Reassessment within 48 business hours of submission for approval.
		2. Review the Safety Assessment and Risk Reassessment Tools, in WebSDM, with the Social Worker during consultation about the case to determine the consistency and accuracy of the completed SDM Safety and Risk Reassessments.
		3. Enter any comments in Section 4: Comments when applicable. If the safety decision is different from the SDM recommended decision then the SWS II must document their approval in this box.
		4. Enter any comments in Section 3: Scoring and Overrides when applicable. Ensure that evidence and rationale for overrides are provided by the Social Worker and document approval of the override.
		5. Approve the completed SDM Safety Assessment within 24 hours of submission for approval.
		6. Review and approve the Risk Reassessment within 48 business hours of submission for approval.

7. **Continuing Services and Permanency and Transition (CRPU and ILSP)/Adoption Social Workers Responsibilities:**

The Continuing Services, Permanency and Transition/Adoption Social Worker will:

* 1. Review the eleven (11) *Caregiver Domains* and the twelve (12)

*Child/Youth/Young Adult Domains* prior to meeting with the family, youth or NMD.

* 1. Conduct interviews and FSNA/CSNA assessments.
	2. Prior to updating the Case Plan, the FSNA/CSNA must be completed in

collaboration with the family, youth, and/or NMD.

* 1. Complete the SDM FSNA/CSNA Tool before each Case Plan Update (i.e.

6-month review, reunification, NMD review).

* 1. For cases in which changing circumstances prompt the completion of a

new/updated safety assessment, complete the SDM Safety Assessment Tool, in WebSDM, and Safety Plan, in CWS/CMS, within two (2) working days of the safety assessment. Consult SWS II, develop, complete and sign the Safety Plan with the family prior to leaving the child in the home.

* 1. If the signed Safety Plan is insufficient in mitigating the safety threats,

then:

1. Consult with the SWS II to make the necessary revision(s).
2. Meet with the family to review and discuss needed revision(s) and re-sign the revised Safety Plan upon agreement.

	1. Provide family with a copy of the Safety Plan.
	2. If recommending to continue FR, complete the SDM Reunification

Reassessment and SDM FSNA Tools prior to each Status Review Hearing and/or per Division 31 requirements of at least once every six months AND prior to completing the updated Case Plan.

* 1. If recommending to continue FM, complete the SDM Family Risk

Reassessment for In-Home Cases and SDM FSNA Tools prior to each Division 31 required review of at least once every six months AND prior to completing the updated Case Plan.

* 1. If recommending FR to FM, complete the SDM Reunification

Reassessment and SDM FSNA Tools prior to each Status Review Hearing and/or per Division 31 requirements of at least once every six months AND prior to completing the updated Case Plan.

* 1. If recommending FR to PP, complete the SDM Reunification

Reassessment and SDM FSNA Tools prior to each Status Review Hearing and/or per Division 31 requirements of at least once every six months AND prior to completing the updated Case Plan.

* 1. If recommending to continue PP (including NMD and Adoptions),

complete the SDM CSNA Tool prior to each Review Hearing and/or per

Division 31 requirements of at least once every six months AND prior to completing the updated Case Plan.

* 1. If recommending closure (not including Legal Guardianship, NMD and

Adoptions), complete the SDM Safety and Risk Reassessment Tools prior to recommending Closure.

* 1. If recommending FM to FR, complete the SDM Safety and Risk

Reassessment and SDM FSNA Tools prior to each Status Review Hearing and/or per Division 31 requirements of at least once every six months AND prior to completing the updated Case Plan.

* 1. If recommending PP to FR, complete the SDM Reunification

Reassessment and SDM FSNA Tools prior to each Status Review Hearing and/or per Division 31 requirements of at least once every six months AND prior to completing the updated Case Plan.

* 1. If recommending PP to FM, complete the SDM Reunification

Reassessment, Safety Assessment and SDM FSNA Tools prior to each Status Review Hearing and/or per Division 31 requirements of at least once every six months AND prior to completing the updated Case Plan.

* 1. Obtain Supervisor approval as appropriate.

 The Continuing Services, Permanency and Transition/Adoption SWS II will:

1. Review the SDM FSNA/CSNA Tool in WebSDM with the Social Worker during consultation and review of the Case Plan to determine the consistency and accuracy of the completed SDM FSNA/CSNA and Case Plan. Compare assessment to previous assessments and ensure the priority needs are being addressed in the Case Plan and lesser priority needs are not. Ensure no safety issues or serious needs have been overlooked or omitted.
2. Enter any comments in Section 5: Comments when applicable.
3. Approve the completed SDM FSNA/CSNA within 48 hours of submission for approval.
4. Ensure that evidence and rational is provided for any overrides when court report recommendation is staffed. Document consultation with the Social Worker and approval of the override.
5. Discuss Reunification and Risk Assessments with Social Worker before a case decision has been made. Utilize Dispo Review protocols when applicable to get the Bureau’s approval for case closures. Review and approve the Reunification and Risk Reassessments within 48 business hours of submission for approval.
6. Be available to provide consultation to the Social Worker who is completing the Safety Plan with the family.
7. Review the Safety Plan completed by the family and the Social Worker immediately by phone before the Social Worker leaves the child in the home to evaluate whether safety threats are being mitigated by the agreed upon Safety Plan.
8. If a Safety Plan is required because a safety threat was identified, the SWS II must review the documentation and verify that a Safety Plan was completed by the Social Worker within 24 - 48 hours.
9. Sign the Safety Plan documenting approval.
10. If the signed Safety Plan is insufficient in mitigating the safety threats then:
11. Consult with the Social Worker to make the necessary revision(s).
12. Ensure the Social Worker meets with the family to review and discuss needed revision(s) and re-sign the revised Safety Plan upon agreement.
13. Review the Safety Assessment Tool in WebSDM with the Social Worker during consultation about the case to determine the consistency and accuracy of the completed SDM Safety Assessments.
14. Enter any comments in Section 4: Comments when applicable. If the safety decision is different from the SDM recommended decision then the SWS II must document their approval in this box.
15. Approve the completed SDM Safety Assessment within 24 hours of submission for approval.

8. **Social Work Supervisor II General SDM Responsibilities:**

1. Ensure Social Workers are completing all SDM Tools, in WebSDM, timely, consistently and accurately.
2. Review the SDM Hotline, Safety and Risk Assessment Tools, in WebSDM, prior to promotion to case, case transfer, change in recommendations, closure, and each decision point in a case or every six months, whichever comes first.
3. Timely review and approve all SDM Decision Overrides.
4. Timely review and approve all completed SDM Tools. Ensure there is a designated SWSII to approve Tools, in WebSDM, in one’s absence. Tools should not remain unapproved in WebSDM while the assigned SWSII is out/on vacation.
5. Ensure Social Workers are completing Safety Plans timely, consistently and accurately.
6. Regularly discuss SDM Tools and Definitions with Social Workers during case conferencing, supervision, and unit meetings.
7. Review and monitor Unit SDM Tool utilization on a monthly basis using SafeMeasures.
	* + 1. **Division Manager SDM Responsibilities:**
	1. Review and monitor Division SDM Tool utilization on a monthly basis using SafeMeasures.

**V. ATTACHMENTS**

1. SDM Quick Guides
2. Safety Plan

CONTACT PERSON: First line Supervisors and above may contact the Program Analyst with any questions regarding this Department Manual Section.



